assessment of personality disorder

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overview

• what are you assessing when you assess ‘personality disorder’?

• assessment options
  – targets, formats, tools

• interview skills

• what to do with your assessment findings
  – the importance of formulation

• top tips
core disorder
• borderline personality disorder
• antisocial personality disorder

associated/comorbid conditions
• substance dependence disorder
• post-traumatic stress disorder

effects of the disorder
• offending behaviour
• self-harm

environment
• disadvantaged neighbourhood
• abusive or neglectful relationships
overview

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targets

personality disorder?

personality?
<table>
<thead>
<tr>
<th>FFM</th>
<th>ASPD</th>
<th>NPD</th>
<th>BPD</th>
<th>AvPD</th>
<th>OCPD</th>
<th>SPD</th>
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</tbody>
</table>
formats

- Self-report questionnaires
- Semi-structured interviews
- Projective techniques
- Structured observations

Possible connections:
- Self to Self
- Self to Other
- Other to Self
- Other to Other
tools

self-report tests

• Millon Clinical Multiaxial Inventory (MCMI-III)
  - www.parinc.com

• Minnesota Multiphasic Personality Inventory 2\textsuperscript{nd} Edition (MMPI-2)
  - www.pearsonassessments.com/tests/mmpi_2.htm

• Personality Diagnostic Questionnaire (PDQ-4+)
  - www.pdq4.com/
tools
self-report tests

• Personality Assessment Inventory (PAI)
  - www.parinc.com

• Dimensional Assessment of Personality Pathology-Brief questionnaire (DAPP-BQ)
  www.sigmaassessmentsystems.com/assessments/dapp.asp

• Schedule for Non-adaptive and Adaptive Personality (SNAP)
  - www.upress.umn.edu/tests snap_products.html
tools
self-report tests

• NEO-Personality Inventory-Revised (NEO-PI-R)
  - www.parinc.com
• Inventory of Interpersonal Problems (IIP)
  - www.arts.uwaterloo.ca/~jmoakman/psych257-f98/iip.html
Lilienfeld & Fowler, 2006

advantages of self-report tests

self-as observer
economy
permits assessment of response styles
reliability
disadvantages of self-report tests

dishonesty
lack of insight
semantic aphasia
saturation with negative emotionality
low inter-correlations with other measures
tools

semi-structured interviews

• International Personality Disorder Examination (IPDE and IPDE-SQ)
  - www.parinc.com

• Structured Clinical Interview for DSM-IV Axis II Disorders (SCID-II and SCID-II-SQ)
  - www.scid4.org/scidupd.htm

• Structured Interview for DSM-IV Axis II Disorders (SIDP-IV and SIDP-IV SQ)
  - www.appi.org/book.cfm?id=8937
tools
semi-structured interviews

• Personality Disorder Interview-IV (PDI-IV)
  - www.parinc.com
• Personality Assessment Schedule (PAS)
  - www.scid4.org/scidupd.htm
• Psychopathy Checklist-Revised (PCL-R, PCL:SV, PCL-YV)
  - www.mhs.com; www.hare.org
advantages of interview methods

breath of coverage
depth of coverage
differential diagnosis
opportunity to detect hidden and blind regions
of the personality
Lilienfeld & Fowler, 2006

disadvantages of interview methods

lack of coherence in conceptual model
differential diagnosis
cultural context can be ignored
tools
structured observations
tools
projective techniques
Thematic Apperception Test

Murray & Morgan, 1930
### Standardised Assessment of Personality: Abbreviated Scale (SAPAS)

<table>
<thead>
<tr>
<th>Question</th>
<th>Y / N</th>
</tr>
</thead>
<tbody>
<tr>
<td>In general, do you have difficulty making and keeping friends?</td>
<td>Y / N</td>
</tr>
<tr>
<td>Would you normally describe yourself as a loner?</td>
<td>Y / N</td>
</tr>
<tr>
<td>In general, do you trust other people?</td>
<td>Y / N</td>
</tr>
<tr>
<td>Do you normally lose your temper easily?</td>
<td>Y / N</td>
</tr>
<tr>
<td>Are you normally an impulsive sort of person?</td>
<td>Y / N</td>
</tr>
<tr>
<td>Are you normally a worrier?</td>
<td>Y / N</td>
</tr>
<tr>
<td>In general, do you depend on others a lot?</td>
<td>Y / N</td>
</tr>
<tr>
<td>In general, are you a perfectionist?</td>
<td>Y / N</td>
</tr>
</tbody>
</table>
tools
choosing a test or method

• interview-based assessments considered the ‘gold standard’
  – conflicting information a problem

• self-report tests thought less valid for PD assessment if used alone
  – lack of insight and desire to deceive a problem

• method of assessment sensitive to problems assessed (Blackburn et al, 2004)
tools
choosing a test or method

• use self-report tests that have response style indices (e.g., MCMI-III, MMPI-2, avoid PDQ-4+)
• note the thematic or domain organisation of interviews (IPDE vs SCID-II)
• DSM-5 and ICD-11?
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core stages of the forensic clinical interview
core skills in forensic clinical interviewing
a personality-based approach to clinical interviewing
overview

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formulation: the art

organisational framework for producing a narrative that explains the underlying mechanism and proposes hypotheses regarding action to facilitate change
the purpose of case formulation

- organise
- mutual understanding
- connections
- intervention
- communication
Think about formulation development in 7 stages:

1. presenting problem & chief complaint
2. identify (a) *predisposing* (vulnerability) and (b) *protective* factors
3. hypothesise about the mechanism whereby the interactions between these factors generate the chief complaint
4. identify the developmental origins of the complaint
Think about formulation development in 7 stages:

5. identify potential triggers (*precipitating* factors) that can activate/aggravate the chief complaint at any one time

6. identify what is making this problem a persistent one (*perpetuating* or maintenance factors)

7. prepare hypotheses about (a) problem recurrence, (b) interventions required and (anticipated obstacles to effective intervention
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top tips

selecting relevant information:

• history is better than cross-sectional observation
• recent history is better than ancient history
• collateral information augments history from the patient
• signs are better than symptoms
• objective assessments are better than subjective judgements
• crisis-generated data are suspect
top tips

formulating a rational diagnosis:

• try to explain all the symptoms with the fewest diagnoses possible
• consider first disorders that have been present longer
• use family history as a guide
• use collateral sources of information to confirm or augment self-reported symptoms
• if all else fails, use the safest diagnosis
top tips

formulating a rational diagnosis:

• NB. disorders due to general medical conditions, or cognitive disorders, pre-empt all other diagnoses that could produce the same symptoms

• differentiate personality from personality disorder, and trait strength from functional impairment
top tips

Cooke & Hart (2004)

• PD is a **culture-bound** concept
  – *assessment is not independent of culture*

• PD is a **higher-order inferential** construct
  – *assessment requires information about multiple domains of functioning*

• PD is inherently relational
  – *assessment cannot rely only on self-report*
top tips

Cooke & Hart (2004) contd/...

• PD symptomatology is diverse
  – simple categorical systems fail to capture the diversity of PD

• PD is independent of acute mental disorder
  – symptoms of other mental health problems may be comorbid with PD symptomatology – or may mimic or mask PD
  – assessment has to take account of the potential impact of any comorbid mental disorder
top tips

Hart (2001)

• diagnosis of PD not thought to make a person incompetent to stand trial or not criminally responsible

• integrate information derived from multiple sources
  – resolve conflicts, do not rely on self-report
Hart (2001) contd/...:

3. provide information about the context in which personality disorder diagnoses are interpreted/ detected

4. communicate how and reasons why personality disorder is linked to legally relevant impairment or risk to others
top tips

Hart (2001) \textit{contd/...}:

5. beware role conflict (assessment vs treatment roles) and conflicts of interest

6. assess PD symptomatology using dimensional methods as well as categorical

7. when communicating findings, acknowledge the weaknesses of the assessment methods used
top tips

Hart (2001) contd/…:

8. be familiar with the law relevant to case

9. be prepared to discuss scientific and professional literature as it related to the legal issues at hand
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