

Matching Treatment to Personality:

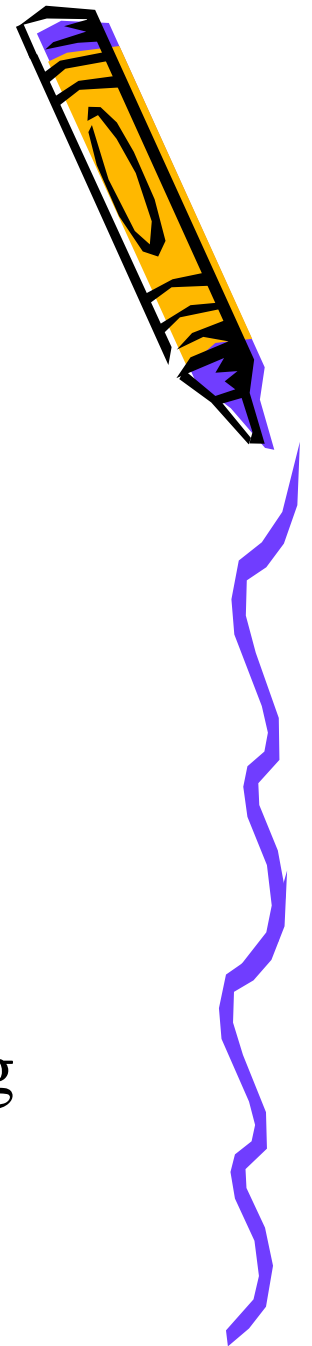
Improving Therapeutic Outcome

Presentation by Pam Vrooman, Ph.D.



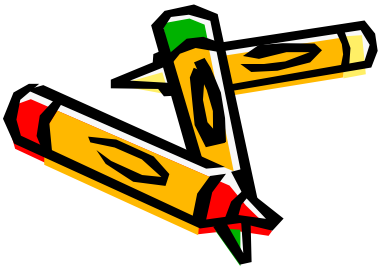
Learning Objectives

- Define relative terms of what constitutes personality
- Examine personality outcome research
- Identify five-factor personality models and appropriate testing instruments
- Illustrate strategy of matching treatment to personality
- Participate in conceptualization exercise using knowledge of personality



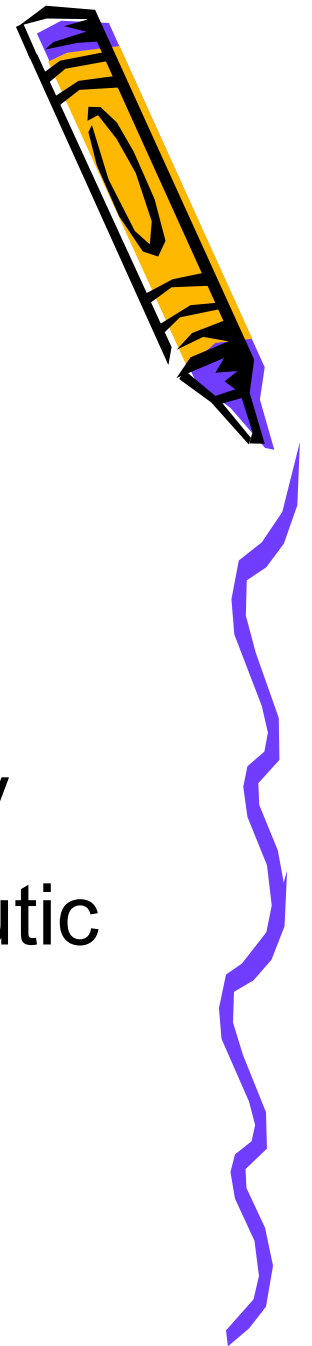
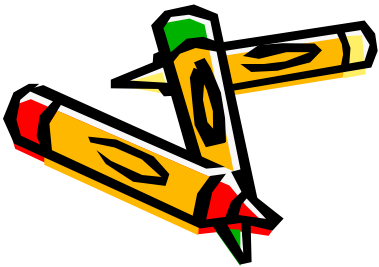
Historical Definitions of Personality

- Locus of control
- Dependency
- Psychological-Mindedness
- Ego Strength
- Authoritarianism
- Motivation
- Coping style
- Rorschach score combinations
- MMPI score combinations



Problems with early definitions of personality

- No consistent agreement
- Not informed by advances in factor analytic studies or personality theory
- No breakdown of individual therapeutic activities or therapy models



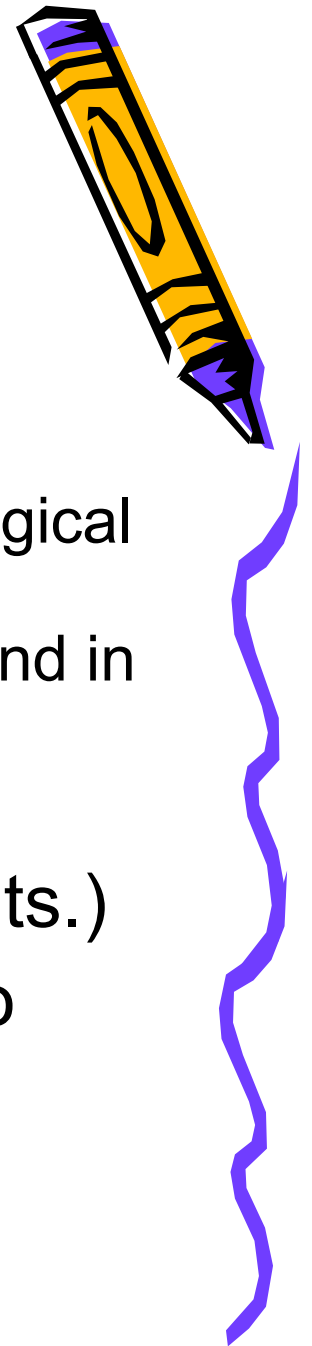
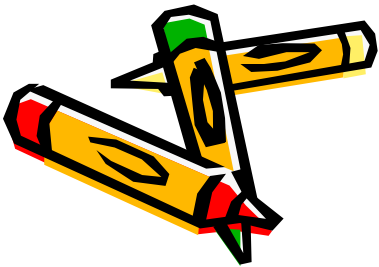
Personality Theory

- Study of personality, or individual differences, was late in developing due to indiscriminate and imprecise use of terminology.
- Traits, constructs, dimensions, scales meant different things to different researchers.
- Loevinger (1957) first articulated the elements of a science of human personality, now known as “constructive realism.”
- Factor analysis of personality studies revealed major replicable trait dimensions.
- Five Factor Model or “Big 5” is most common.



Basic Elements of Constructive Realism

- Traits are real.
 - Tellegen (1988) defined a trait as “a psychological structure underlying a relatively enduring behavioral disposition, ie a tendency to respond in certain ways under certain circumstances.”
- Traits are separate from constructs and measures. (The behaviors are not the traits.)
- Traits exist in individuals, but traits lead to population concepts.



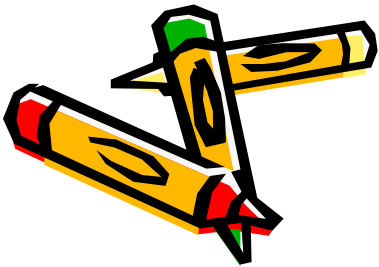
Why is this important?

- Helps therapist anticipate and understand client's private experience.
- Helps therapist understand and anticipate problems presented in treatment.
- Helps therapist formulate a practical treatment plan and anticipate opportunities and pitfalls for treatment.
- Gives better information on where to target change efforts.
- Generates more realistic expectations for change.
- Creates opportunities for increased self-knowledge for client.



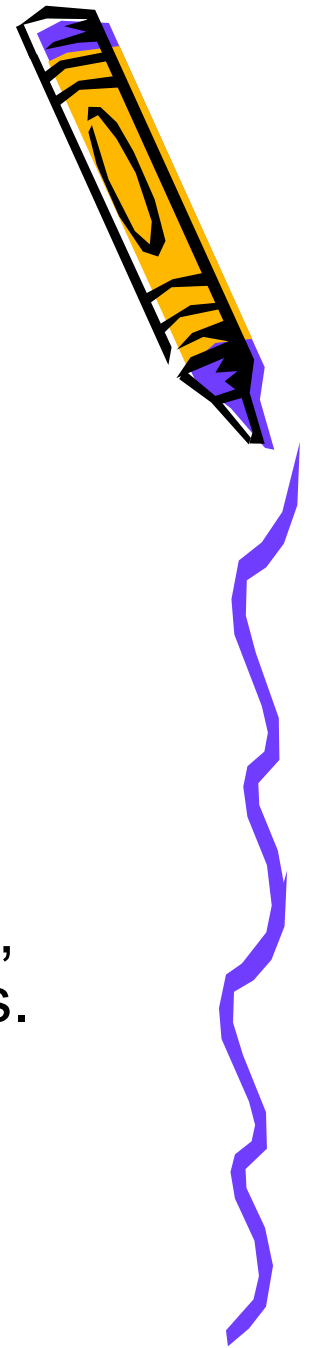
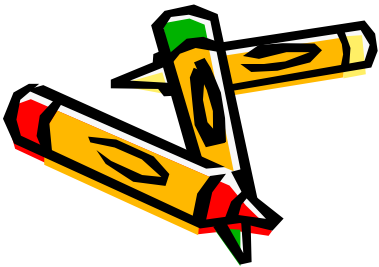
Harkness and Lillienfeld (1997)

- “Therapies differ dramatically in degree of structure, directedness, introspective demands, required verbal productivity, emotional precipitation, patient initiative, and depth of interpersonal interaction. If one seeks to have a patient stay in therapy, to remain engaged in the work, and to suffer as little discomfort as possible, then matching treatment to personality offers a strategy.”



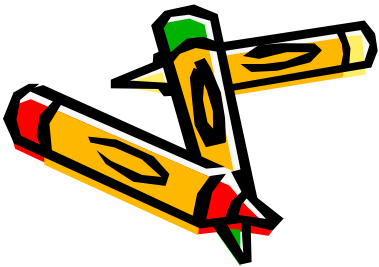
What are Five Factors?

- Neuroticism
- Extraversion
- Openness
- Agreeableness
- Conscientiousness
- Use acronym OCEAN to remember
- Factors are dimensions, so people vary on them, with most people falling in between the extremes.



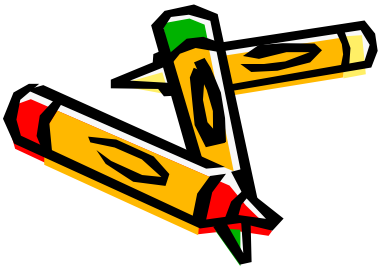
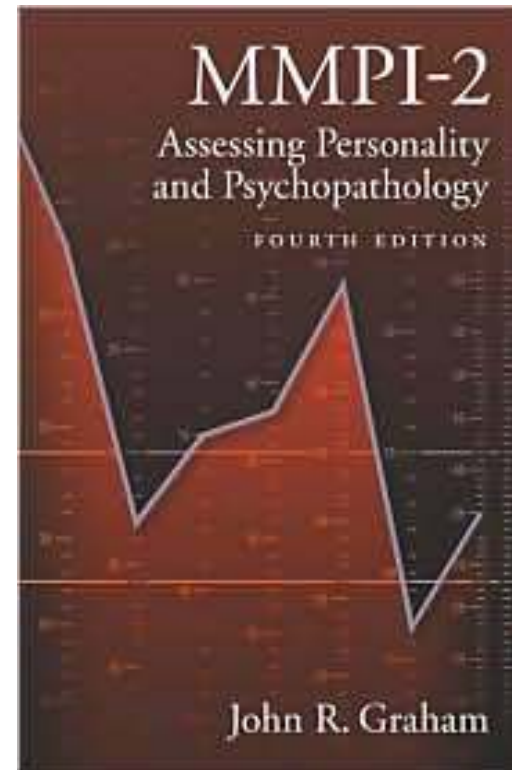
NEO Personality Inventory Revised (NEO-PI-R)

- Developed by Costa and McCrae (1985, 1989).
- Corresponds most clearly to underlying five factor model.
- Excellent psychometric properties.
- Developed on normal sample.



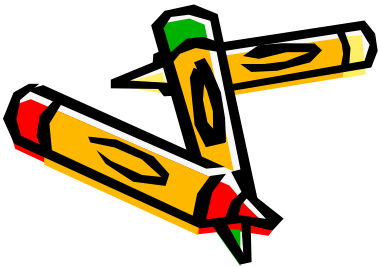
Minnesota Multiphasic Personality Inventory-2 PSY-5 Scales

- Developed from MMPI-2 with clinical norms
- Five factors are:
 - Aggression
 - Psychoticism
 - Constraint
 - Negative Emotionality (Neuroticism)
 - Positive Emotionality (Extraversion)



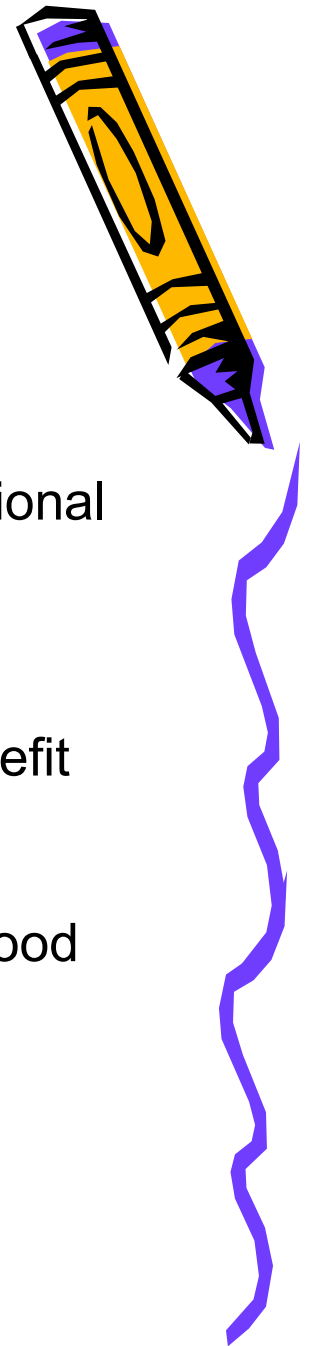
Neuroticism or Negative Emotionality

- Tendency to experience unpleasant emotional states easily, such as anger, anxiety, depression, or vulnerability. Sometimes called emotional instability.
- Level of neuroticism influences intensity of client's distress.



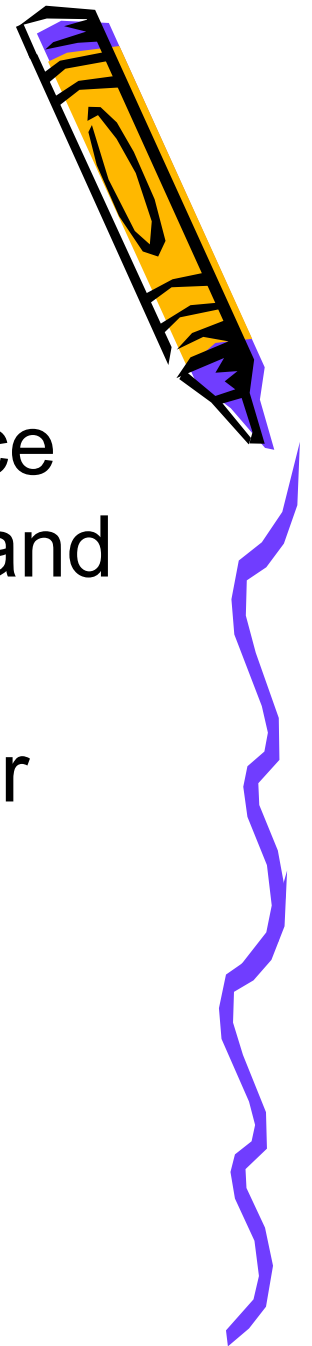
Treatment Characteristics of Neuroticism Levels

- High Neuroticism
 - Presents with variety of painful feelings
 - Problems include full gamut of neurotic misery
 - Psychological pain motivates compliance
 - Likely to remain uncomfortable
- Low Neuroticism
 - Presents with emotional blandness
 - Problems usually situational
 - Wants and can benefit from advice and clarification
 - May be misunderstood as defensiveness



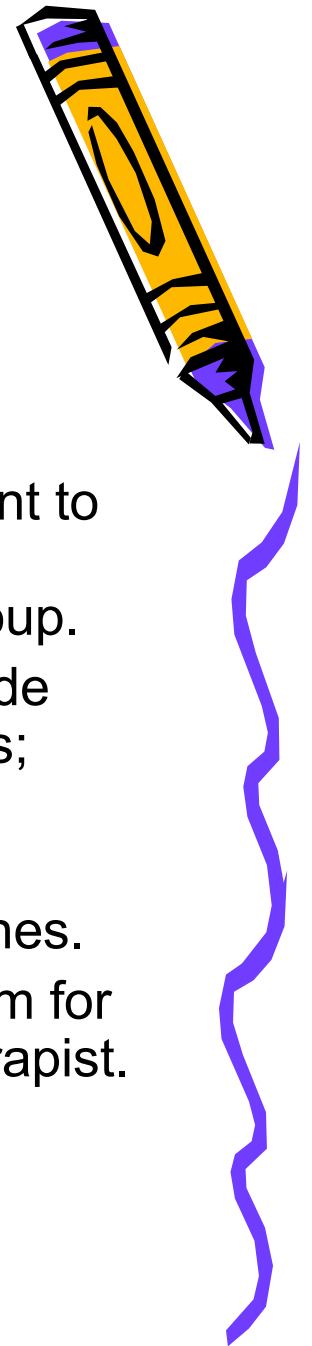
Extraversion or Positive Emotionality

- Tendency to have energy, experience positive emotions, seek stimulation and company of others.
- Influences the client's enthusiasm for treatment.



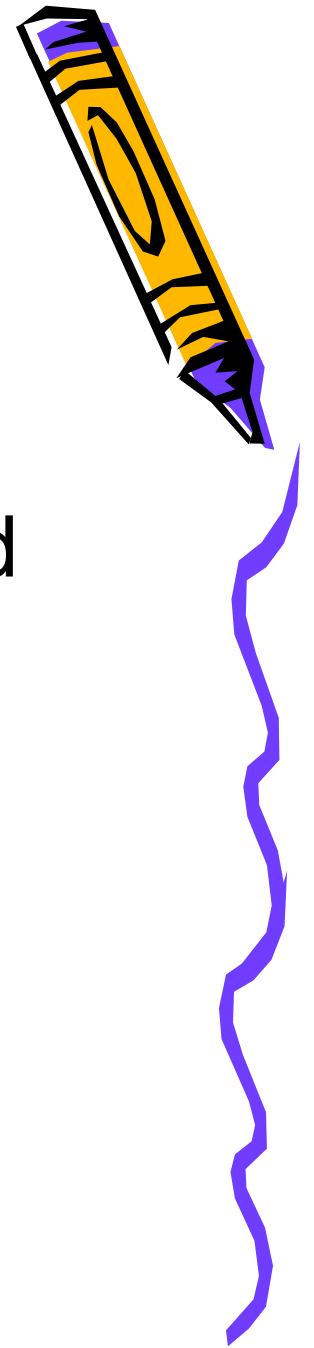
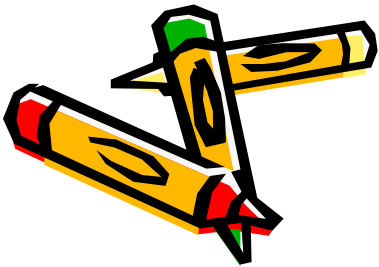
Treatment Characteristics of Extraversion Levels

- High Extraversion
 - Presents as needing to talk and needing people.
 - Problems can include excitability, interpersonal conflict, easily bored.
 - Comfortable with less structured approaches; optimistic and energetic.
 - Watch for talkativeness that blunts treatment focus.
- Low Extraversion
 - Presents as reluctant to talk; can be overwhelmed in group.
 - Problems can include being overly serious; apathy.
 - Comfortable with structured approaches.
 - Can lack enthusiasm for interaction with therapist.



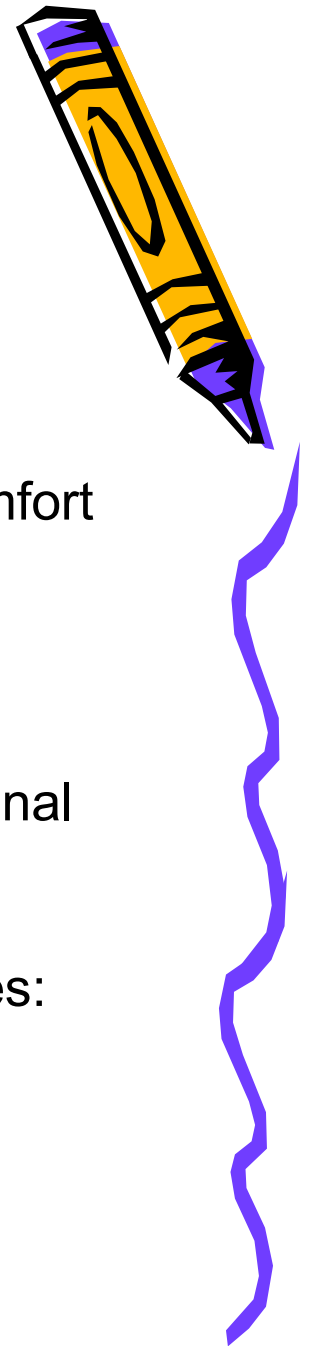
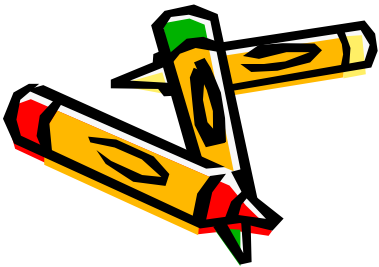
Openness

- Appreciation for art, emotion, adventure, imagination, curiosity and variety of experience.
- Influences client's reaction to therapist's interventions.



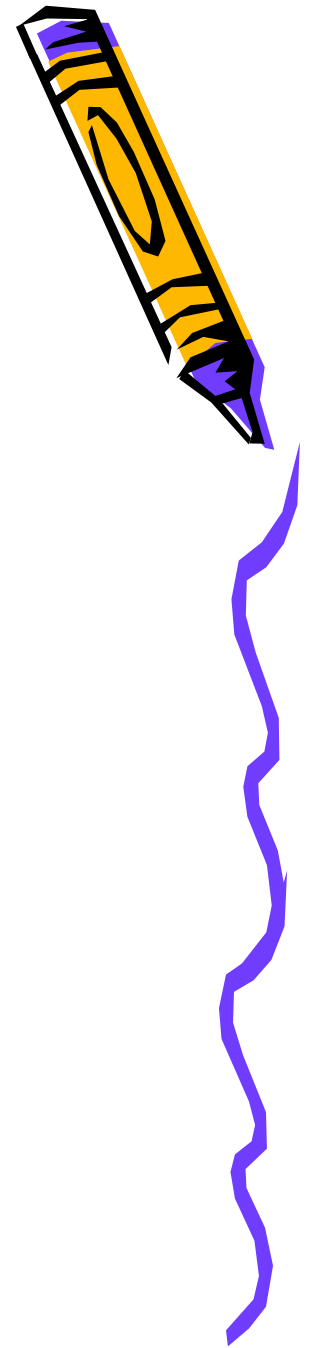
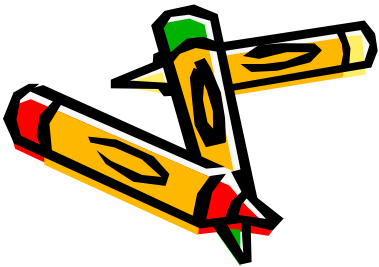
Treatment Characteristics of Openness Levels

- High Openness
 - Presents as liking variety, curious.
 - Problems vary but tend to be conceptualized in abstract, imaginative terms.
 - Prefers imaginative approaches.
 - Watch for excessive curiosity which can scatter resources.
- Low Openness
 - Present with discomfort in reacting to novel experiences.
 - Problems vary, but conceptualized in concrete, conventional terms.
 - Responds well to practical approaches: education, support, behavior therapy.
 - Rigidity and lack of curiosity can be misunderstood as resistance



Agreeableness

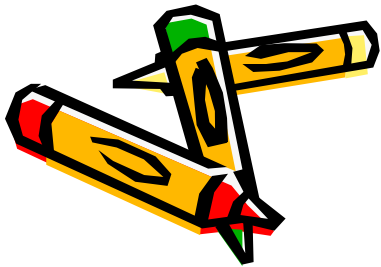
- Tendency to be compassionate and cooperative vs. suspicious and antagonistic towards others.
- Influences client's reaction to the person of the therapist.



Treatment Characteristics of Agreeableness Levels

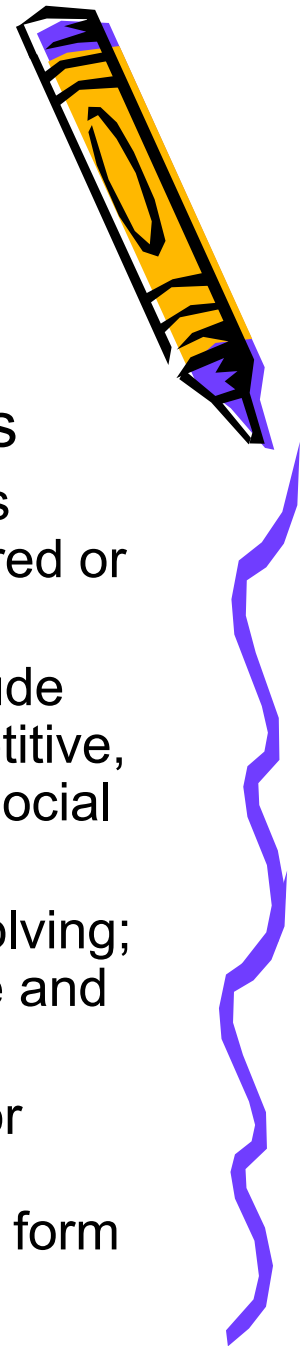
- High Agreeableness

- Presents as genuinely compassionate and generous.
- Problems may include naivety, gullibility, oversensitivity to criticism.
- Treatment alliance easily formed.
- Watch for need to please therapist.



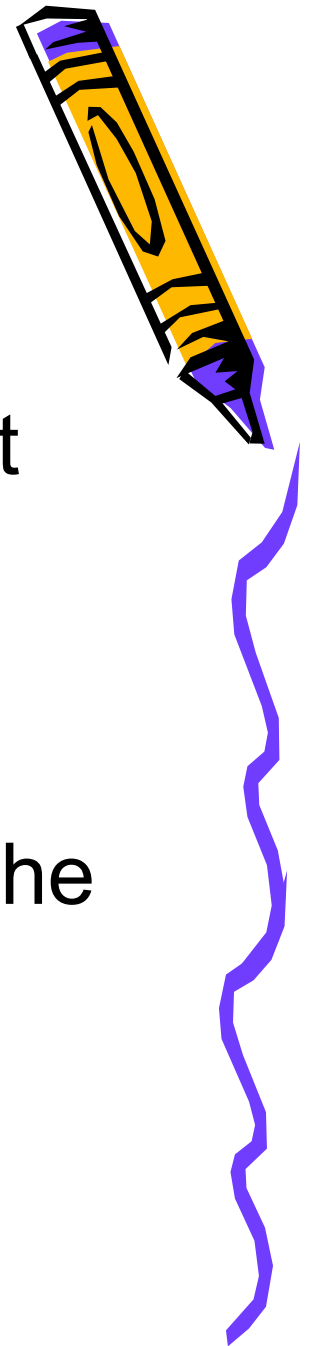
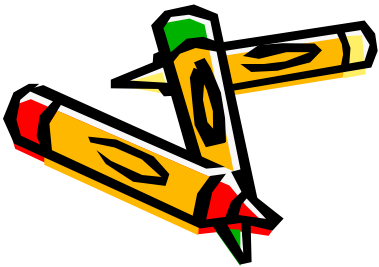
- Low Agreeableness

- Tends to present as wanting to be admired or be “somebody”
- Problems may include being overly competitive, unpopular, lack of social support.
- Good at problem solving; tend to be assertive and clear thinking.
- Watch for hostility or skepticism toward therapist; difficult to form alliance.



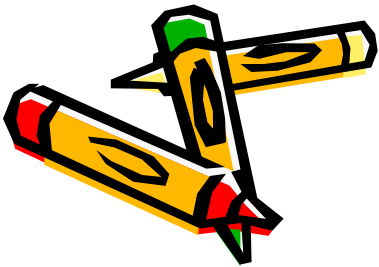
Conscientiousness

- Tendency to show self-discipline, act dutifully, and aim for achievement; planned rather than spontaneous behavior.
- Influences client's willingness to do the work of psychotherapy.



Treatment Characteristics of Conscientiousness Levels

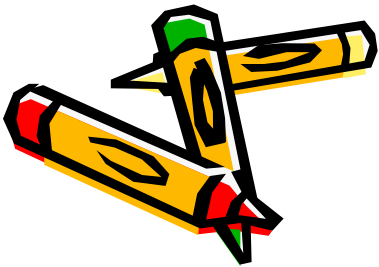
- High C
 - Presents as loving accomplishment; setting goals.
 - Problems may include overwork.
 - Tends to work hard to benefit from treatment; willing to tolerate discomfort and frustration.
- Low C
 - Presents as loving leisure
 - Problems may include low achievement, impulsivity.
 - Unlikely to do homework; likely to reject interventions requiring hard work.



Sample Vignette

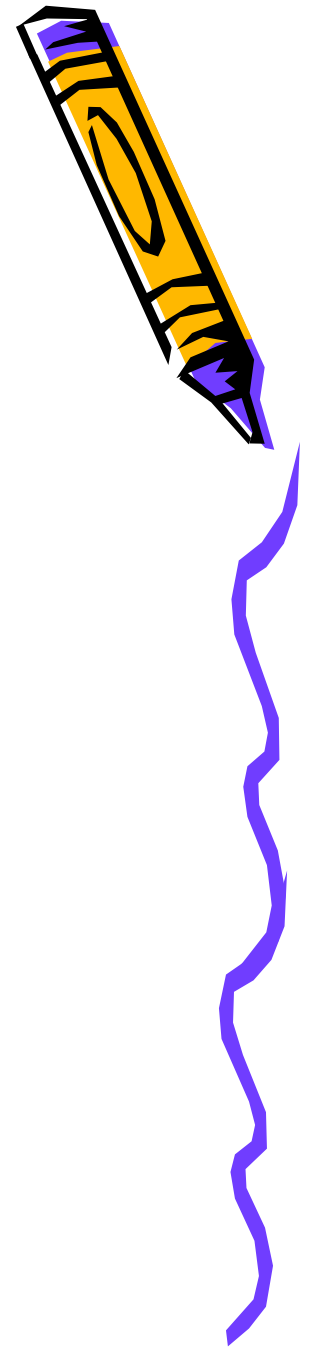
Harkness & Lillienfeld (1997)

- “Middle-aged man has high level of neuroticism. His aptitude for guilt, emotional upset, anxiety, and punitive self-criticism creates powerful negative reinforcement potential for any behavior that provides quick relief from these feelings. Through trial and error, he learns that cigarettes, fatty foods, alcohol, and the distraction from self-focus provided by tv provide brief islands of relief. Strong habits develop. His lifestyle is not shared by his partner, to whom it seems unattractive, causing increasing stress in the relationship.”



Basic Tendencies vs. Characteristic Adaptations

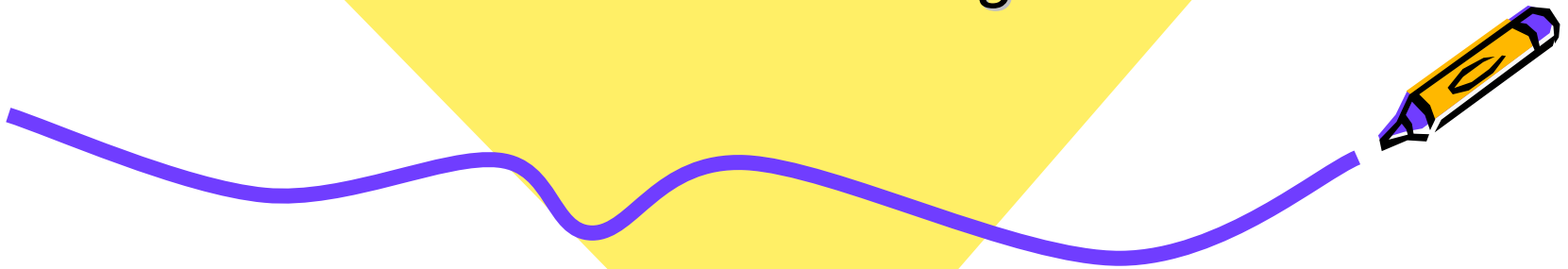
- Basic tendencies are the trait levels
 - High Neuroticism
- Characteristic adaptations are the behaviors
 - Smoking
 - Food and leisure choices
 - Drinking

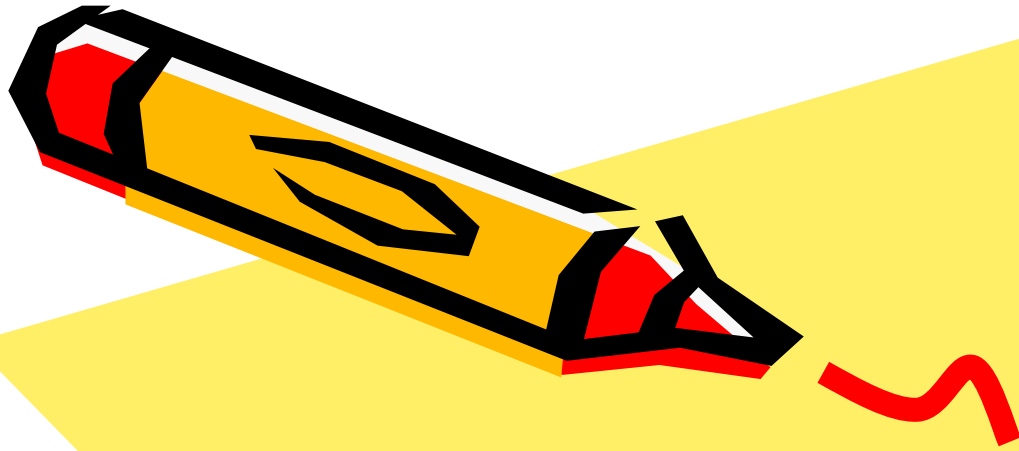




Target the Characteristic Adaptations!

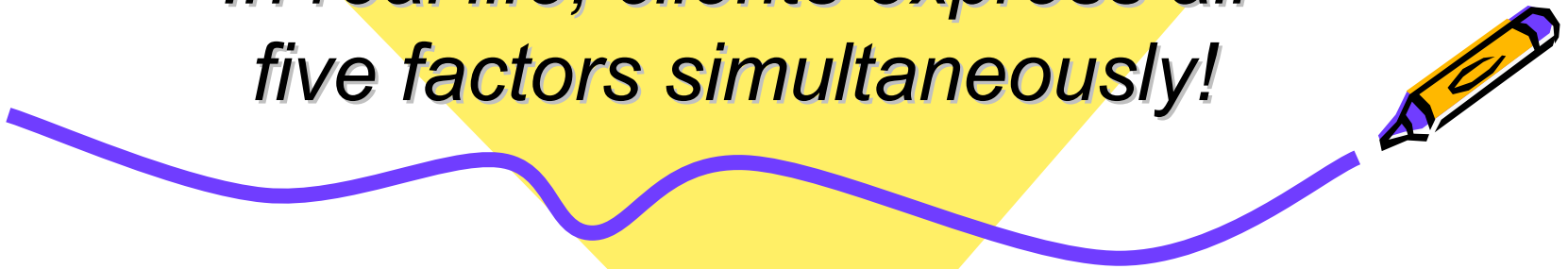
Traits don't tend to change much





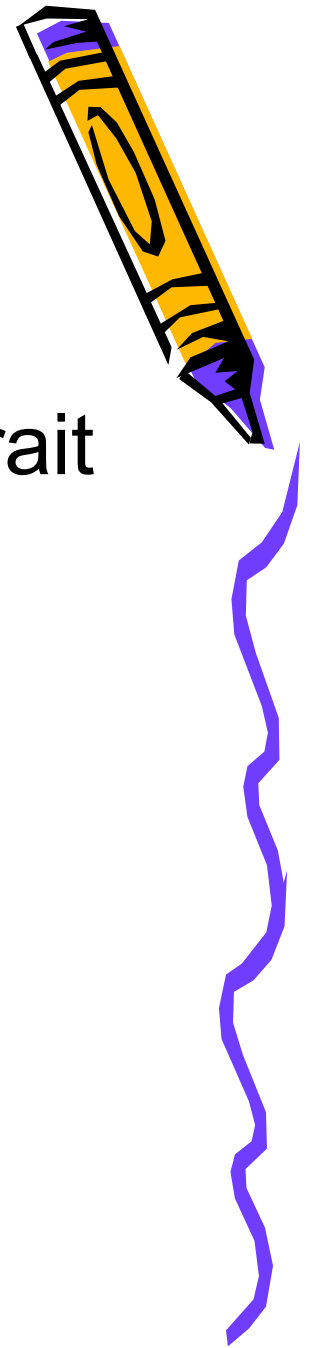
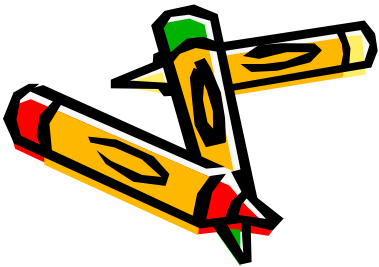
Caveat

In real life, clients express all five factors simultaneously!



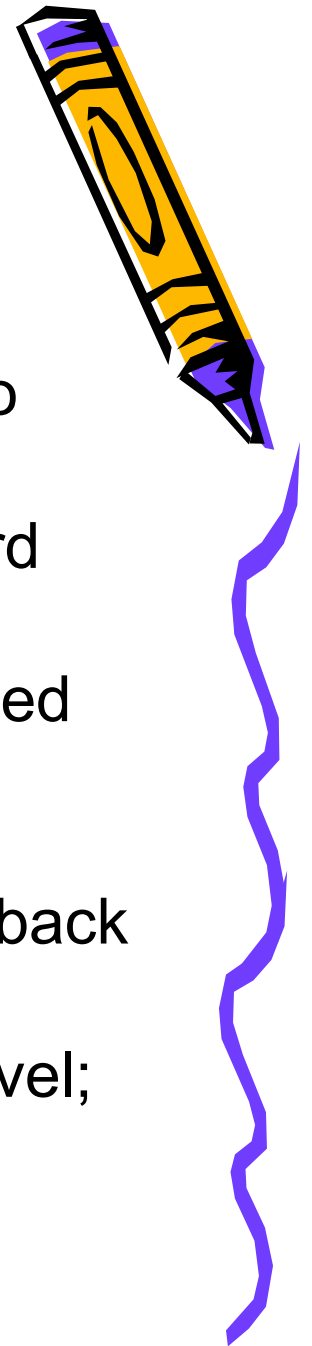
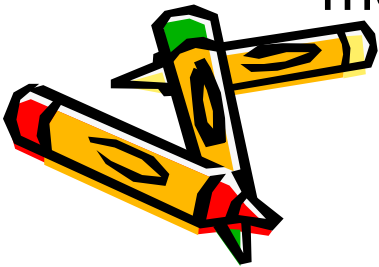
Sample vignette continued

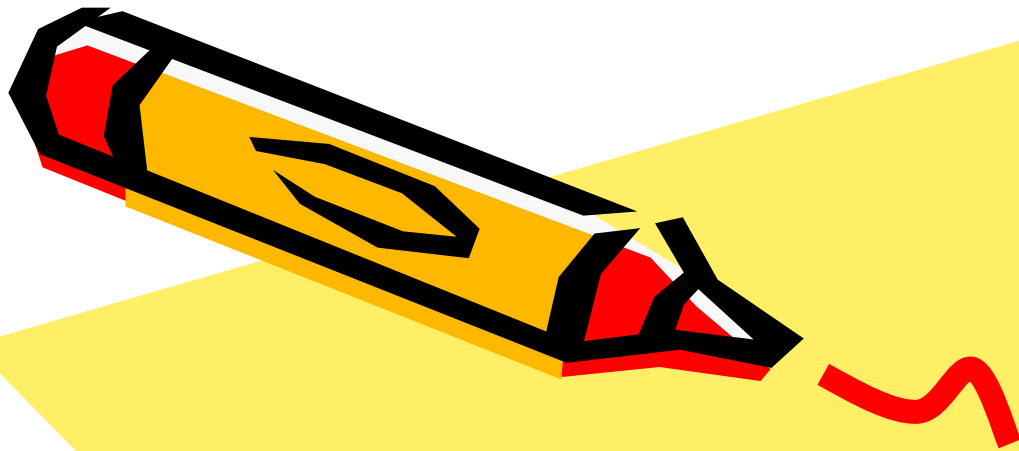
- Where does our client fall on other trait levels?
 - High openness
 - Average conscientiousness
 - High extraversion
 - Average agreeableness



Sample Vignette continued

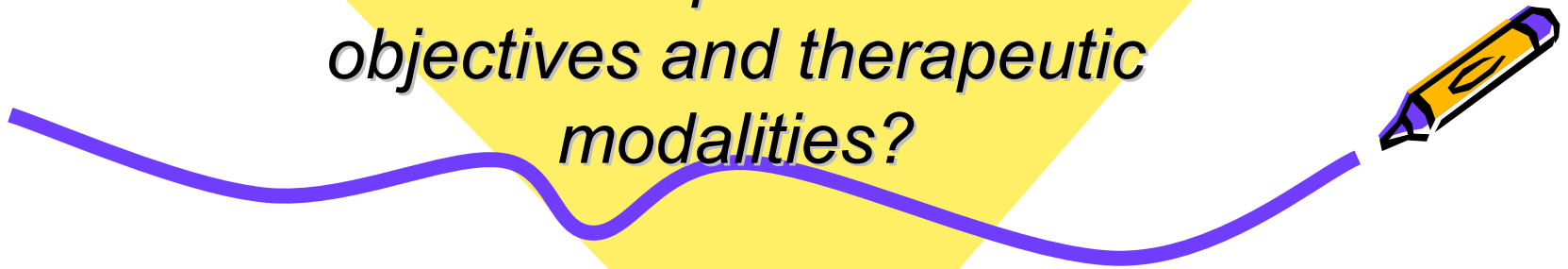
- What does that tell us?
 - High O: frame interventions as experiments to arouse curiosity
 - Average C: will probably work moderately hard but may need to account for leisure needs
 - High E: needs relationships, probably motivated to solve relationship issues; may benefit from group interventions or social alternatives
 - Average A: probably able to give honest feedback on how interventions are working
 - High N: benefit from self awareness of trait level; motivated by level of emotional pain





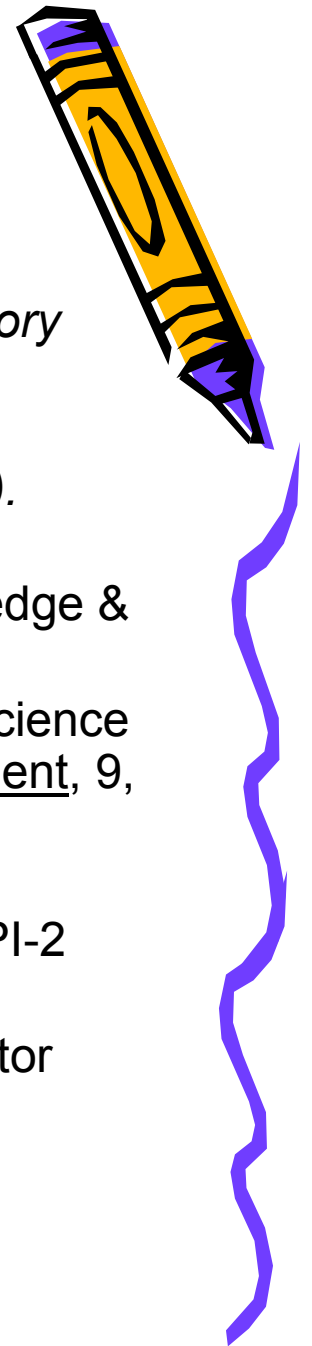
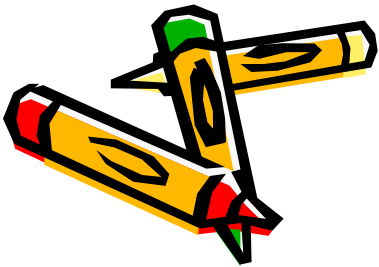
Your Turn

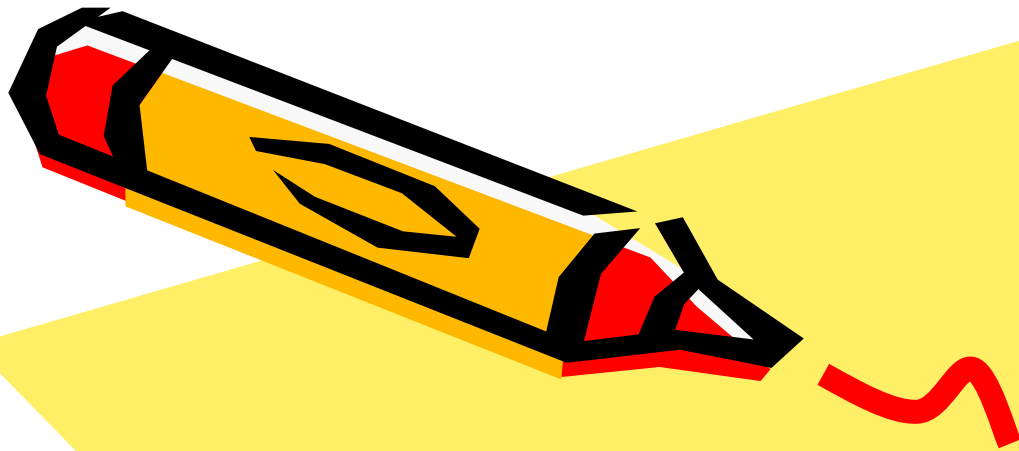
What are some potential treatment objectives and therapeutic modalities?



References

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Thank You!

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