

Personality Disorders

Code: 102541
ECTS Credits: 6

Degree	Type	Year	Semester
2502443 Psychology	OT	4	2

The proposed teaching and assessment methodology that appear in the guide may be subject to changes as a result of the restrictions to face-to-face class attendance imposed by the health authorities.

Contact

Name: Neus Vidal Barrantes
Email: Neus.Barrantes@uab.cat

Use of Languages

Principal working language: catalan (cat)
Some groups entirely in English: No
Some groups entirely in Catalan: Yes
Some groups entirely in Spanish: No

Teachers

Manel Monsonet Bardaji
Pilar Torrecilla González

Prerequisites

There is no specifically established prerequisite for this subject, but it is highly recommended that the student takes the Adult Psychopathology course (and ideally Childhood Psychopathology also). In this way the student has a complete vision of psychopathology (both states of mental disorder as well as personality organizations), a much deeper one than that offered in the course Psychopathology of the Vital Cycle (second year).

Objectives and Contextualisation

This subject is one of the optional courses included in the training that leads to the Mention of Adult Clinical Psychology, located academically in the fourth year of the Degree of Psychology.

Personality disorders, in all its degrees and wide variety, constitute a huge part of the daily work of the clinical psychologist. Personality is the matrix of vulnerability (and/or protection) towards psychopathology; that is, how we become sick depends on how we are. Therefore, one can not understand a mental disorder and design a psychological treatment separately from the personal "make up" of the individual. As studied in the first course, individual differences in subjective feelings and behavior reflect the interaction between genetic-biological temperament and the idiosyncratic environmental experience. In this subject, which specializes in the clinical manifestations of personality, the student becomes familiar with and learns (1) to identify the exaggerations and pathologies of personality, (2) how they distort the way individuals interact with the environment, (3) how certain forms of pathology are generated from this vulnerability matrix and the main theories that explain it, (4) how to explore and evaluate these impairments, (5) how all this affects the psychological treatment, and (6) the basic principles to treat these problems.

One of the important features of this subject is that it intends to outline a broad view of the complexity of factors that contribute to cause personality abnormalities (evolutionary, genetic, biological, relational, learning processes, socio-cultural...), which allows the student to articulate much of the knowledge previously acquired

throughout the degree in multiple subjects. This objective also allows the student to live the need to know several frameworks of reference if we want to understand the complexity of the phenomenon of the disordered personality, thus combining contributions made by different models in Psychology (for example, cognitive, behavioral, psychodynamic, systemic).

Therefore, the general goal of this subject is that the student knows in an integrated way the clinical presentation of personality disorders, their assessment and . More precisely, the specific goal of this subject are:

1. To integrate knowledge previously acquired to understand the relationship between normal and abnormal personality as well as between personality and mental disorder.
2. To know the clinical presentation, diagnostic formulation and main etiological hypotheses of personality disorders from an integrative perspective.
3. To familiarize students with the basic principles of psychological treatment in personality disorders.

Competences

- Actively listen to be able to obtain and synthesise relevant information and understand the content.
- Analyse and interpret the results of the evaluation.
- Apply knowledge, skills and acquired values critically, reflexively and creatively.
- Apply techniques to collect and produce information about the functioning of individuals, groups and organisations in context.
- Evaluate, contrast and take decision on the choice of adequate methods and instruments for each situation and evaluation context.
- Formulate hypotheses about the demands and needs of the recipients.
- Identify and recognise the different methods for assessment and diagnosis in the different areas applied to psychology.
- Maintain a favourable attitude towards the permanent updating through critical evaluation of scientific documentation, taking into account its origin, situating it in an epistemological framework and identifying and contrasting its contributions in relation to the available disciplinary knowledge.
- Obtain and organise relevant information for the service requested.
- Plan the evaluation of programmes of intervention.
- Recognise the determinants and risk factors for health and also the interaction between people and their physical and social environment.

Learning Outcomes

1. Analyse the content of clinical interviews related case studies in the field of clinical psychology with adults.
2. Analyse the quality of the information collected.
3. Analyse the risk factors affecting practical clinical cases.
4. Apply assessment techniques for each type of problem and level of complexity.
5. Apply assessment techniques.
6. Apply communication skills.
7. Apply knowledge, skills and acquired values critically, reflexively and creatively.
8. Criticize the validity of the results obtained in relation to measures of control and reliability of the test application conditions.
9. Differentiate the various methods and tools and their usefulness.
10. Distinguish different approaches to assessment and diagnosis and classify them according to the application context.
11. Maintain a favourable attitude towards the permanent updating through critical evaluation of scientific documentation, taking into account its origin, situating it in an epistemological framework and identifying and contrasting its contributions in relation to the available disciplinary knowledge.
12. Make a clinical case using the assessment results.
13. Plan post-treatment evaluation.

14. Plan the evaluation to be carried out during the intervention.
15. Recognise the key elements of narrative discourse or the results of a standardized assessment.
16. Recognise the main etiological influences of clinical problems and disorders in adults.
17. Recognise the stages of clinical assessment.
18. Relate theoretical contents (individual differences, psychological problems, symptoms) with the results of clinical assessment instruments.
19. Summarise the essential information to facilitate the process of formulating a case and differential diagnosis.

Content

BLOCK A - Key concepts and classifications in the field of Personality Disorders.

Topic 1. Abnormal personality: historical, conceptual and epistemological aspects.

Topic 2. Forms of description and understanding of personality disorders (TP).

BLOCK B - Description of Personality Disorders according to categorical classifications.

For each personality disorder (Themes 3 to 5) the following topics will be covered:

- a) Psychology and clinical manifestations.
- b) Diagnosis, course, epidemiology, differential diagnosis and comorbidity.
- c) Clinical assessment.
- d) Etiological hypotheses.

Topic 3. Personalities of the psychotic spectrum (paranoidism, schizoid, schizotypic).

Topic 4. Dramatic-emotional personalities (histrionism, narcissism, antisocial, psychopathy, borderline).

Topic 5. Anxious personalities (dependent, obsessive, avoidant).

BLOCK C - Therapeutic principles in Personality Disorders.

Topic 6. Treatment of personality disorders from an integrative perspective.

Methodology

The teaching methodology of the subject is designed so that the student can identify the psychological problems that we call as personality disorders, as well as the causative factors, the way of evaluating them and the fundamental principles of their treatment. For this purpose in this subject, the conceptual integration of previous learning will be greatly impelled. A very active and participatory attitude will be promoted in the classroom, mimicking the processes of discussion of cases in the clinical world.

The teaching methodology of this subject can be divided into three blocks:

Block 1. Targeted teaching. It is structured in two obligatory assistance activities:

1. The first consists of a series of **master classes** with support of multimedia technologies carried out in large groups. It is intended that the student be able to achieve the main theoretical concepts and offer an analysis of the diverse (and often competitive) visions about personality disorders. The duration of this activity will be two hours for all students in a module.
2. The second activity consists of **clinical seminars** that will be carried out in small groups under the principle of learning based on problems. In these practices, clinical cases will be analyzed where the

problem identification process will be worked, b) the diagnostic discussion and c) the case formulation, similar to what would be done in clinical sessions of the professional world. In this way, the student can proactively use the theoretical concepts that have been dealt with in the master classes. The duration of this activity, that the students will receive four times, will be of two hours distributed with the quarter of students of a module.

Bloc 2. Supervised activity. This optional activity aims to consolidate the theoretical and practical contents of the course and can be creatively designed between teachers and students so that individual concerns can be stimulated. Generically, it proposes approaching reality to the subject by encouraging experiential learning. It is about 'digging' into one's biography in search of an example illustrating any of the problems addressed in the subject, either experienced in one's own skin or in close others (familiar, friend, acquaintance). Ideally the case should be very well-known to being able to give details, always preserving anonymity and disguising real identity. Alternatively, the student can work on other types of psychobiographic materials in order to elaborate this case (e.g., a clinical case of the subject of External Practice, an interview made to a distant acquaintance, a literary or cinematographic character...). The task is to create a case with which other colleagues can practice the identification of symptoms, differential diagnosis, the elaboration of etiological hypotheses, case formulation, the design of the psychological assessment procedure and the therapeutic design. Models will be offered for how to elaborate these cases and their solution. The ultimate goal is to create a base of high-quality cases (the best one of each promotion) so that they can be used, for pedagogical purposes, in future promotions. This activity constitutes the 4th learning evidence and must be delivered 10 days before the final exam.

Bloc 3. Autonomous activity. Study activities of the student include, in addition to the study and bibliographical search, the reading of materials of specialized contents or complementary of special interest for the acquisition of the own competences of the subject.

N.B. The proposed teaching and assessment methodologies may experience some modifications as a result of the restrictions on face-to-face learning imposed by the health authorities. The teaching staff will use the Moodle classroom or the usual communication channel to specify whether the different directed and assessment activities are to be carried out on site or online, as instructed by the Faculty.

Activities

Title	Hours	ECTS	Learning Outcomes
Type: Directed			
Clinical seminars	12	0.48	1, 3, 2, 7, 6, 4, 5, 8, 12, 11, 13, 14, 15, 17, 16, 18, 19
Master classes with ICT support	24	0.96	3, 7, 6, 10, 9, 17, 16, 18
Type: Supervised			
Creation of a clinical case	13.5	0.54	1, 3, 2, 7, 6, 10, 12, 14, 15, 16, 18, 19
Type: Autonomous			
Autonomous study	58.5	2.34	3, 7, 10, 12, 11, 15, 17, 16
Reading texts	35	1.4	3, 7, 10, 9, 11, 16
Search for documentation in journals, books or the internet	4	0.16	1, 7, 11, 18

Assessment

The evaluation guidelines for the 2020-21 course of the Faculty of Psychology are:

<https://www.uab.cat/web/estudiar/graus/graus/avaluacions-1345722525858.html>

General Philosophy

The evaluation of the subject consists of three evidences of learning that consist of: two face-to-face written tests, individual multiple choice tests (evidence 1 and 2, with a weight of 35% and 45% respectively) and an open written test in group on a practical case (evidence 3, with a weight of 20% on the final grade).

Description of the Evidences of Learning

The evidences are oriented to show the student's ability to apply the concepts and theories worked in the directed teaching and the autonomous study of compulsory readings, as well as the competences worked in the clinical seminars:

- Evidence 1 (EV1): Individual, face-to-face multiple-choice written test. It will evaluate the subject matter included in Topics 1 to 4 (including the readings corresponding to these topics in the bibliography, not only the content strictly exposed in class). Total grade value: 35%. Score from 0 to 10. It will take place on the first assessment period. It is individual and face-to-face.

- Evidence 2 (EV2): Written face-to-face, individual, multiple-choice test. It will evaluate predominantly the subject matter of Topics 5 to 6 (including the readings corresponding to these topics in the bibliography, not only the content strictly exposed in class). Since it is a continuous assessment, and therefore the learning is cumulative, it can also integrate questions related to the internal topics (1 to 4, for example, to be able to make a differential diagnosis of the problems covered in topics 5 to 6 it will be necessary to have assimilated the psychological problems already dealt in topics 1 to 4). Total grade value: 45%. Score from 0 to 10. It will take place on the second assessment period. It is individual and face-to-face.

- Evidence 3 (EV3) is written, virtually delivered and done by group of students and consists in the elaboration of a case based on the experiences of some member of the group. Alternatively, although less desirable, it may be inspired in literature, cinema, series or other sources of interest (see Block B). The case should illustrate a problem addressed in the subject and pose it as a self-correcting exercise. Total grade value: 20%. Score from 0 to 10. The delivery period will be extended until the week before the second assessment period. It is carried out and delivered in groups of 4 to 5 people and it is worked autonomously.

Evaluation System

The calculation of the grade will result from the following formula:

EV1 EV2 EV3 Total

Grade 35% 45% 20% 100%

Definition of evaluable student:

According to the evaluation guidelines of the Faculty of Psychology, the student who provides evidences of learning 1, 2 and/or 3 with a weight equal to or greater than 40% is considered evaluable.

Definition of passing the subject:

To obtain a total of, at least, 5 points in the continuous assessment, with a minimum of 5 points (on a scale of 0 to 10) in the average of the three evidences. In case of not meeting this requirement, the maximum score that can be obtained is 4.9 points and the subject has not been passed.

Re-evaluation system:

Students may be presented for the final re-evaluation if they have not met the criteria established to pass the course, they have made evidences with a weight equal to or greater than 2/3 of the total score (that is, they have done at least EV1 and EV2 or EV2 and EV3) and they have obtained at least an average grade between 3.5 and less than 5 in the average of the three EVs. It will be held on the resit examination period. It is individual and face-to-face. The re-evaluation test consists of a single written test that integrates all the material worked on a continuous basis.

The qualification in the re-evaluation test will, in no case, substitute the grade, but it will be weighted by 0.25 as long as it is approved (equal or exceeds 5) and will be added to the previous grade obtained, being able to provide a maximum grade of 7.5.

No unique final synthesis test for students who enrol for the second time or more is anticipated.

Content of Evidences of Learning

Please see below the bibliography that must be studied to prepare EV 1 and 2 (see full references in the Bibliography section):

Test: Evidence 1	Material evaluated in the tests additional to the content presented in the classes
------------------	--

BLOCK A

Topic 1. Concepts	Chapter 1 - Current concepts (Caballo handbook)
	Chapter 2 - Models (Roca handbook)

Topic 2. Descriptions	Chapter 7 - Categorization and diagnosis (Roca handbook)
-----------------------	--

<i>BLOCK B</i>	<i>Note:</i> All other chapters belong to the handbook of V. Caballo
----------------	--

Topic 3. Psychotic PDs	Chapter 2 - Paranoid
	Chapter 3 - Eschizoide
	Chapter 4 - Schizotypic

Topic 4. Emotional PDs	Chapter 5 - Antisocial
	Chapter 6 - Borderline
	Chapter 7 - Histrionic
	Chapter 8 - Narcissist

Test: Evidence 2

Topic 5. Anxious PDs

Chapter 9 - Avoidant

Chapter 10 - Dependent

Chapter 11 - Obsessive-compulsive

Matters of block B that are not covered in the master classes and require autonomous study

Chapter 12 - TP Not specified

Chapter 13 - TP Relegated and forgotten

Chapter 15 - Evaluation of PDs

Chapter 16 - Clinical Formulation of PDs

BLOCK C

Topic 6. Treatments

A specific bibliography will be uploaded in September

Assessment Activities

Title	Weighting	Hours	ECTS	Learning Outcomes
EV1. Test 1 (topics 1,2,3,4)	35%	1	0.04	1, 3, 2, 7, 4, 10, 11, 15, 16, 18
EV2. Test 2.	45%	2	0.08	1, 3, 2, 7, 6, 4, 5, 8, 10, 9, 12, 11, 15, 17, 16, 18, 19
EV3. Development of a clinical case	20%	0	0	1, 3, 2, 7, 12, 13, 14, 16, 19

Bibliography

Academic manuals - Basic bibliography:

American Psychiatric Association (APA). (2002). Manual Diagnóstico y Estadístico de los Trastornos Mentales DSM-IV-TR. Barcelona: Masson.

American Psychiatric Association (APA). (2002). Manual Diagnóstico y Estadístico de los Trastornos Mentales DSM-IV-TR. Barcelona: Masson (*Ebook online*).

American Psychiatric Association (APA). (2013). Manual Diagnóstico y Estadístico de los Trastornos Mentales (5ª edición). Madrid: Panamericana.

American Psychiatric Association (APA). (2013). Manual Diagnóstico y Estadístico de los Trastornos Mentales (5ª edición). Madrid: Panamericana (*Ebook online*).

Caballo, V. (Coord.). (2004). *Manual de Trastornos de la Personalidad: Descripción, Evaluación, y Tratamiento*. Madrid: Síntesis.

Caballo, V. (Coord.). (2004). *Manual de Trastornos de la Personalidad: Descripción, Evaluación, y Tratamiento*. Madrid: Síntesis (*Ebook online*).

Roca, M. (Coord.) (2004). *Trastornos de la Personalidad*. Barcelona: Ars Médica.

Millon, T. (1998). *Trastornos de la Personalidad. Más allá del DSM-IV*. Barcelona: Masson.

Complementary bibliography (manuals):

American Psychiatric Association (APA). (2016). *Casos clínicos. DSM-5*. Madrid: Panamericana.

American Psychiatric Association (APA). (2016). *Casos clínicos. DSM-5*. Madrid: Panamericana (*Ebook online*).

American Psychiatric Association (APA). (2017). *Guía de estudio DSM-5*. Madrid: Panamericana.

American Psychiatric Association (APA). (2017). *Guía de estudio DSM-5*. Madrid: Panamericana (*Ebook online*).

Belloch, A. (2002). *Trastornos de personalidad*. Madrid: Síntesis.

Belloch, A., Fernández-Álvarez, H. (Coord.) (2010). *Tratado de Trastornos de la Personalidad*. Madrid: Síntesis.

Belloch, A., Fernández-Álvarez, H. (Coord.) (2010). *Tratado de Trastornos de la Personalidad*. Madrid: Síntesis (*Ebook online*).

Claridge, G. (1995). *Origins of Mental Illness. Temperament, Deviance and Disorder*. Cambridge, MA: Malor Books.

Costa, P.T., Widiger, T.A. (1994). *Personality Disorders and the Five-Factor Model of Personality*. Washington, DC: American Psychological Association.

Gabbard, G.O. (2000). *Psiquiatría Psicodinámica en la Práctica Clínica. (3ªEd)*. Buenos Aires: Editorial Médica Panamericana.

Gunderson, J.G., Gabbard, G.O. (2002). *Psicoterapia en los Trastornos de la Personalidad*. Barcelona: Editorial Ars Médica.

Gunderson, J.G., Links, P.S. (2008). *Borderline Personality Disorder: A Clinical Guide (2nd Edition)*. American Psychiatric Publishing: Arlington, VA.

Kernberg, O. (1984). *Trastornos Graves de La Personalidad: Estrategias Psicoterapéuticas (1987, Edit. Manual Moderno, México, D.F., México)*.

Lenzenweger, M.F., & Clarkin, J.F. (2005). *Major Theories of Personality Disorder (2nd Ed.)* New York: Guilford Press.

Linehan, M.M. (2003). *Manual de tratamiento de los trastornos de personalidad límite*. Barcelona: Paidós.

Livesley, W.J. (2003). *Practical Management of Personality Disorder*. New York: Guilford Press.

Millon, T., Davis, R. (2001). *Trastornos de la Personalidad en la Vida Moderna*. Barcelona: Masson.

Othmer, E., Othmer, S.C. (1996). *DSM-VI: La Entrevista Clínica. Tomo I: Fundamentos*. Barcelona: Masson.

Othmer, E., Othmer, S.C. (1996). *DSM-VI: La Entrevista Clínica. Tomo II: El Paciente Difícil*. Barcelona: Masson.

Organización Mundial de la Salud (1992). CIE-10. *Trastornos mentales y del comportamiento. Descripciones clínicas y pautas para el diagnóstico*. Madrid: Meditor.

Perris, C., McGorry, P.D. (1996) (Eds.). *Psicoterapia cognitiva para los trastornos psicóticos y de personalidad*. Manual teórico práctico. Desclée de Brouwer.

Schneider, K. (1968). *Las Personalidades Psicopáticas*. Madrid: Morata S.A.

Ustun, T. B., Bertelsen, A, Dilling, H., Drimmelen, J. van, Pull, C. et al. (1999). *Libro de casos de la CIE-10 : las diversas caras de los trastornos mentales*. Madrid : Editorial Médica Panamericana.

Valdés, M. (2002). *Trastornos de Personalidad*. A: Vallejo, J. (ed.): *Introducción a la Psicopatología y la Psiquiatría* (5ªed). Barcelona: Masson-Salvat.

Valdés, M. (1995). *Personalidad obsesiva*. A: Vallejo, J. (ed.): *Estados Obsesivos*. Barcelona: Masson.

Widiger, T. (Ed.) (2012). *The Oxford Handbook of Personality Disorders*. New York: Oxford University Press.

Widiger, T.A., Costa, P.T. (Eds.). (2012). *Personality Disorders and the Five-Factor Model of Personality*, Third Edition. American Psychological Association.

Reviews and articles of interest

Andersen AM, Bienvenu OJ. (2011). Personality and psychopathology. *Int Rev Psychiatry*, 23(3):234-47.

Depue RA, Fu Y. (2011). Neurogenetic and experiential processes underlying major personality traits: implications for modelling personality disorders. *Int Rev Psychiatry*, 23(3):258-81.

Gabbard, G.O. (2005) *Mente, cerebro y trastornos de personalidad*, *Am J Psychiatry*, 162: 648 - 655.

Gumley, A. (2011). Metacognition, affect regulation and symptom expression: a transdiagnostic perspective. *Psychiatry Research*, 30, 72-8.

Herpertz, S.C., Bertsch, K. (2014). The social-cognitive basis of personality disorders. *Current Opinion in Psychiatry*, 27(1):73-7.

Pull, C.B. (2014). Personality disorders in Diagnostic and Statistical Manual of Mental Disorders-5: back to the past or back to the future? *Current Opinion in Psychiatry*, 27(1):84-6.

Rosel, D.R., Futterman, S.E., McCaster, A., Siever, L.J. (2014). Schizotypal Personality Disorder: A current Review. *Curr Psychiatry Rep.*, 17(7): 452. doi:10.1007/s11920-014-0452-1.

Simonsen, S., Bateman, A., Bohus, M., Dalewijk, H.J., Dore (2019). European guidelines for personality disorders: past, present and future. *Borderline Personality Disorder and Emotion Dysregulation*, 6, UNSP 9.

Trull TJ, Widiger TA. (2013). Dimensional models of personality: the five-factor model and the DSM-5. *Dialogues Clin Neurosci*;15(2):135-46.

Zachar, P. Krueger, R.F., Kendler, K.S. (2016). Personality Disorder in DSM-5: An Oral History. *Psychological Medicine*, 46, 1-10. doi:10.1017/S0033291715001543.

Specific Complementary Bibliography on the Evaluation of Personality Disorders

Cloninger, C.R., Przybeck, T.R., Svrakic, D.M., Wetzel, R.D. (1994). *The Temperament and Character Inventory (TCI): A Guide to its Development and Use*. Missouri: Center for Psychobiology of Personality.

Loranger, A.W., Janca, A., Sartorius, N. (1997). *Assessment and Diagnosis of Personality Disorders*. IPDE. Cambridge: CambridgeUniversity Press.

Miller, W.R., Rollnick, S. (eds.) (1996). *Motivational Interviewing*. New York: The Guilford Press.

Tyrer, P., Reed, G.M., Crawford, M.J. (2015). Classification, Assessment, Prevalence, and Effect of Personality Disorder. *Lancet*, 385: 717-26.

Specific Complementary Bibliography on Treatments of Personality Disorders

Asociación Americana de Psiquiatría (2002). *Guía Clínica para el Tratamiento del Trastorno Límite de la Personalidad*. Barcelona: Ars Médica.

Bateman, A., Brown, D., Pedder, J. (2000). *Introduction to Psychotherapy. An Outline of Psychodynamic Principles and Practice* (3rd ed.). London: Routledge.

Bateman, A., Gunderson, J., Mulder, R. (2015). Treatment of Personality Disorder. *Lancet*, 385: 735-43.

Beck, A.T., Freeman A. (1995). *Terapia Cognitiva para los Trastornos de la Personalidad*. Barcelona: Paidós.

Beck, J.S. (2000). *Terapia Cognitiva: Conceptos Básicos y Profundización*. Barcelona: Gedisa.

Clark, D.M., Fairburn, C.G. (Eds.) (1997). *Science and Practice of Cognitive Behaviour Therapy*. Oxford: Oxford University Press.

Ellis, A. (1999). *Una Terapia Breve Más Profunda y Duradera. Enfoque Teórico de la Terapia Racional Emotivo-Conductual*. Barcelona: Paidós.

Feliu-Soler, A., Pascual, J.C., Elices, M., Martín-Banco, A., Carmona, C., Cebolla, A., et al. (2017). Fostering Self-Compassion and Loving-Kindness in Patients with Borderline Personality Disorder: A Randomized Pilot Study. *Clinical Psychology and Psychotherapy*, 24, 278-286.

Guidano, V.F., Liotti, G. (1983). *Cognitive Processes and Emocional Disorders: A Structural Approach to Psychotherapy*. New York: Guilford.

Linehan, M.M. (2003). *Manual de Tratamiento de los Trastornos de Personalidad Límite*. Barcelona: Paidós.

Luborsky, L. (1984). *Principles of Psychoanalytic Psychotherapy. A Manual for Supportive-Expressive Treatment*. New York: Basic Books.

Mahoney, M., Freeman, A. (Eds.). (1985). *Cognition and Psychotherapy*. New York: Plenum.

Oldham, J.C. (2019). Inpatient Treatment for Patients With Borderline Personality Disorder. *Journal of Psychiatric Practice*, 25, 177-188.

Paris, J. (2008). *Treatment of Borderline Personality Disorder: A Guide To Evidence Based Practice*. The Guilford Press: New York, NY.

Perris, C., McGorry, P.D. (Eds.). (1998). *Cognitive Psychotherapy of Psychotic and Personality Disorders. Handbook of Theory and Practice*. Chichester: Wiley.

Ryle, A. (1991). *Cognitive-Analytic Therapy: Active Participation in Change. A New Integration in Brief Psychotherapy*. Chichester: Wiley.

Safran, J.D., Segal, Z.V. (1990). *Cognitive Therapy: An Interpersonal Process Perspective*. New York: Basic Books.

Interesting web links:

Revistes especialitzades:

<http://www.apa.org/pubs/journals/per/>

<http://www.guilford.com/cgi-bin/cartscript.cgi?page=pr/jnps.htm>

www.apa.org - American Psychological Association

