



### I30 Schema-Focused Therapy (SFT) in Forensic Patients With Personality Disorders: A Theoretical Model and Recommendations for Best Clinical and Preliminary Findings of a Multicenter Randomized Clinical Trial in the Netherlands

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**Learning Overview:** After attending this presentation, attendees will understand, from a psychotherapy model, a forensic modification of SFT and will be equipped to make recommendations for its implementation in forensic clinical practice.

**Impact on the Forensic Science Community:** This presentation will impact the forensic science community by discussing how availability and development of SFT could be an effective treatment for severe personality disorders in forensic patients. The analysis includes three years' work with treatment professionals in the Netherlands to adapt and integrate SFT (also known as "Schema Therapy") in their work with forensic patients.

**Introduction:** SFT was developed by Jeffrey Young as a treatment for patients with personality disorders and other difficult-to-treat problems, who often show poor outcomes in other forms of therapy. In a multi-center randomized clinical trial that was completed in the Netherlands, patients with borderline personality disorder who were given SFT showed substantial improvements in their symptoms and functioning over a three-year course of treatment, as well as over subsequent one-year follow-up intervals. It was in this spirit that Bernstein, Arntz, et al. undertook the project of adapting and testing the efficacy of SFT methods in forensic patients with personality disorders.<sup>1</sup> Patients with severe personality disorders, such as those often seen in forensic settings, present special challenges because of their fluctuating emotional states. In the SFT model, these states are conceptualized as "Schema Mode." Recent research suggests that standard cognitive and behavioral approaches are only of limited effectiveness in forensic patients with personality disorders. SFT may provide a more effective alternative for forensic patients with personality disorders.

**Results:** From a SFT perspective, one can understand a forensic psychiatric institution as a complex group dynamic in which the patient's Schema Modes evoked corresponding Schema Modes in various staff members, including the therapist.

Schema Mode Work is the preferred form of SFT practice with more severe personality disorders, such as antisocial, borderline, narcissistic, and paranoid personality disorders, which are the most prevalent personality disorders in forensic settings. It is proposed that the Schema Mode model be expanded to include four new Schema Modes that appear to be common in forensic patients, beyond the 11 original modes that were proposed by Young and colleagues. Schema Modes often play themselves out in a predictable pattern. In some instances, these temporal sequences of unfolding Schema Modes may help to explicate the events leading up to and culminating in the commission of crimes.

From a Schema Mode perspective, it is hypothesized that highly psychopathic patients make prominent use of some of the most maladaptive and destructive Schema Modes; particularly predator, conning, self aggrandizer and bully and attack.

SFT principles and methods have been integrated into each phase of treatment from intake to discharge. The goal of Forensic SFT is to reduce the patient's reliance on maladaptive coping modes by: breaking through the patient's emotional detachment to access and heal their "Vulnerable Child Mode." The findings are preliminary, but they suggest that SFT may be a promising form of treatment for forensic patients with personality disorders. The apparent success of SFT patients in getting permission for leave is an important clinical indication that they are being judged to have a lowered level of risk.

**Conclusion:** This study's adaptation of SFT for forensic patients and recommendations for clinical practice represent a work in progress. They will need to await the findings from their complete sample before making more definitive recommendations regarding triage to SFT for forensic patients with antisocial, borderline, narcissistic and paranoid personality disorders. The ongoing research will provide more insight into the mechanism that explains the apparent effectiveness of SFT in forensic personality disorders patients, including some psychopathic patients. The group is engaging in a board research program to answer questions about the effectiveness of SFT in forensic populations, such as which patients benefit the most from SFT. It is hoped that this study inspires others to investigate other promising forms of therapy for forensic patients with personality disorders. Randomized clinical trials remain the goal standard for investigating the effectiveness of treatment. Without them, there is likely to be little progress in determining what is effective for this highly challenging group of patients.

#### Reference(s):

1. David P. Bernstein, Arnoud Arntz, and Marije de Vos. Schema Focused Therapy in Forensic Settings: Theoretical Model and Recommendations for Best Clinical Practice. *International Journal of Forensic Mental Health* 2007, Vol. 6, No. 2, pages 169-183.

#### Forensic Setting, Personality Disorders, Schema Therapy