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Original article

## Uncovering personality structure with the *Inventory of Personality Organization*: An exploration of factor structure with a Portuguese sample

*Révéler la structure de la personnalité avec l'Inventaire de l'organisation de la personnalité : exploration de la structure factorielle avec un échantillon portugais*

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### ABSTRACT

**Introduction.** – The *Inventory of Personality Organization* (IPO) is a self-report measure intended to assess the severity of personality disturbance according to Otto F. Kernberg's model.

**Objective.** – To study factor structure and psychometric properties of the Portuguese version of IPO (IPO-Pt).

**Method.** – Two independent samples of 586 individuals each were used for exploratory and confirmatory factor analyses. Different models were compared in terms of reliability and validity.

**Results.** – A three-factor solution resulted, comprising dimensions labeled as Instability of Self, Instability of Others, and Psychosis. Internal consistency and temporal stability yielded acceptable to excellent results. Correlations with measures of self-concept coherence, emotion dysregulation, psychoticism, symptom severity, and personality disturbance were as expected, and sensitivity to clinical status was confirmed.

**Conclusion.** – IPO-Pt shows encouraging psychometric qualities and its latent structure resonates with important aspects of Kernberg's model, previous findings, and the DSM-5 level of personality functioning scale.

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### R É S U M É

**Introduction.** – L'*Inventaire de l'organisation de la personnalité* (IOP) est une mesure d'auto-évaluation destinée à évaluer la gravité des troubles de la personnalité selon le modèle d'Otto F. Kernberg.

**Objectif.** – Étudier la structure factorielle et les propriétés psychométriques de la version portugaise de l'IOP (IOP-Pt).

**Méthode.** – Deux échantillons indépendants de 586 personnes chacun ont été utilisés pour des analyses factorielles exploratoires et confirmatoires. Différents modèles ont été comparés en termes de fidélité et validité.

**Résultats.** – Une solution à trois facteurs a été obtenue, comprenant des dimensions dénommées « Instabilité du Soi », « Instabilité des Autres » et « Psychose ». La consistance interne et la stabilité temporelle étaient acceptables à excellentes. Les corrélations avec les mesures de la cohérence du concept de soi, la dérégulation émotionnelle, le psychotisme (ou tendance psychotique), la sévérité des symptômes et les troubles de la personnalité étaient conformes aux prévisions, et la sensibilité à l'état clinique a été confirmée.

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*Conclusion.* – L'IOP-Pt démontre des qualités psychométriques prometteuses et sa structure factorielle est cohérente avec des aspects importants du modèle de Kernberg, les résultats précédents et l'échelle des niveaux de fonctionnement de la personnalité du DSM-5.

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The recent fifth edition of the *Diagnostic and Statistical Manual of Mental Disorders* (DSM-5; American Psychiatric Association [APA], 2013) features an alternative model for the domain of personality disorders, previously addressed in strictly descriptive, atheoretical, typological, and categorical terms (e.g., DSM-IV-TR, Axis II; APA, 2010). Expressing the growing interest in dimensional classification, Section III introduces the *level of personality functioning scale*, intended to assess personality pathology in a *severity continuum* above and beyond typological classification. Along this continuum, difficulties pertaining to the views of self and others, recognized as central to every personality disorder, are considered (Bender, Morey, & Skodol, 2011) – specifically, identity, self-direction, empathy, and intimacy are addressed (APA, 2013).

The understanding of personality pathology as a combination of two orthogonal axes representing type/style and severity has been a hallmark in psychoanalytic models (McWilliams, 2011; Westen, Gabbard, & Blagov, 2006). In particular, Otto F. Kernberg authored one of the most influential contributions to the study of the severity/health-sickness axis, also viewed as a developmental or maturational dimension (McWilliams, 2011). In his model, personality organization (PO) is described in a continuum ranging from normal-neurotic functioning, through high and low borderline levels, and ending in the psychotic pole (e.g., Caligor, Kernberg, & Clarkin, 2007; Clarkin, Yeomans, & Kernberg, 2006; Kernberg, 2004; Kernberg & Caligor, 2005). Although borderline-level PO underlies most of the personality disorders considered in the categorical-typological approach held in DSM's Axis II, including but not limited to the borderline personality disorder *stricto sensu* (Caligor et al., 2007), the PO dimension is sensible to a range of variations from healthy personality functioning and may be useful in identifying "subthreshold" personality difficulties (Blagov, Bradley, & Westen, 2007) poorly covered by categorical approaches. Additionally, its structural approach may help in uncovering different meanings in common symptoms according to diverse underlying levels of PO (Kernberg, 2004).

Within this framework, variations in PO are a function of *identity consolidation* (the subjective experience of a stable and realistic sense of self and others, as opposed to unstable, polarized, and unrealistic representations), *defensive operations* (from mature defenses to the predominance of primitive defenses, i.e., unconscious emotion regulation strategies involving separation of positive and negative sectors of experience, or splitting), and *reality testing* (the capacity to differentiate self from nonself, to distinguish intrapsychic from external stimuli, and to maintain empathy with ordinary social criteria of reality) (Kernberg & Caligor, 2005; Stern et al., 2010). Progressing from neurotic to borderline PO, the predominance of primitive defenses and the concomitant identity disturbance increases; but only in psychotic PO is reality testing compromised, although in borderline PO it may be transiently affected under stress, particularly in the context of intimate relations, with a decreased capacity to evaluate interpersonal processes (Caligor et al., 2007; Clarkin et al., 2006; Kernberg & Caligor, 2005). Under the influence of primitive, intense emotions that are not integrated and that they cannot control, individuals with borderline PO characteristically manifest affect dysregulation accompanied by behavioral correlates such as expressions of anger, interpersonal chaos, and impulsive self-destructive behaviors (Clarkin et al., 2006).

As an effort at operationalization of these dimensions, Kernberg and Clarkin presented in 1995 what can be considered the first complete version of the *Inventory of Personality Organization* (IPO), a self-report questionnaire comprising 155 items divided into the three primary scales (57 items) of Primitive Defenses, Identity Diffusion, and Reality Testing, and additional secondary scales of interpersonal phenomena (Lenzenweger, Clarkin, Kernberg, & Foelsch, 2001). IPO has since been used to investigate the relationship of PO to psychopathology and to measure structural change as a psychotherapy outcome (cf. Ellison & Levy, 2012), and it was adapted to several cultures (e.g., French Canadian, Chilean, Argentinian, Dutch, Japanese, Spanish, Brazilian, German, Italian) in different versions (Ben-Dov et al., 2002; Berghuis, Kamphuis, Boedijn, & Verheul, 2009; García-García et al., 2010; Igarashi et al., 2009; Normandin et al., 2002; Oliveira & Bandeira, 2011; Preti et al., 2015; Quiroga, Solano, & Fonoa, 2003; Smits, Vermote, Claes, & Vertommen, 2009; Zimmermann et al., 2013). The three primary scales' latent structure has been tested with both clinical and nonclinical populations, frequently yielding two- or three-factor solutions with Identity Diffusion and Primitive Defenses highly correlated or merged into a single dimension apart from Reality Testing (Berghuis et al., 2009; Igarashi et al., 2009; Lenzenweger et al., 2001; Normandin et al., 2002; Smits et al., 2009).

Meanwhile, few reported studies investigated alternative models of the three primary scales' dimensional organization through a plain exploratory approach, without forcing the items to conform to the theoretical subscales. The study of Berghuis et al. (2009) is an exception, but it was not confined to the primary scales. In consonance with other studies, though, most Identity Diffusion and Primitive Defenses items loaded in one factor (*General Personality Pathology*) apart from most Reality Testing items (*Reality Testing or Psychotic Vulnerability*). More recently, Ellison and Levy (2012) used an exploratory structural equation modeling approach with a large nonclinical sample precisely to test whether the originally intended dimension configuration would be recovered. Results of this study suggested that a four-factor solution may provide a better fit, with factors representing *Instability of Self and Others*, *Instability of Goals*, *Psychosis*, and *Instability of Behavior*. Instability of Self and Others was interpreted by the authors as a general factor, composed of items from every original subscale amounting to a total number of 32, 17 of which belonged to Identity Diffusion. The second factor comprised only two items from the Identity Diffusion subscale specifically addressing the topic of goal volatility. Twelve Reality Testing items formed the Psychosis dimension. And eight items focusing on behavioral components, half of which integrated the Primitive Defenses dimension, were coded as Instability of Behavior (three items were dropped due to insufficient factor loadings). Although these factors do not match the original subscales, they represent important features of Kernberg's model and borderline functioning, as supported by the observed relations with external measures of self-concept coherence, immature defenses, emotion regulation, and risky and self-injurious behavior. Furthermore, a recent study of the Italian IPO (Preti et al., 2015) added support to this model in terms of fit indices, concurrent validity, and capacity to differentiate clinical from nonclinical participants, namely concerning borderline personality disorder.

Therefore, the latent structures found and intended for the primary scales of the IPO need further confirmation and clarification,

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