



INVITATION TIL INTERNAT OM "MENTALISATION-BASED TREATMENT FOR ANTISOCIAL PERSONALITY DISORDER"

Kære medlem af Dansk Retspsykologisk Selskab,

Det er med stor glæde, at vi endelig kan invitere dig til det længeventede to-dagsarrangement om "Mentalisation-based treatment for antisocial personality disorder" v/**Anthony Bateman**.

Internatet afholdes i Aarhus og vil foregå på engelsk:

Onsdag d. 4. maj – torsdag d. 5. maj 2022
Helnan Marselis Hotel
Strandvejen 25
8000 Aarhus C

Educational Objectives

In clients with antisocial personality disorder (ASPD)

1. Understand the mental processes leading to violence and other behaviours
2. Demonstrate an understanding of the mentalizing problems relevant to treatment
3. Make a collaborative 'mentalizing formulation' of clients with ASPD to use as the initial focus of treatment
4. Use some mentalizing techniques for the treatment of anti-social personality disorder in everyday clinical work

Abstract

The diagnostic descriptors of antisocial personality disorder (ASPD) include failing to conform to social norms with respect to lawful behaviours, deceitfulness, impulsivity or failure to plan ahead, irritability and aggressiveness, reckless disregard for safety of self or other, consistent irresponsibility, and lack of remorse. These descriptors can be conceptualised as arising from a failure in balanced mentalizing, a process by which individuals implicitly and explicitly interpret the actions of themselves and others as meaningful on the basis of intentional mental states. This re-conceptualisation allows clinicians to rethink their approach to treatment of people with ASPD in the hope of improving outcomes in terms of desistance and adaptation to general life (Bateman & Fonagy, 2011; Bateman, Fonagy, & Bolton, 2013). As yet, no treatment has been shown to be effective in these individuals.

Mentalisation-based treatment (MBT) interventions have now been organised into a coherent treatment programme for people with ASPD and conduct disorder (Bateman, O'Connell, Lorenzini, Gardner, & Fonagy, 2016) in accordance with this re-conceptualisation. The aim of treatment is to address the specific mentalizing difficulties of people with ASPD. In this workshop the mentalizing framework for understanding ASPD will be described and the treatment intervention will be outlined using illustrative clinical examples using video, role plays, and clinical exercises. MBT for ASPD is delivered in combined individual (once per month) and group psychotherapy. Both formats will be discussed.

Formand

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Mentalization Based Treatment for ASPD integrates cognitive and relational components of therapy and has a theoretical basis in attachment theory. Individuals with ASPD are more likely to demonstrate over-control of their emotional states within well-structured, schematic attachment relationships rather than show under-control in the context of chaotic attachment relationships more commonly found in people with BPD. In addition they tend to have relationships which are organized hierarchically with each person knowing their place whereas people with BPD aim for, but tend to struggle to reach, consensus and shared respect. Threats to the hierarchical order of relationships lead to arousal within the attachment system which triggers an inhibition of mentalizing and experience of shame. Loss of status is devastating as it potentially reveals shameful internal states that threaten to overwhelm, so any threat of loss of status becomes firmly rooted as a dangerous reality which has to be dealt with by physical force. Finally, in ASPD there is a reduction in ability to recognise others' emotions which is more pervasive than being restricted to fear and sadness, so a focus in treatment on recognition of all emotions in others is essential. Fear for the self is often absent and violent impulses are uninfluenced by the emotional expressions of others, which go unrecognised. Indeed the consequences and dangers of aggression become secondary.

Key interventions for clinicians to address these problems of ASPD will be illustrated and discussed.

Der er lagt op til to spændende dage i godt selskab!

Vi ser frem til at se dig.

Med venlig hilsen
Bestyrelsen

Praktisk info:

Tidspunkt: D. 4. maj kl. 10.00 (morgenmad fra kl. 9.00) – 5. maj kl. 16.00

DRS medlemspris: 4.500,- (5.000,- for ikke-medlemmer), alt inkl.

Sted: Helnan Marselis Hotel, Strandvejen 25, 8000 Aarhus C

Tilmelding: Senest d. 25. marts til DRS@dp-decentral.dk

Antal deltagere: Max 35

Literature

- Bateman, A., Bolton, R., & Fonagy, P. (2013). Antisocial Personality Disorder: a mentalizing framework. *Focus: Journal of Lifelong Learning in Psychiatry*, *XI*, 1-9.
- Bateman, A., & Fonagy, P. (2008). Comorbid antisocial and borderline personality disorders: mentalization based treatment. *Journal of Clinical Psychology: in session*, *64*, 1-14.
- Bateman, A., & Fonagy, P. (2011). Antisocial Personality Disorder. In A. Bateman & P. Fonagy (Eds.), *Mentalizing in Mental Health Practice* (pp. 357-378). Washington: APPI.
- Bateman, A., & Fonagy, P. (2016). *Mentalization based treatment for personality disorders: a practical guide*. Oxford: Oxford University Press.
- Bateman, A., Fonagy, P., & Bolton, R. (2013). Antisocial Personality Disorder: A Mentalizing Framework. *Focus: Journal of Lifelong Learning in Psychiatry*.
- Bateman, A., O'Connell, J., Lorenzini, N., Gardner, T., & Fonagy, P. (2016). A randomised controlled trial of Mentalization-Based Treatment versus Structured Clinical Management for patients with comorbid borderline personality disorder and antisocial personality disorder. *BMC Psychiatry*, *304*, 304-311.
- Fonagy, P., Luyten, P., & Bateman, A. (2015). Translation: mentalizing as a treatment target in borderline personality disorder. *Personality Disorders: Theory, Research, and Treatment*, *6*, 380-392.
- Rossouw, T., & Fonagy, P. (2012). Mentalization-Based Treatment for Self-Harm in Adolescents: a randomized controlled trial. *Journal of American Academy of Child and Adolescent Psychiatry*, *51*, 1304-1313.

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