



Dealing With Difficult Depression

A Review of

Personality-Guided Therapy for Depression

by Neil R. Bockian

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Reviewed by

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The rule of thumb I learned in graduate school was that Axis I disorders such as anxiety and depression would bother the patients themselves but that Axis II disorders, the personality disorders, would mostly bother other people. The two categories were presented as discrete entities with a vague relationship that did not interact so much as coexist. Dealing with insurance companies that do not reimburse for working with Axis II disorders meant that I preferred to not diagnose personality disorders, nor to work with them, if I could avoid it.

Of course, when working with individuals with depressive disorders, I find not all of them respond favorably to treatments, pharmacological or psychotherapeutic. Also, some people need repeated treatments even after a seemingly successful course. I have also observed that what makes people depressed varies as much as what assists them in recovery. Unfortunately, I have not had an overarching framework that could capture and explain the various forms of training and multitude of experiences I have had. These have remained as discrete as the Axis I and Axis II diagnoses of my graduate training.

Bockian's book, *Personality-Guided Therapy for Depression*, provides a framework for integrating the treatment of depression with personality disorders. It is part of a series of books based in personality-guided psychology, as defined by Theodore Millon. Bockian's book addresses how each of the 10 personality disorders interacts with and defines treatment for depression. Bockian wrote this book at the request of Millon, who is also the series editor. Millon's thorough understanding of personality disorders provides a structure for integrating disparate aspects of therapy. Bockian's writing makes the material interesting, accessible, and useful.

Comprehensive Approach

The book is organized by devoting a chapter to each personality disorder. Within this framework, Bockian addresses epidemiology, why a person with this disorder becomes depressed, which medications are likely to be helpful and why, and the psychological factors contributing to their depression. I found his sections on social considerations and strengths of people with particular personality disorders especially enlightening. Each chapter then ends with a synergistic treatment plan and a case study. Current trends in psychotherapy are moving toward contextualizing symptoms such as depression into the larger framework of the individual's personality style, their unique ways of perceiving, thinking, feeling, and behaving. In other words, demanding that clinicians work with patients multidimensionally. Millon has been a key figure in this evolution. He has

asserted in his theory that

in psychopathology it is not the overt anxiety or depression, nor the stressors of childhood or contemporary life that are the key to psychological well-being. Rather, it is the mind's equivalent of the body's immune system, that structure and style of psychic processes that represents our overall capacity to perceive and to cope with our psychosocial world that is the key determinant of mental health or disorder; it is, in other words, the psychological structure and function we term *personality*. (Millon, 2006, p. 2)

This implies that not only do individual differences such as those represented by personality disorders interact with depression differently but that the reasons for depression vary with the personality disorder. It seems so apparent that I find myself surprised at the straightforwardness of it. The depressed sex offender may be depressed but differently and in different ways from the dependent housewife whose husband has just left her. Even pharmacological differences in the way medications are metabolized can exist and need to be taken into account when treating individuals. For example, an individual with antisocial personality disorder and hyperactivity tendencies will use antidepressant medications differently than an individual with avoidant personality disorder with anxious overtones.

Bockian also integrates a growing understanding that psychopathology actually develops as a back-and-forth interplay between genetic and environmental influences. Each individual has unique vulnerabilities that underlie his or her difficulties. On the surface, the symptoms in one person may appear similar to the symptoms in another; however, because of their unique vulnerabilities, the causes and treatments may be quite different. Symptoms such as depression evolve differently in different people and require a treatment goal of matching each individual's specific pattern of development. Bockian's book does an excellent job of defining these patterns and their associated treatments.

Cultural Competence Required

The sections I found most interesting had to do with social considerations and the strengths of personality disorders, which develop as ways to survive challenging social environments. Although it can be difficult to appreciate this when working with severely disordered clients, it helps to know that there is a positive benefit to them being this way. The task of treatment can then shift to helping them receive the same benefits in a healthier manner.

The question of social and cultural diversity is addressed briefly. I especially like Bockian's recognition that in developing cultural awareness, it becomes apparent that cultures differentially cope with the various personality disorders. What may be functional in one culture may be dysfunctional in another. For example, the emphasis placed on individualism in the United States could be perceived as a schizotypal tendency that is both encouraged and adaptive. What Bockian works toward is integrating the evidence-based practices of mental health with what is culturally acceptable to the individual in designing his or her treatment program.

I believe this section could be strengthened with more culture-specific information. A good example of culture specific information can be found in Lynch and Hanson's (2004) *Developing Cross-Cultural Competence: A Guide for Working With Children and Their Families*, which provides specific information on the eight most prominent cultures represented in the contemporary United States. Incorporating this type of information into the multidimensional treatment plan would only strengthen this excellent book.

Conclusion

This book presents an exciting integrationist approach to the treatment of depression. It seeks to contextualize symptoms within the larger framework of an individual's personality style, culture, and other therapeutic considerations. Bockian endeavors to match the pattern of features that uniquely characterizes each patient with treatment goals and tactics that best mirror their personal pattern. It extends the theoretical work of Millon into the dimension of clinical application by extensively drawing on current research. Of course, the next step will be to manualize the treatments proposed and begin randomized clinical trials. In the meantime, however, I believe it is an important addition to any professional library.

References

Lynch, E. W., & Hanson, M. H. (2004). *Developing cross-cultural competence: A guide for working with children and their families* (3rd ed.). Baltimore: Brookes Publishing.

Millon, T. (2006). *Role of personality in an integrated conception of psychopathology*. Retrieved September 5, 2006, from Institute for Advanced Studies in Personology & Psychopathology.