

Borderline Personality Disorder and EMDR Therapy by Dolores Mosquera, M.S.

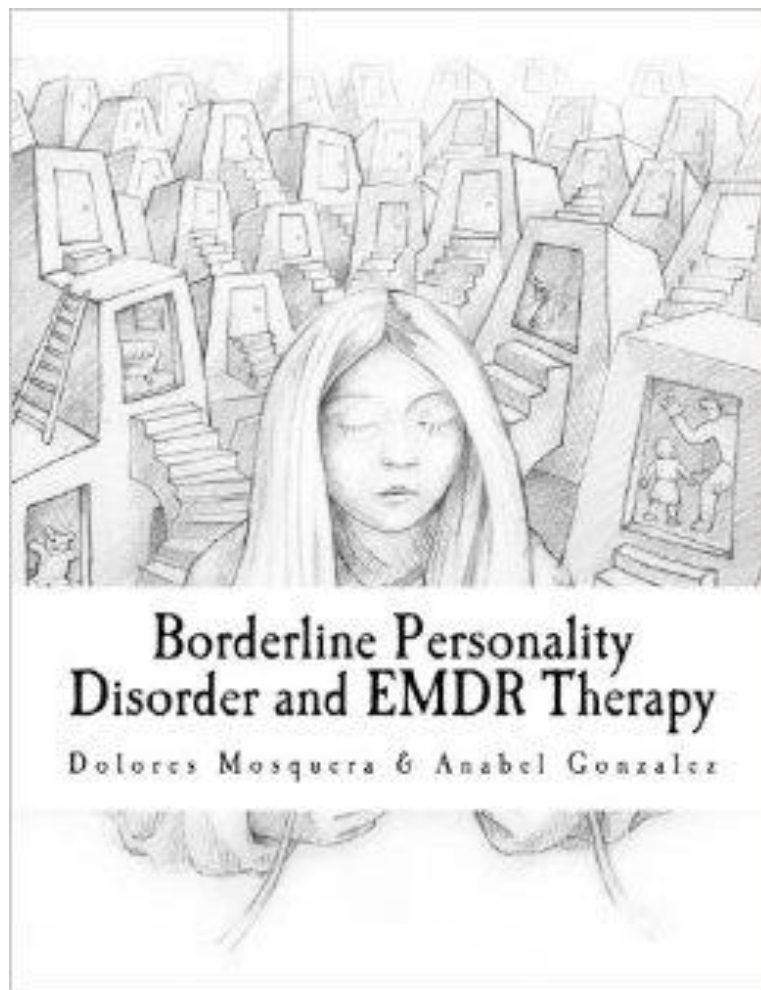
BOOK STUDY PROGRAM

Post-test

To complete the book study program and earn CEs, you must complete the online quiz and evaluation. Links are provided with your order. What follows are 41 questions based on the information presented in *Borderline Personality Disorder and EMDR Therapy*.

The 12 EMDRIA credits and 12 NBCC* CEs will be dated on the day you pass the quiz. You must score 75% or better, but you can take the test multiple times if needed.

**NBCC is approved for most Masters-level Mental Health Professional Disciplines*



Part One. Theoretical Foundation

Chapter 1: Trauma, Attachment, and Biology at the Origin of Borderline Personality Disorder

1. Proposed origins of borderline personality disorder (BPD) cited by the author include all EXCEPT:
 - a. genetic personality traits
 - b. their role as protective factors to increase sensitivity to context
 - c. their reflection of secure attachment
 - d. their link to early trauma
2. "Hidden trauma" as reported by Schuder & Lyons-Ruth (2004) refers to:
 - a. trauma from experiences unacknowledged by others
 - b. trauma related to the caregiver's inability to modulate affective dysregulation
 - c. trauma that happens in secrecy
 - d. trauma that a person denies
3. Johnson, et al (1999) reported that those with documented childhood abuse or neglect were:
 - a. less likely to have personality disorders in adulthood
 - b. equally likely to have personality disorders in adulthood
 - c. twice as likely to have personality disorders in adulthood
 - d. four times as likely to have personality disorders in adulthood
4. The work of Herman (defining Complex PTSD) and Van der Kolk (defining Disorders of Extreme Stress or DESSOS) emphasize symptoms of dysregulation related to all EXCEPT:
 - a. attention or consciousness
 - b. self-perception but not misperception of others
 - c. somatization
 - d. systems of meaning
5. The authors challenge the myth that people with BPD frequently report detailed histories of trauma. They encourage clinicians to consider that:
 - a. dissociative amnesia may make many memories inaccessible
 - b. people with BPD prefer to keep memories private
 - c. people with BPD are no more likely than anyone to have childhood trauma
6. Siegel & Hartzell (2004) describe what they call the ABC's of attachment which include all EXCEPT:
 - a. Attunement
 - b. Balance
 - c. Coherence
 - d. Distancing

7. Gunderson (1984, 1996) suggested that the following was the core of borderline pathology:
- unmet curiosity needs
 - intolerance of loneliness
 - rage preoccupation
 - sleep dysregulation
8. Skodol et.al (2002) stated that those aspects of personality disorders that could have biological components include all EXCEPT:
- affect regulation
 - patterns of impulse/action
 - cognitive organization
 - relationship history of attachment
9. Toward the close of Chapter 1, the authors cite theorists who see each of the following comorbid biological conditions as correlated with BPD EXCEPT:
- bipolar disorder (with emotional dysregulation)
 - susceptibility to substance abuse
 - biological tendency to disinhibit intense emotions
 - biological tendency to react more intensely to low levels of stress

Chapter 2: EMDR Therapy

10. The adaptive information processing model (AIP) guides the EMDR therapist to assume all of the following in case conceptualization and memory reprocessing EXCEPT:
- much of psychopathology is due to dysfunctional storage or incomplete processing of adverse and traumatic life experiences
 - the human mind has innate systems to heal psychological trauma
 - EMDR procedures are designed to activate self-healing capacities
 - the therapist should provide the client with instruction about better ways to think and act
11. Traumatic and adverse experiences stored in memory:
- can generate pathology and can be reprocessed to more adaptive resolution
 - are normal and should be tolerated
 - will disappear eventually if they are consistently ignored
 - generally do not impact other life experiences
12. The effects of bilateral eye movements on emotional processing of memories (discovered and initially reported by Shapiro (1989)) include all EXCEPT:
- decrease in vividness of images
 - parasympathetic activation and subsequent relaxation
 - decreased mental associations
 - decreased emotional sensitivity to previously activating stimuli

13. Dual attention, as used in EMDR therapy, means:
- the client focuses on the therapist then themselves
 - the client is aware of the memory activated in the nervous system while also oriented to the present
 - the client focuses on their thoughts to the right and then to the left
 - the client stays aware of two disturbing memories at one time

Chapter 3: Dissociation and Borderline Personality Disorder

14. Dissociation can be seen as a pathology of consciousness. By this, the authors mean that it can come with deficits in all of the following EXCEPT:
- self-protection
 - de-realization
 - de-personalization
 - an integrated vision of oneself
15. Dissociative amnesia can include all of the following EXCEPT:
- significant gaps in memory of childhood experiences
 - lack of recall of highly traumatic periods of life
 - when a memory is recalled, it comes with full access to memory components
 - the tendency to create an idealized “pseudo-plot” to fill in gaps of memory
16. Client reported examples of depersonalization include each of the following EXCEPT:
- “I saw myself from the outside”
 - “When I do things, I can tell it is me doing them”
 - “My head and body are disconnected”
 - “It’s like my body doesn’t belong to me”
17. First order symptoms of pathological dissociation, as described by Dell (2006), include each of the following EXCEPT:
- aggressive intrusions
 - immediate awareness of the presence of dissociative parts
 - confusion about the self
 - amnesia

Chapter 4: BPD from the Theory of Structural Dissociation of the Personality

18. Inspired by Allport (1981) and Janet (1907), Van der Hart et al. (2006) define the concept of the healthy personality as the coherent, flexible, and adaptive integration of each of the following components EXCEPT:
- high introspective capacity
 - the neurobiological
 - the psychological
 - the social elements

19. Examples of healthy and innate human action systems include all of the following reasons EXCEPT:

- a. energy dysregulation
- b. care giving
- c. exploration
- d. social engagement

20. In the theory of structural dissociation, tertiary structural dissociation includes:

- a. One ANP, one EP
- b. One ANP, multiple EPs
- c. More than one ANP, but no EPs
- d. More than one ANP, with associated EPs

Part Two. Phases 1 and 2 in the Treatment with EMDR: Conceptualization and Preparation

Chapter 5: Understanding BPD from EMDR Therapy

21. In the case of pathological idealization of a parent, the person maintains a positive attachment to the parent that may contain the following qualities EXCEPT:

- a. the attachment maintains an unrealistically positive view of the parent
- b. the person is well aware of the negative components of the parent
- c. the person appears to maintain a positive attachment because of the idealization
- d. the person feels threatened by an alternative view of the parent

22. Identity disturbance associated with BPD can include any of the following features EXCEPT:

- a. subjective feeling of personal incoherence
- b. clarity about where emotions arise from
- c. a tendency to confuse desires of the self with those of others in intimate relationship
- d. a fear of losing one's personal identity when a relationship ends

23. Tendencies toward suicidal behavior and self-harm can be seen as coping attempts aimed at addressing all of the following EXCEPT:

- a. attempts to regulate emotions
- b. self-punishment for intolerable feelings of guilt
- c. a desire to be normal and mimic others they know
- d. a desire to self-annihilate due to inner loneliness

24. In a clinical case presented of a 34 year-old woman, the first target memory chosen was of being abandoned by her parents because:

- a. it was the most damaging, according to the client
- b. it was the earliest disturbing memory
- c. the client wanted to avoid it
- d. the client thought it the easiest to target first

Chapter 6: Defenses

25. Although a client with BPD may repeat over and over how unfair something was, they do not get sustained relief for reasons that might include the following components EXCEPT:
- they have a low-reflective capacity
 - they consider their own personal responsibility in the problem
 - they are unaware of their own personal responsibility in the problem
 - they do not believe the therapist is listening
26. EMDR reprocessing works most efficiently when a client has certain capacities that may be lacking in those with BPD symptoms, including all EXCEPT:
- good self-perception and self-image
 - awareness and access to emotions
 - an ability to manage internal experiences
 - a reliance on the therapist for affirmation

Chapter 7: Identity, Differentiation of Self and the Development of Mental Functions

27. As the authors explain, asking clients with BPD for a self-referential belief can be difficult for the following reasons EXCEPT:
- they may not be able to generate a resonating belief
 - they may offer a pseudo-belief disconnected from the real self
 - the beliefs may simply reflect what others told them to believe
 - there aren't many negative beliefs about the self
28. The authors offer a useful exercise to help clients with BPD explore aspects of themselves by drawing what they see internally on the inside of a circle and what they see as outside of themselves outside the circle. They report the following types of discoveries EXCEPT:
- the client who sees nothing inside
 - the client who cannot even look inside
 - the client who "lives inwardly"
 - the client who clearly distinguishes inside from outside
29. The authors describe a variety of clinical presentations they have seen related to identity difficulties. These include all EXCEPT:
- diffuse identity
 - false identity
 - complete identity
 - fragmented identity

Chapter 8: Installing Healthy Self-Care Patterns in Borderline Personality Disorder

30. Clients with dysfunctional patterns of self-care continue to see themselves through the eyes of their early attachment figures as:
- the way they were cared for
 - worthy of love and complete in themselves
 - the needy people they truly are
 - needing to nurture others to experience love
31. Positive self-care, as described in this book, can consist of the following elements EXCEPT:
- an attitude of loving oneself
 - an absence of self-rejection
 - a large circle of friends
 - specific beneficial actions of self-care
32. In an exercise described by the authors, a client is asked to look at their child self, through the eyes of their adult self, and describe her. In this exercise, the authors often observe and offer follow up strategies for the following responses EXCEPT:
- disconnection
 - excessive connection
 - high mental autonomy in the child
 - a relaxed interest in the child
33. The authors suggest using BLS to reinforce adaptive strategies for all EXCEPT:
- reinforcing mindsight
 - reinforcing the capacity for care in the child self
 - reinforcing the capacity for care in the adult self
 - simulating the social engagement system

Chapter 9: Working with Self-Injuries and Suicidal Ideation

34. The following are attitudes, comments and behaviors that deserve extra attention when a therapist is concerned about potential suicidality EXCEPT:
- contradictory attitudes
 - a sudden strange calm after a difficult period
 - comments about others who have committed suicide
 - consistency of suicidal denial in both words and non-verbals
35. The authors discuss the following types of self-harm EXCEPT:
- self-harm as an emotional dysregulation
 - self-harm as communication
 - self-harm as a dissociative symptom of internal conflict
 - self-harm as a punishment

Chapter 10: Emotional Regulation

36. As explained by the authors, emotional regulation is influenced by three neurophysiological functions which include all EXCEPT:
- a. the balance of the autonomic nervous system in the regulation of activation
 - b. the brain mechanisms that operate during empathy
 - c. a deficit of addictive tendencies
 - d. the reflective capacity for meta-consciousness

Chapter 11: Psychoeducation

37. As a tool to assist clients in understanding the therapeutic work of self-discovery and reintegration of parts of the self, the authors introduce the following metaphor:
- a. a jigsaw puzzle
 - b. an electrical system
 - c. a dam
 - d. building a fire

Part Three: Phases 3 to 8 in the Treatment with EMDR: Working with Adverse Life Experiences

Chapter 12: Core Beliefs

38. The authors report the following common thoughts associated with core beliefs in people with BPD EXCEPT:
- a. thoughts of being unwanted or defective
 - b. thoughts of dependency
 - c. an "I can make it on my own" attitude
 - d. distrust in others

Chapter 13: Trauma Processing

39. The authors recommend the following memories as the most interesting places to start EXCEPT:
- a. the first or worst trauma
 - b. intrusive memories and recurring thoughts
 - c. targets related to risk behaviors
 - d. current triggers
40. The authors report being on the lookout for interweaves that can be helpful with all of the following EXCEPT:
- a. looping
 - b. to keep the therapist directing the session
 - c. to address secondary emotion
 - d. to correct client misperceptions of therapist attitudes

Chapter 14: Specific Procedures

41. The authors present several strategies to assist client's with currently maladaptive defenses. These include all EXCEPT:

- a. the differentiation of self procedure
- b. the two sides of the story procedure
- c. the emotional segregation procedure
- d. the relational bridge

EVALUATION - BOOK COURSE: BORDERLINE PERSONALITY DISORDER AND EMDR THERAPY

Please indicate below the extent to which the course's learning objectives were achieved:

1. I gained or reinforced conceptual understanding related to issues described in this book:
 - a. strongly agree
 - b. agree
 - c. neutral
 - d. disagree
 - e. strongly disagree

2. I gained or reinforced knowledge about the issues described in this book:
 - a. strongly agree
 - b. agree
 - c. neutral
 - d. disagree
 - e. strongly disagree

3. I gained or reinforced useful clinical approaches and skills related to issues described in this book:
 - a. strongly agree
 - b. agree
 - c. neutral
 - d. disagree
 - e. strongly disagree