ABSTRACT

In the Alternative DSM-5 Model for Personality Disorders (AMPD), the diagnosis of specific personality disorders is obtained through an evaluation of the level of impairment in personality functioning and an assessment of dimensional personality traits associated in 25 "lower order" facets and 5 "higher order" domains. The Personality Inventory for DSM-5 (PID-5) was developed for examination of personality traits within this system. This Ph.D. thesis covers five relevant publications regarding AMPD, particularly PID-5. First, the authors introduce the theoretical background of the PID-5. Attention is paid on its ease of use, data interpretation and use of these data for treatment planning in different clinical settings. Two empirical studies test PID-5 psychometric properties (internal consistency, validity, discrimination capacity and unidimensional structure) in the sample of community volunteers ($n = 351$) and a clinical sample of psychiatric patients ($n = 143$). PID-5 was administered individually and in a group setting using pen-paper method and online data collection. 33 respondents completed the inventory twice to check test-retest reliability. Authors presumed, evidence will be found to support internal consistency and convergent validity of the PID-5 personality trait domains, as well as their stability in time. Moreover, significant mean-level differences will be found between the two samples and unidimensional factor structure on the level of individual facets will be confirmed. The data were analyzed with parallel analysis, Pearson's correlation coefficient, t-tests, and ROC analysis, as well as with different indices of fit and structural modeling employing ESEM. The study results confirmed excellent internal consistency and satisfactory reliability of all five PID-5 domains in time. Significant correlations of all trait facets of the tested domains confirmed convergent validity. Significant differences between the two samples were found in the test scores of four of the five tested domains. Unidimensional structure of the measure was confirmed only after its modification. Study limitations point to: two different forms of administration; prevalence of students in the ommunity sample; different test-retest time periods; cultural differences; and smaller size of the clinical sample.

Keywords: DSM-5, PID-5, AMPD, personality disorders, diagnostics