

# Bell Object Relations and Reality Testing Inventory (BORRTI)

Manual

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## INTRODUCTION

Object relations and reality testing are ego functions at the center of healthy psychological life; they are compromised in psychopathology. Despite the theoretical robustness of the object relations and reality testing constructs, their research and clinical application had been limited by the absence of a standardized method of evaluation. Now, the Bell Object Relations and Reality Testing Inventory (BORRTI) makes possible both individual and group assessments of these critical ego functions. These assessments reveal personality characteristics, aid in diagnosis, provide recommendations regarding the appropriateness of specific treatment approaches, and predict threats to the treatment alliance.

### General Description

The BORRTI is a self-administered paper-and-pencil inventory consisting of 90 descriptive statements that the respondent endorses as “true” or “false” according to his or her “most recent experience.” Scoring yields four Object Relations subscales (Alienation, Insecure Attachment, Egocentricity, and Social Incompetence) and three Reality Testing subscales (Reality Distortion, Uncertainty of Perception, and Hallucinations and Delusions). The Object Relations and Reality Testing scales are each represented by 45 items worded to reflect various levels of object relations and reality testing ego functioning. The Object Relations items can be administered separately, if desired (see the section entitled “Form O” in chapter 2).

The BORRTI is intended for use with individuals ages 18 and older. The items require a sixth-grade reading ability. The BORRTI is scored by computer, using an IBM-type microcomputer disk (WPS Product Nos. W-1074 or W-1075, for 3.5" or 5.25", respectively) or a WPS TEST REPORT Service mail-in answer sheet (WPS Product No. W-283C). Immediate scoring and interpretation for the BORRTI are also available via FAX from the WPS TEST REPORT FAX Service. For information about opening a WPS TEST REPORT FAX Service account, contact the WPS Customer Service Department. WPS continually refines and updates its computer services. The “Computer Services for the BORRTI” section at the back of this Manual provides information about the options available for the BORRTI.

Although the norms provided in this Manual are for individuals ages 18 and older in nonclinical settings, the BORRTI can be used with a wide range of respondents. It

has been administered to students in junior high school, high school, college, and graduate school. It has been used in outpatient clinics, day hospitals, inpatient services, homeless shelters, and prisons. Clinical samples have included individuals with appetitive disorders, anxiety disorders, post-traumatic stress disorder, affective disorders, substance abuse disorders, schizophrenia, and all personality disorders. Chapter 2 presents suggestions regarding the administration of the BORRTI to young or special needs individuals, and chapters 4 and 5 present further discussion of the robustness of the BORRTI with respect to demographic effects, as well as references to research on BORRTI results for special groups.

Because the BORRTI is a self-report instrument, it has a few limitations common to this format. A full discussion of the appropriate methods of administration for visually, physically, or cognitively impaired respondents is provided in chapter 2.

### What Does the BORRTI Offer?

The BORRTI provides an assessment of dimensions of object relations and reality testing ego functioning using a reliable and easily administered self-report instrument. Treatment recommendations based on BORRTI scores can make it more likely that patients will receive appropriate clinical services and that clinicians will be better informed of potential threats to the treatment alliance stemming from deficits in either object relations or reality testing. As a standardized instrument, with norms based on 934 individuals, the BORRTI makes it possible to obtain better clinical assessments of individuals by yielding specific scale scores of object relations and reality testing dimensions, along with treatment recommendations and prognostic information.

The ego functions of object relations and reality testing were chosen for instrument development because they are especially important in the diagnosis and treatment of personality disorders, appetitive disorders, and psychotic states. Research supports the value of the BORRTI in identifying and characterizing psychopathology, and suggests its importance in diagnostic formulations. It also provides psychological information relevant to various psychological and psychiatric treatments, particularly to psychotherapy.

The BORRTI also provides a powerful tool for scientific inquiry. The discovery of distinct dimensions of object

relations and reality testing through factor analysis of BORRTI responses now makes it possible to test specific hypotheses about how these dimensions relate to psychopathology and treatment effects. Many psychoanalytic and psychodynamic postulates can yield to formal scientific testing through use of the BORRTI. The objective self-report format of the BORRTI eliminates the reliability problems of other methods that depend upon individually administered projective tests and the judgment of raters. Large numbers of respondents can be easily assessed, making possible studies that simply are beyond the practical limits of other methods. Using the BORRTI, large samples of well-defined diagnostic groups have been investigated for characteristics of their object relations and reality testing functioning, and they have been distinguished from one another (see the "Validity" section of chapter 5 for further discussion). These dimensions of ego functioning also represent very important treatment goals for psychotherapy and other forms of psychiatric and psychological intervention. The BORRTI provides a reliable measure of individual change and can be used to study treatment outcomes over time.

### **Principles of Use**

Although the BORRTI can be easily administered and scored by technicians, the ultimate responsibility for its use, interpretation, and communication of results must be assumed by a professional with advanced training in psychological assessment. Clinical applications of the BORRTI should be performed only by clinically trained specialists with an appropriate background in personality assessment and a grasp of the fundamentals of test construction, validity, reliability, and administration. In practice, many consultation questions go beyond the limitations of any one instrument and require the judicious use of a number of psychological assessment techniques, as well as recognition of relevant cultural factors, in order to provide the information from which the professional draws conclusions. The BORRTI can provide valuable information not offered by other instruments, but its ultimate value depends upon the skill and understanding of the user.

The BORRTI is not intended to provide a comprehensive psychological evaluation of all aspects of personality or psychopathology. Its scope is limited to its intended purpose of assessing two significant ego functions. But even within that domain, opinions vary as to the proper definition of these constructs and how they are best measured. The virtues of the BORRTI lie in its sound theoretical construction and empirical development, which make it relatively clear what is being measured and how reliable the measurements are.

Individual assessment is a complex task that ultimately depends more upon the professional than upon the tools he or she employs. A skilled assessor will likely find that the BORRTI fulfills an unmet need for assessing ego function deficits relevant to many consultation questions. It may become part of a standard battery of self-report instruments,

but is unlikely to replace worthy methods aimed at evaluating other aspects of personality. An individual's BORRTI test results should be interpreted within the context of all that is known about his or her background, along with other clinical findings. In this way, BORRTI results should greatly enhance the evaluator's understanding of that individual.

Prior to administration of the BORRTI, potential users should familiarize themselves with the information in this Manual concerning proper administration, scoring, standardization, psychometric properties, interpretation, and limitations of the BORRTI. They should also have a working knowledge of the key concepts of ego psychology or be supervised by someone with such knowledge. The test results are best applied in the context of a full knowledge of the patient's psychiatric history and the results of other relevant psychological tests. Professionals experienced in psychological assessment who are unfamiliar with the theoretical underpinnings of the BORRTI should review the historical background and rationale presented in chapters 4 and 6 of this Manual. References are cited in the Manual for those seeking further information about the theoretical background of the BORRTI. Users should adhere to the standards prescribed by the American Psychological Association (1985, 1992) for the ethical use of tests and test results in clinical, applied, or research settings.

### **The BORRTI Manual**

This Manual is divided into two parts: Part I is an Administration, Scoring, and Interpretation Guide, and Part II is a Technical Guide. In Part I, chapter 2 provides instructions on how to administer and score the BORRTI, and chapter 3 presents an interpretive guide for scale scores and profile configurations. Clinical recommendations based on profile patterns are also provided in chapter 3, along with case examples from a wide range of psychopathology, which are offered to illustrate the BORRTI's clinical utility.

In Part II, chapters 4 and 5 provide the rationale for the empirical development of the BORRTI and a summary of the development and the psychometric properties of the instrument, including reliability and validity. Particular attention is paid to establishing support for the construct validity of the scales from external correlates and discriminant studies. Chapter 6 describes the conceptual background of the test.

### **BORRTI Hand Scoring Materials**

In the past, hand scoring materials for the BORRTI, which used unit-weighted scores instead of factor-based scores, have been made available to researchers. Although the unit-weighted and factor-based scores were similar, the classification accuracy of the factor-based scores was superior for identifying patients with borderline personality disorder. For that reason, this newest edition of the BORRTI includes and recommends only the use of factor scores calculated by computer in both clinical and research settings.