Abstract

As personality traits play an important role in the determination of individuals' behaviors and their readiness for special abnormal behaviors, it seems necessary to assess the various levels of personality traits in different cultures. The present research was performed by the purpose of assessing psychometric characteristics and factor analysis of Diagnostic Assessment of Personality Pathology-Basic Questionnaire (DAP-BQ) Persian version. 415 participants (253 male and 162 female) were selected voluntary by available sampling from university students, Eram Park's personnel and pedestrians. The study sample completed DAP-BQ and the short form of Neuroticism-extraversion and openness Personality Inventory Revised (NEO-PI-R). Findings showed a high-order solution with four-factors including emotional dysregulation, dissocial behavior, inhibition and compulsivity obsession which explained 72.57% of total variance. Also, Cronbach alpha coefficients (ranging from 0.73 to 0.93 range) and test-retest coefficients (ranging from 0.51 to 0.92 range) were in an acceptable range. Results showed that the Persian version of DAP-BQ had a proper validity and reliability. Furthermore, result revealed that the characteristic structure of DAP-BQ was the same across various languages and cultures and supported the four-factor essence of DAP-BQ.

Keywords: Diagnostic Assessment, Questionnaire, Personality, Psychometry

Introduction

Nowadays, the field of personality traits has been the center of lots of studies' attention; because these characteristics have various behavioral and clinical consequences as risk taking behaviors [1], treatment successes [2] and psychosocial [3]. Among personality traits, researches have especially studied Broad personality trait, a category of characteristics which considered to be the highest level of personality organization. These traits determine the readiness level of...
individuals to psychiatry disorders. For example it is possible that broad characteristics of neuroticism, anxiety and aggression be related to both psychological pathology internalization and externalization [4].

Due to the importance of personality traits, it seems to be necessary to study their generality and describe them across cultures. However, the transformation of personality inherent trends to personality traits is such a complicated process which is affected by social-cultural contexts [5] as well as gene-environment interaction [6]. McCrae and Costa [7] believe that although different cultures have unique traits, but in a more general level, they include traits which are similar to each other and lead to cross-cultural characteristics and are the same in lots of cultures. However, some studies [8,9] express that each culture has its unique characteristics. So, the universality of personality structure is not acceptable; but as Diagnostic Assessment of Personality Pathology-Basic Questionnaire (DAP-BQ) is rendered from English and Western researchers, we wonder if, in general, this model is a Canada-based structure or is applicable to other cultures too. This belief exists that multi-factor models are the results of general language and culture, which has inherently linked these models to their generated language and culture [10]. So, realistic speaking, we know that various cultures and languages lead to models in which the chance of similarity of their factors with the main model is few [10]. According to the opposition between two recent viewpoints, their integration or opposition can be considered as the final answer of the expressed question: if the results of a research are the indicator of personality structure's generality or specialty in terms of culture, their subjectivity level of personality conceptualization is determinative in the research. In other words, although in the level of main and expansive characteristics, personality extracted factors are general or universal, but in a lower subjectivity level (for example, in medium level constructs as life purpose), they are more unique and culture-based [11].

In Asian countries, because of scarcity in local instruments for measuring personality basic factors, most of psychologists apply the translated versions of Westerns' personality tests [12]. Among recent instruments which were compiled to measure personality characteristics, DAP-BQ [13] has been the most valuable and famous one. Livesley, Jung & Vernon [14] by the use of personality disorders in twins and public individuals found four expansive factors DAP-BQ: emotional Dysregulation (ED), dissocial behavior (DB), inhibition (IH), compulsive obsession (CO). Each of these four factors, has its special subscales. Seven subscales for emotional Dysregulation (affective instability, identity problems, cognitive dysregulation, insecure attachment, oppositionality, submissiveness and anxiousness), five subscales for dissocial behavior (conduct problems, narcissism, callousness, rejection and stimulus seeking), three subscales for inhibition (intimacy problems, low affiliation and restricted expression) and one subscales for compulsive obsession (compulsivity), which along with the scales of self-harm and suspiciousness generate 18 subscales. Livesley and Jackson [13] believe that some scales (self-harm and suspiciousness scales) don’t have an obvious relationship with a separated category. They believe that self-harm subscale doesn’t have much relationship with these four categories prototypically: but suspiciousness subscale has a weak relationship with two categories of emotional Dysregulation and dissocial behavior. Although this questionnaire is made to measure prototypic characteristics of II axis disorders, but most of researches have applied it to non-clinical samples [15]. It revealed to be correlated with five factor model (FFM) [16]. Firstly Livesley, Jackson and Schroeder [17] clinically used the instruments. They showed lots of similarity between clinical samples and public population in terms of factor structure. These results which have repeated [18] in Danish [19] population showed that the traits' structure of personality disorders is the same between the clinical and non-clinical samples: and the personality disorder traits of the opposite were normal. In this research as the researches of Canada [15]