

The effects of developmental trauma on Theory of Mind and its relationship to psychotic experiences: a pilot behavioural study

Krisya Louie, Ameerah Parvez, **Ryan Turner**, Mustapha Modaffar, Michael Bloomfield



UCL

Rationale

- This research was conducted by **UCL's Translational Psychiatry Research Group**.
- Our current research priorities include understanding **how developmental psychological trauma causes psychotic symptoms**.
- Understanding this relationship will form the **basis of targeted treatments and interventions**.
- It is estimated that **1% of the population** has a psychotic disorder.

Background

- Developmental trauma** encompasses the following:
 - Physical, emotional and sexual abuse.
 - Physical and emotional neglect.
- Developmental trauma **induces vulnerability to psychosis**.
- The **mechanisms** underlying this association are **poorly understood**.
- A **candidate mechanism** for developmental-trauma-induced psychosis is an **impaired mentalisation ability** – otherwise known as 'Theory of Mind'.
- Theory of Mind/Mentalisation** is the ability to attribute mental states to ourselves or others.

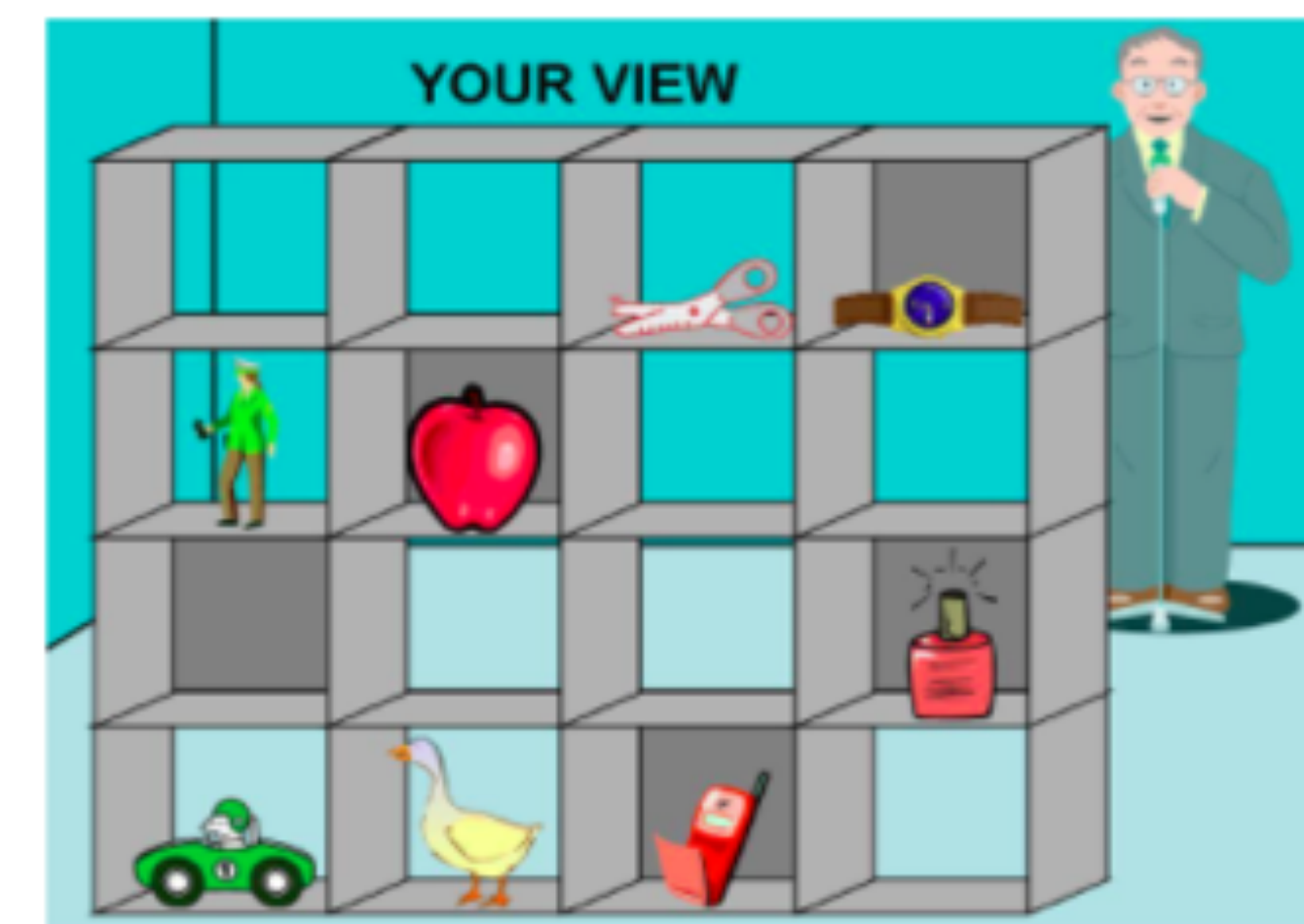
Methods

- 197 participants** were recruited.
- They were divided into two groups according to trauma status – using the '**Childhood Trauma Questionnaire**':
 - Positive for developmental trauma (**DT+**)
 - Negative for developmental trauma (**DT-**)
- Then further divided into two further groups according to psychotic experiences - using the '**The Community Assessment of Psychotic Experiences**':
 - Subclinical psychotic symptoms (**S**)
 - Healthy (**H**)
- Four groups for analysis: **DT+H, DT+S, DT-H, DT-S**.

The Director Task

- To investigate impaired mentalisation ability, we used a computerised version of the '**Director Task**'.
- In the task, participants are **instructed to move objects around a 4x4 grid**.
- This is performed in the presence of a confederate - 'the director' - standing behind the grid, instructing the participants (**director task**) or without the director for comparison (**non-director task**).
- In the director task, the **confederate cannot see all of the objects** as they may be occluded on his side.
- The **participants must take this into account** when instructed to move an object.
- This allows **analysis of mentalisation ability** of participants.

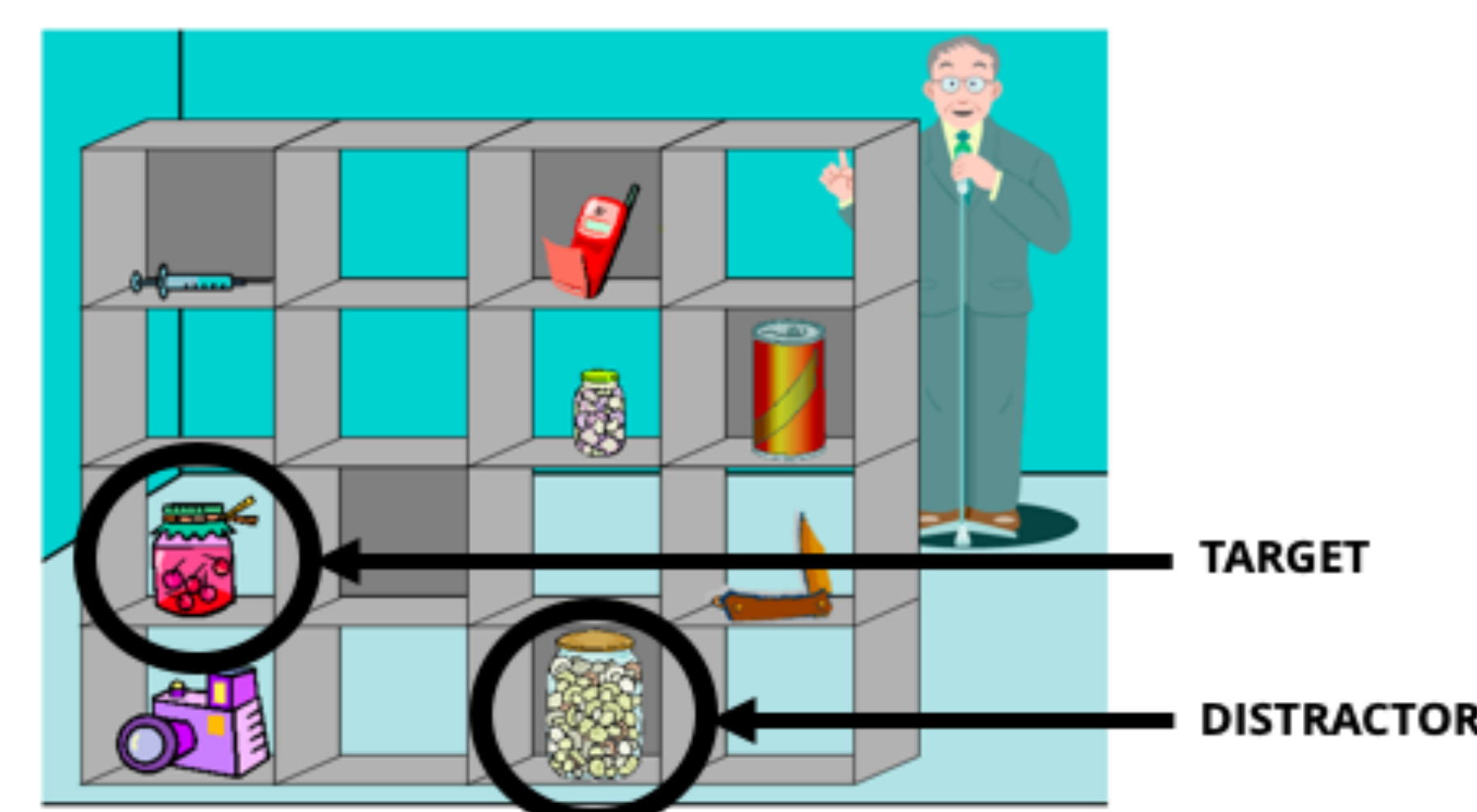
(A) Instruction Example: Participant's View



(B) Instruction Example: Director's View

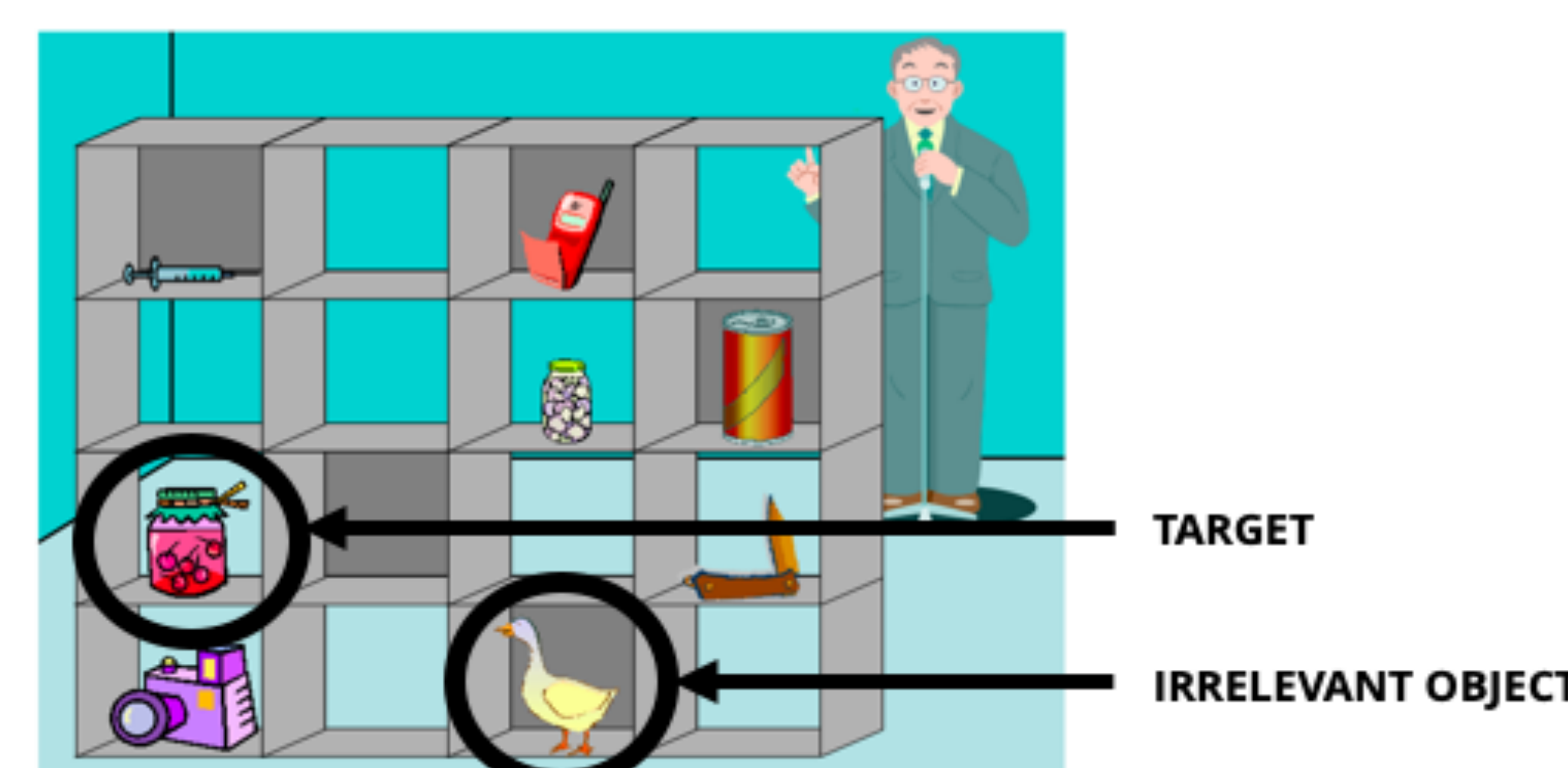


(C) Experimental Trial



"Move the large jar right."

(D) Control Trial



"Move the large jar right."

Strengths and Limitations

- ☺ The use of the 4x4 Director Task allows for **extension of previous findings**.
- ☺ **Measurement of confounds** including state anxiety.
- ☺ Large **sample size**, age-, sex- and ethnicity-**matched groups**.
- ⊗ The **ecological validity** of the director task – it places "artificial demands on selective attention".
- ⊗ The study has a **cross-sectional design** – it cannot ascertain a temporal relationship.
- ⊗ The present study **did not include measures of IQ**.

Analysis

- Performance on the director task (**mentalisation ability**) was quantified as accuracy and reaction time.
- Task performance was analysed using a **2x2x2 ANCOVA**.
 - Developmental Trauma Group**: DT+ vs DT-
 - Condition**: Director vs No-Director
 - Trial Type**: Experimental vs Control
- This was performed for **psychotic experiences**, also.
- To investigate whether an **association between mentalisation performance and DT varies as a function of PLE**, a **moderation model** was used.

Results

- Participants with a history of DT demonstrated **significantly lower accuracy** on the director task relative to control (**p = .020**).
- Participants who were more prone to psychotic experiences demonstrated **significantly lower accuracy** on the director task relative to control (**p = 0.031**).
- Groups were **controlled for the effects of age**.
- Groups **did not differ in reaction time**.
- TOM did not mediate the relationship between DT and psychotic experiences**.

Outlook

- Our results show that **mentalisation ability is associated with both DT and psychotic experiences**.
- The finding of a **relationship between mentalisation and psychotic experiences** supports the view that **mentalisation may be involved in this relationship**.
- Further work is needed** to investigate this relationship.
- Interventions targeting mentalisation ability** may be helpful for adult survivors of developmental trauma e.g. **mentalisation-based therapy (MbT)**.