Theory-Driven Intervention for Changing Personality: Expectancy Value Theory, Behavioral Activation, and Conscientiousness

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Considerable evidence suggests that personality traits may be changeable, raising the possibility that personality traits most linked to health problems can be modified with intervention. A growing body of research suggests that problematic personality traits may be altered with behavioral intervention using a bottom-up approach. That is, by targeting core behaviors that underlie personality traits with the goal of engendering new, healthier patterns of behavior that, over time, become automatized and manifest in changes in personality traits. Nevertheless, a bottom-up model for changing personality traits is somewhat diffuse and requires clearer integration of theory and relevant interventions to enable real clinical application. As such, this article proposes a set of guiding principles for theory-driven modification of targeted personality traits using a bottom-up approach, focusing specifically on targeting the trait of conscientiousness using a relevant behavioral intervention, Behavioral Activation (BA), considered within the motivational framework of expectancy value theory (EVT). We conclude with a real case example of the application of BA to alter behaviors counter to conscientiousness in a substance-dependent patient, highlighting the EVT principles most relevant to the approach and the importance and viability of a theoretically driven, bottom-up approach to changing personality traits.

Keywords: conscientiousness, expectancy value theory, behavioral activation, bottom-up approach to personality change

Dispositional theories largely characterize personality traits as stable patterns of cognition, affect, and behavior that are consistent across contexts, heritable, functionally unchanging, and causal (McCrae & Costa, 2008). However, considerable evidence suggests that personality traits may be dynamic and shift along developmental trajectories (e.g., Jackson, Hill, & Roberts, 2010; Johnson, Hicks, McGue, & Iacono, 2007; Roberts, Walton, & Viechtbauer, 2006). Emerging research also indicates that personality traits can be modified using intervention (e.g., Clark et al., 2003; De Fruyt et al., 2006; Jackson, Hill, Payne, Roberts & Stine-Morrow, 2012; Krasner et al., 2009; Tang et al., 2009).

Arguably, the first time it became clear that psychotherapy could be used to change a personality trait was with the publication of Smith, Glass, and Miller’s (1980) seminal review of the effectiveness of psychotherapy in general. Smith et al. (1980) reported that relatively short-term cognitive-behavioral interventions altered personality traits more than one standard deviation. Building on this initial work, more recent research has demonstrated the changeability of personality traits through direct intervention across a number of domains. As a key example, a 20-week cognitive-behavior therapy intervention aimed to treat depression was associated with changes in a number of personality traits, most notably in extraversion and neuroticism (Clark et al., 2003). Another more recent study demonstrated that training medical students in mindfulness resulted in changes in the traits of conscientiousness, agreeableness, empathy, and emotional stability (Krasner et al., 2009). Similarly, a social skills training program for recovering substance abusers led to increases in agreeableness, conscientiousness, and emotional stability (Piedmont, 2001); a cognitive training intervention for older adults (focused on inductive reasoning skills, crossword and Sudoku puzzles) increased participants’ levels of openness to experience compared with a control condition (Jackson et al., 2012).

A related line of work has examined the combination of psychosocial intervention and medication. For example, De Fruyt and colleagues (2006) found that individuals treated with a combination of either tianeptine or fluoxetine and therapy showed greater extraversion, openness to experience, agreeableness, and conscientiousness following treatment. Similarly, a recent study on the effects of cognitive therapy and medication (selective serotonin reuptake inhibitors) on depression found that both were associated...
with changes in neuroticism and extraversion compared with a control group (Tang et al., 2009). Most importantly, changes in depression were shown to be the result of changes in neuroticism, and long-term relapse in depression was explained by changes in neuroticism, such that people who decreased the most on neuroticism were the least likely to experience a relapse.

**Theoretical Framework to Change Personality**

Although accumulating evidence suggests personality traits indeed can change, to date there have been few endeavors to target particular personality traits using a theoretically driven approach. One view that may be particularly relevant to intervention efforts conceptualizes personality traits as relatively enduring, automatic patterns of thoughts, feelings, and behaviors that differentiate people from one another and that are elicited in trait-evoking patterns of thoughts, feelings, and behaviors. For instance, extraverts seldom enter a room and say to themselves “Now, I’m going to act extraverted!” They enter a room and nonconsciously start acting and interacting. Furthermore, in this view, personality exists not only at the trait level, which reflects the relatively enduring signature of traits, but also at the state level, which reflects moment-to-moment fluctuations in functioning (e.g., Fleeson, 2001). Although evidence indicates that states are partially a reflection of traits (Nezlek, 2007), state-level variation also suggests the possibility that variation in thoughts, feelings, and behaviors may occur for other reasons (than those relating to the trait) and can be shaped by environmental contingencies (Roberts, 2009). As such, contingencies may be used to shape states, which in turn may change traits in a bottom-up fashion (Roberts et al., 2006). That is, healthy patterns of behavior that take hold and persist become “automatic” in largely the same way as did previous unhealthy patterns, thereby leading to lasting change at the trait level (Roberts, 2009; Roberts & Jackson, 2008).

Thus, the challenge for any intervention to changing personality traits is not only to overcome the nonconscious nature of personality traits but also to inculcate a level of change that is so complete it is automatic and instantiated over time in an enduring way.

We believe that going forward, efforts to change personality would benefit from a systematic, theoretically driven approach that aims to affect changes in personality through targeted behavior changes (i.e., according to a bottom-up model of personality change; see also Chapman, Hampson, & Clarkin, 2014, for a further discussion of this model). That is, rather than focusing on the personality trait as the clinical target of interest, as would be the intended focus in a “top-down” approach, we instead focus on altering processes that underlie the manifestation of the trait that are most “accessible to monitoring and change” (i.e., behavior; see Chapman et al., 2014). Thus, through repeated practice of new behaviors targeted through intervention, the goal is for these new behaviors to become automatic or implicit. The degree to which the intervention can result in new behaviors that are automatized will ultimately manifest in trait-level changes (see Chapman et al., 2014).

Toward this end, the goal of the present article is to propose a set of guiding principles to change personality traits in the context of a bottom-up approach. In doing so, we stress the importance of placing the intervention within a guiding theoretical framework that considers the core characteristics of the personality trait but targets the intervention at core behavioral manifestations of the personality trait (as opposed to a top-down approach that would focus more directly on changing the personality trait itself). Thus, we propose a framework that is based on the notion that personality can be changed by targeting behaviors that characterize specific personality traits. These targeted behavior changes, although initially effortful, over time may become more automatic; it is at the point that the behaviors become ingrained that the new behavior patterns ultimately manifest in trait-level changes (Chapman et al., 2014; Roberts et al., 2006).

To provide an example of how to apply these guiding principles to target the trait of conscientiousness, we illustrate the use of Behavioral Activation (Dimidjian, Barrera, Martell, Muñoz, & Lewinsohn, 2011; Hopko, Lejuez, Ruggiero, & Eifert, 2003; Jacobson et al., 1996; Lejuez, Hopko, & Hopko, 2001) to target closely relevant behaviors as a means to change conscientiousness over time. BA is considered within a closely relevant theoretical framework, expectancy value theory (EVT; Eccles, 2009; Eccles et al., 1983), which integrates personal motives and personality to demonstrate how identity shapes values, goals, and subsequent behaviors. We conclude with a real case example to provide a clear picture of what the integration of EVT and BA may look like in practice by demonstrating the application of BA to alter behaviors “counter to conscientiousness” in a substance-dependent patient and highlighting the EVT principles most relevant to the approach. Although BA has not previously been considered within the framework of EVT, nor applied to change conscientiousness specifically, it is our hope that this article depicts a bottom-up approach for changing conscientiousness using behavioral intervention, and that this may stimulate efforts for using a theoretically driven, bottom-up approach to changing personality traits.

**Changing Conscientiousness**

As the focus of this special series, conscientiousness, defined as the aspect of personality closely related to individual differences in the propensity to be disciplined, goal-oriented, self-controlled, responsible to others, hardworking, orderly, and rule following (John & Srivastava, 1999; Roberts, Chernyshenko, Stark, & Goldberg, 2005), represents one personality trait that has consistently been linked to important health and functioning outcomes across the life span, including physical health status (Hampson, Goldberg, Vogt, & Dubanoski, 2007), longevity (Kern & Friedman, 2008), substance use (Bogg & Roberts, 2004; Goodwin & Friedman, 2006; Trull, Waudby, & Sher, 2004; Walton & Roberts, 2004), academic achievement (Noffle & Robins, 2007), and occupational functioning (Dudley, Orvis, Lebeicki, & Cortina, 2006; Roberts, Kuncel, Shiner, Caspi, & Goldberg, 2007; see also Roberts, Lejuez, Krueger, Richards, & Hill, 2013, for a detailed overview of conscientiousness and its clinical correlates). As discussed in the previous articles in this series, efforts to change conscientiousness may hold great public health significance in enabling changes across key outcomes related to health, functioning, and quality of life. Although there have been some interventions that have
changed conscientiousness, for example, using a mindfulness-based approach (Krasner et al., 2009) and social skills training (Piedmont, 2001), existing efforts to systematically target conscientiousness a priori using a bottom-up behavioral approach have been limited. As indicated above, there is a clear need for theory-driven targeted behavioral interventions to engender meaningful changes in seemingly intractable personality traits, such as conscientiousness, through automatized behaviors that reflect the trait of conscientiousness. It may only be these changes become so implicit that we see sustained changes in health and functioning outcomes linked to conscientiousness.

Theory-Driven Intervention to Change Conscientiousness

This reality sets the stage for developing a theory-driven approach to targeting conscientiousness through behavior change. We begin by considering a theoretical framework to guide a bottom-up approach to changing conscientiousness specifically. We then move to selecting a behavioral intervention that is most appropriate given the core aspects of conscientiousness and the behaviors that most closely reflect this trait. We conclude with a real case example of the application of BA to alter behaviors “counter to conscientiousness” in a substance-dependent patient, highlighting the EVT principles most relevant to the approach.

Selecting a Theoretical Framework Closely Tied to Conscientiousness

As modern personality trait theories do not commonly discuss the process of change and development, or unpack the composition of a trait in such a way as to make it clear just how to change it, alternative formulations may be particularly useful. We believe it is critical to identify a motivational framework separate from the trait domain to facilitate change in personality (see Roberts & Wood, 2006, for a discussion of the neosocioanalytic model that argues for the separation of motivation and traits). As noted above, traits are automatic patterns, and are thus unlikely to spontaneously change on their own without some intervention. We believe a successful intervention would work through the motivational system by making people both aware of their proclivities and then motivated to change them.

Given that conscientiousness is strongly linked to goal setting, commitment to goals (Barrick, Mount, & Strauss, 1993), achievement, persistence, and valuing performance (Chamorro-Premuzic & Furnham, 2003; Denissen, Zarret, & Eccles, 2007; Sansone, Wiebe, & Morgan, 1999), we also aimed to identify a theory that focused on context, individual motivation, and achievement to provide a theoretical foundation for changing conscientiousness specifically. Furthermore, a theory focused on motivation and achievement would be most relevant to the aspects of conscientiousness most closely associated with healthy behavior.

EVT: A Formulation of Personality Closely Linked to Conscientiousness

A key example of a developed theory that focuses on motives, values, goals, and their context-specific nature is Eccles’s EVT (Eccles, 2009; Eccles et al., 1983). This theory incorporates both a consideration of personal motives and personality disposition to demonstrate how identity shapes values, goals, subsequent behaviors, and decisions. Given EVT’s unique relevance to numerous aspects of conscientiousness (e.g., persistence, rule following), it may serve as a closely tied framework for theory-driven efforts to change conscientiousness by providing a framework for identifying behaviors central to the trait of conscientiousness.

EVT argues that individuals’ choice and persistence in different domains can be explained by their beliefs about how well they will do and the extent to which they ascribe value to the activity (Eccles, 2009; Wigfield & Eccles, 1992). According to Eccles’s theory, identity is composed of three main components: (a) a value component that focuses on the salience, centrality, and valence attached to individual characteristics and collective groups of which one is a member; (b) a content component that focuses on individual beliefs regarding tasks, behaviors, and activities that are associated with enacting one’s identity; and (c) an efficacy, or expectancy component that focuses on one’s specific beliefs related to one’s ability to enact these behaviors. These three components are thought to interact to influence experiences and interpretation of those experiences over time, which shape each other and continue to foster identity formation and transformation (Eccles, 2009). According to EVT, individuals with high valuing of and expectations for success at a task would then show ambitious goal-setting, persistence, effort, and subsequent achievement (Eccles et al., 1983; Eccles, Midgley, & Adler, 1984; Fredricks & Eccles, 2002; Wigfield, 1994; Wigfield & Eccles, 2002). Thus, EVT may provide a framework for understanding how to select behaviors that the individual will likely be motivated to practice and persist in over time. In turn, this increases the likelihood of inculcating a level of change that ultimately becomes automatic at the trait level.

The theory highlights the malleability of personal identities over time, and across situations even at the same point in time, which are driven by context-specific characteristics affecting the salience of different identities. In particular, the value placed on activities and behaviors are based on context and the salience of identity. Salience of identity may also differ based on individual social and psychological experiences throughout development, the interpretation of these experiences, as well as continued social interactions and influences (Eccles, 2009). Eccles’s perspective views behavioral choices as ways in which individuals “validate” their identities and that personal identity in a context determines behavioral choices (i.e., “motivated action”). Decisions of how to “spend time and energy” are based on expectations of and values placed on behavioral choices, and these behavioral choices may serve to provide further information and experiences to drive identity development (Eccles, 2009). In sum, Eccles’ conceptualization of identity formation is that it is malleable over time and across contexts and that behavioral choices driven by one’s identity may serve to further its formation.

Although the “important psychological consequences” of identifying value-driven activities in EVT have been noted (e.g., Deci & Ryan, 1985), rarely has EVT been tied directly to specific aspects of personality, such as conscientiousness, or to targeted intervention efforts. Numerous researchers have suggested the need for “theoretical integration of the field” (e.g., Eccles & Wigfield, 2002), specifically pointing to the integration of personality theory and clinical intervention. EVT may offer particular
relevance to target changes in conscientiousness given the emphasis on context, individual motives, and value-driven behavioral changes that may ultimately affect changes in identity.

EVT and Conscientiousness

Conscientiousness is considered to be a personality trait highly relevant to motivation (Colquitt & Simmering, 1998), values (Barick et al., 1993), achievement (Dollinger, Leong, & Ulicici, 1996; Roccas, Sagiv, Schwartz, & Knafo, 2002), and persistence (Sansone et al., 1999). Conscientious individuals identify a greater number of values that are “important” and succeed at them (Barick et al., 1993), which is characteristic of the goal-directed nature and expectancy for success among conscientious individuals (Barick et al., 1993; Veage, Ciarrochi, & Heaven, 2011). Conscientious individuals are more likely to report valuing achievement (Dollinger et al., 1996; Roccas et al., 2002) as well as achievement related to health-related values specifically (Lüdtke, Trautwein, & Husemann, 2009). Studies have pointed to high levels of intrinsic motivation found among conscientious individuals (Furnham, 1995), which is related to lower external pressures to hold values (Veage et al., 2011). Furthermore, conscientiousness is also influenced by ability and perceptions of one’s skill (Witt & Ferris, 2003), in line with the third component of EVT (e.g., perceived self-efficacy to enact behavior).

The links described above are important because they show that EVT and conscientiousness are thematically similar and often correlated. However, there are also important distinctions. That is, EVT pertains to conscious thoughts and motives that can be manipulated and changed in the short term. Meanwhile, conscientiousness is in the trait domain and reflects automatic manifestations of thoughts, feelings, and behaviors. From our perspective, EVT provides a set of mechanisms that can be manipulated in order to help change the thoughts, feelings, and behaviors that make up conscientiousness and provides a framework for identifying value-driven behaviors that may be most reflective of conscientiousness. We foresee using motivational constructs to change trait-related thoughts, feelings, and behaviors until they become automatic. The key question is how to use this framework to enact long-term and relatively permanent changes in a personality trait moving from one’s value system to their actual actions on a daily basis using behavioral intervention.

BA: A Bottom-Up Approach to Changing Conscientiousness

Selecting an intervention that would be most likely to affect conscientiousness, specificity of the intervention to the core of conscientiousness and the overarching theoretical framework are important considerations. Although no behavioral interventions to date have sought to specifically target conscientiousness, accumulating evidence suggests an intervention that provides detailed structure, a focus on values, guided action, goal-setting, immediate feedback on progress and challenges, clear accountability, and an opportunity for remediation might be especially useful for building conscientiousness. One closely relevant example of an intervention that centers on structure, accountability, and value- and goal-directed behavior is BA (Dimidjian et al., 2011; Hopko, Lejuez, et al., 2003; Jacobson et al., 1996; Lejuez et al., 2001), which is a practical and structured treatment based on reinforcement theory (Ferster, 1973; Lewinsohn, 1974). In the most straightforward and brief version of BA (i.e., Lejuez, Hopko, Acierno, Daughters, & Pagoto, 2011; Lejuez et al., 2001), individuals initially monitor their daily behavior and rate activities on levels of importance and enjoyment. This is meant to illustrate specific times of day or behavior patterns that may be contributing to low mood. The focus of therapy then moves to the identification of values, consideration of daily activities consistent with those values, and a structured plan for engaging in those valued activities, which includes exercises such as creating a hierarchy of potential activities based on perceived difficulty and scheduling activities into specific periods of one’s day. The primary goal of BA is to increase engagement in goal-directed activities that are considered important, enjoyable, and in accordance with individual values across numerous domains of one’s life. BA was initially developed as a treatment for depression and has since accumulated sufficient evidence to be considered efficacious for treating depression (Cuijpers, van Straten, & Warmerden, 2007; Ekers, Richards, & Gilbody, 2008; Mazzaucchelli, Kane, & Rees, 2009; Sturmey, 2009). Recent evidence suggests that BA can be efficaciously provided as an individual or group approach and condensed into a briefer format (e.g., five sessions as practical barriers necessitate; Magidson et al., 2011), which supports its broad application across a range of clinical settings.

BA versus other motivation-based approaches. BA under the EVT framework shares similarities with other motivation-based approaches, such as Miller’s Motivational Interviewing (MI; Miller & Rollinck, 1991; Miller & Rose, 2009) and Oyserman’s Possible Selves’ identity intervention (PSII; Oyserman, Terry, & Bybee, 2002) in eliciting behavior change from the client; however, these approaches differ in important ways. For example, the motivation-to-change agent in MI is conceptualized as originating intrinsically by the client’s exploration and resolution of ambivalence, whereas in BA, this motivation is driven first by the client’s success in completing scheduled, valued activities and is later internalized as a sense of achievement. Furthermore, the bulk of change in MI is believed to occur within the therapeutic context through change talk. Contrasting this notion, in BA, a greater focus is placed on structuring clients’ schedules to foster engagement in goal-directed activities in a way that will promote their success in changing behavior; therefore, change largely occurs outside of the session. BA and the PSII correspond in their goals to make contextual shifts that result in a value-driven life. However, a defining feature of BA is that in the therapy, the client is oriented toward identifying different values in various life domains, such as relationships, wellness, and career/education among others, increasing the scope of change relative to the PSII, which was designed to promote youths’ connection with their school by specifically targeting this area. An additional important difference between the two approaches is the time orientation of the discussion of client values. In the PSII, the possible selves are discussed in terms of the future. In BA, these discussions may be present-focused (through valued activities clients are already completing), future-focused (through identifying changes they want to see occur and scheduling additional positive activities), or past-focused (through clients indicating which activities they could decrease that have resulted in negative consequences in the past). Although it is important to contrast BA with other approaches for our
purposes here, it is not meant to suggest that these approaches are contradictory. In fact, several ongoing studies are attempting to combine these approaches to capitalize on their potential synergy.

Relevance of BA to Conscientiousness Within the EVT Framework

Although BA has not yet been tested as an intervention to change personality traits, or conscientiousness specifically, there are important conceptual links given the strong focus on individual values, structure, and accountability. In BA, individuals monitor their daily activities and subsequently identify alternative activities to introduce in one’s life that align with one’s values. This process requires individuals to attend closely to existing schedules, plan their days, set goals, and persist in an effort to achieve behavior change. These components of BA—monitoring of behavior and progress, goal setting, planning, value alignment, and persistence—map onto the core of EVT and the trait domain of conscientiousness. By applying behavioral techniques to conscientiousness-related goal structures and working with individuals long enough to routinize the changes in thoughts, feelings, and behaviors relevant to conscientiousness, we believe BA satisfies the requirements of an intervention that could change behaviors otherwise considered to be the result of traits and instantiate them as the product of newly formed traits. That is, as the behavioral changes targeted in BA that map on closely to the trait of conscientiousness are practiced and continued over time, we would expect that they ultimately reach a level of automaticity that is more reflective of trait-level changes.

Beyond the conceptual relevance, the link between BA and conscientiousness also is indicated by the application of BA beyond depression and to disorders that are, in essence, the antithesis of conscientiousness. Indeed, BA has demonstrated preliminary effectiveness in reducing alcohol use (Reynolds, MacPherson, Tull, Baruch, & Lejuez, 2011), smoking (MacPherson et al., 2010), and improving substance use treatment outcomes (Daughters et al., 2008; Magidson et al., 2011), and obesity-related outcomes (Pagoto et al., 2008). Furthermore, case studies have highlighted the application of BA in preventing suicidal behaviors in patients with borderline personality disorder (Hopko, Sanchez, Hopko, Dvir, & Lejuez, 2003) and improving HIV medication nonadherence among individuals with HIV and substance use disorders (Daughters, Magidson, Schuster, & Safren, 2010).

Despite the potential connections among EVT, BA, and conscientiousness, rarely have these connections been made or used to inform practical applications; this may serve as a particularly helpful example of how theory can drive intervention efforts as a means to change personality, and conscientiousness specifically, in a bottom-up fashion. Highlighting the links between BA, EVT, and conscientiousness may not only enhance the practical implications of using EVT to intervene to change this specific personality trait, but it may also inform our delivery of BA by more closely targeting changes in conscientiousness. It is the hope that these efforts ultimately increase our understanding of how a bottom-up behavioral intervention may affect changes at the level of personality traits as well as how trait-level changes may be associated with sustained healthy behavior following BA.

BA Case Study

Although we know of no existing efforts to guide clinical interventions using the framework of EVT, we believe the execution of BA inherently involves attention to the very principles that underlie EVT. Specifically, the link between values and motivation for activity engagement as implied in EVT distinguishes BA from other behavior therapies that focus on increasing pleasant events without necessarily grounding this in values (Lewinsohn, 1974); rather, BA, with a core focus on linking one’s personal values directly with commitment to daily activities, maps on closely with this central focus on values in EVT.

To illustrate the application of such an intervention and what it would look like in a real-world setting, we can draw from a clinical example of BA used to change behavior typical of individuals low in conscientiousness—in this case, specific to the treatment of a cocaine-dependent patient. It is our hope that this case example will spur interest in EVT for guiding clinical intervention and the importance of specifically targeting and assessing personality traits such as conscientiousness with therapies closely tied to these traits for relevant clinical problems.

Case Overview

Mr. M was a 45-year-old African American male who was in outpatient substance abuse treatment for cocaine dependence. He was court-referred to treatment and demonstrated numerous symptoms of cocaine dependence. In the year prior to entering treatment, he spent significant time trying to obtain and use cocaine and as such neglected other areas of his life (work, family, daily responsibilities). He would often skip work, not return home to feed his child or see his wife, and often missed bills he had to pay and legal appointments. He also suffered numerous psychological and health consequences as a result of his use; however, he continued to use despite these consequences. He met full criteria for cocaine dependence in the past year prior to treatment. He did not meet any other psychiatric diagnoses upon entry. Although we did not use any formal assessment of personality traits, the clinical presentation clearly indicated the patient was living a life quite inconsistent with the defining features of conscientiousness, particularly accountability across numerous life areas.

BA Treatment

As part of his treatment plan for relapse prevention, BA was used not as an intervention to target substance use directly per se, but rather to instill a more positive and regular pattern of behaviors to address some of the other symptoms of cocaine dependence, particularly the neglect of other areas of his life—in essence, increasing behaviors that reflected the core aspects of the trait of conscientiousness. The treatment rationale, guided by the main principles of EVT, was that through an exploration of Mr. M’s values, goal setting within those values, and scheduling of valued activities unrelated to substance use that he believed he could succeed in, this would enhance his personal motivation and persistence related to living a sober life. If he was able to find a sense of achievement and effort in pursuing activities outside of substance use, this would enhance his ability to remain abstinent.

The specific treatment strategies used in this case reflect core components of EVT (Eccles & Wigfield, 2002), including a con-
sideration of “attainment value” (the importance of a given task), “intrinsic value” (the enjoyment one gains from doing a given task), the “utility value” (the degree to which a task fits into an individual’s future plans), and “cost” (how much effort will be needed to accomplish the activity) in order to understand motivation related to activity engagement. First, Mr. M monitored his daily behavior, including activities he was engaging in every day hour by hour, and rated these activities on subjective levels of “importance” and “enjoyment.” This strategy was used to highlight the amount of time Mr. M had spent using cocaine, as well as other activities including those that might be further developed as alternatives to cocaine use. Although Mr. M’s substance use had lessened after entering treatment, he was still engaging in frequent cocaine use. Particularly on those days, the monitoring provided a clear illustration of how his substance use was consuming most of his day, interfering with other important activities and his ability to be responsible to others in his life (e.g., picking up his daughter from school, going to work, and coming home to his wife). Importantly, these are core behaviors counter to the trait of conscientiousness. Regarding his cocaine use, he consistently rated it as “enjoyable” in the first few hours while high, and then the enjoyment rating lessened significantly over time; cocaine use was never rated highly on importance on any day. Interestingly, across the days of monitoring, he also started to rate cocaine less enjoyable. His “enjoyable” activities besides substance use were playing games with his daughter, spending time with his wife, including cooking together, and watching TV. The realizations provided with the monitoring exercise map on closely with the main principle of EVT. Specifically, spending significant time in activities that are ascribed little value or potential for mastery contributed to low mood and motivation for behavior change (Denissen et al., 2007; Wigfield & Eccles, 2002). This is precisely the focus of behavior monitoring in BA, to identify these patterns in which time is inadequately distributed to activities that are meaningless or bring little potential for reward.

Following 3 weeks of behavior monitoring, the therapy then turned to an identification of values, consideration of daily activities consistent with those values, and a structured plan for engaging in valued activities, which included creating a hierarchy of potential activities based on perceived difficulty and scheduling activities into specific periods of Mr. M’s day. Mr. M noted five core values that were most important to him at this time, including being (a) a trustworthy father, (b) a dedicated employee (he worked full time in landscaping before getting laid off due to missed work days), (c) a loyal and loving husband, (d) an accomplished citizen (to fulfill not only familial daily responsibilities but also things like paying bills, his taxes, and voting), and (d) dedicated to living a sober life. In each case, these values reflect his underlying desire to behave in a more conscientious manner.

After identifying values, the treatment strategy involved identifying specific activities that he could do to live a life according to these values. With the therapist, he was guided in breaking down activities into small enough pieces that would promote success and diminish likelihood of failure. Furthermore, he was asked to rate both the importance and enjoyment of these activities as an attempt to differentiate between feelings of pleasure and mastery and incorporate activities likely to increase a balance of both (Lejuez et al., 2011). This is directly in line with the principles of EVT that the main factors influencing value ascribed to an activity that may predict actual engagement in that activity include both importance and enjoyment (i.e., the principles of “attainment,” “intrinsic value,” and “utility value” in EVT; Eccles & Wigfield, 2002). Next, across each of these values and value-based activities, Mr. M was asked to create a hierarchy in which he listed these activities in order of difficulty (i.e., similar to a hierarchy common in the treatment of anxiety disorders; Barlow & Craske, 2006) in order to guide the plan for increasing his engagement in these activities in a way that would be meaningful yet also manageable. This strategy of creating a hierarchy also maps onto the other core EVT principles, including assessing the “cost” of an activity (i.e., how much effort will be needed to accomplish the activity). At the bottom of his hierarchy, Mr. M listed activities that he was already occasionally doing that were in line with his values, such as picking up his daughter from school, cooking with his wife, and paying bills. At the top of his hierarchy were mostly activities related to his value of living a sober life, such as going to substance abuse treatment at least three times per week, not calling friends who were triggers for his use, giving his money to his wife after he got paid, and going to Narcotics Anonymous/Alcoholics Anonymous (NA/AA) meetings. He rated these as the most important activities to him, although some had little enjoyment and very high-perceived difficulty.

Following the activity hierarchy, the treatment moved to actually scheduling the listed activities into Mr. M’s days and monitoring his accomplishment of these scheduled activities over 5 weeks. This created a sense of accountability, a set plan, and a way to monitor progress, all of which align with the core components of EVT to increase expectancy of self-efficacy for truly valued activities. Mr. M was able to successfully accomplish many of the activities at the bottom of his hierarchy relatively quickly, and he found that on those days, he was more likely to be able to complete substance use-related activities. However, accomplishment of these activities took more time. By the end of 12 weeks of treatment, he had significantly reduced his cocaine use (to once per month) and reported living a much more fulfilling, enjoyable life, which included being employed part-time, better managing his legal responsibilities, and continuing to develop a loving relationship with his wife and daughter. He did continue to note concerns regarding relapse, but noted that he was committed to maintaining his attendance at substance abuse treatment, NA/AA meetings, and activity scheduling even after the final BA session.

Case Summary

The case example illustrates how BA may offer a set of empirically supported techniques that map directly onto the core components of an expectancy-value perspective of achievement motivation and its link to conscientiousness. Together, EVT and BA may provide a useful value-driven framework for pursuing behaviors that may be most reflective of conscientiousness that can be artfully subsumed through defining the patient’s values and motivations according to this framework. Importantly, taking this approach allowed Mr. M to tackle the daunting task of addressing values with more concrete and achievable small steps that comprised his value-directed activities. In Mr. M’s case, the target was purely bottom up, aiming to change patterns of behaviors that would be more “conscientious,” but the goal was sobriety and not...
necessarily personality change. However, this does not mean that personality change did not occur. BA may have led to personality trait change, as it does in association with other forms of psychotherapy (Smith et al., 1980). Nonetheless, there is presently no empirical test of this conjecture. The next step in testing this approach as an intervention to change personality would be to examine to what extent the intervention can inculcate a level of behavior change that ultimately becomes automatic at the trait level beyond any targeted psychopathology, which would in turn lead to changes in the relevant traits (i.e., conscientiousness).

Conclusions and Future Directions

Recent work suggests the dynamic, potentially changeable nature of personality (e.g., Jackson et al., 2010; Johnson et al., 2007; Roberts et al., 2006). This perspective has important public health implications, specifically, raising the possibility that personality traits highly associated with health behaviors can be modified with intervention through targeted changes in behavior that become automatic over time. However, to date, there have been few efforts in this domain, and even fewer that target specific personality traits a priori and select an intervention within the context of relevant personality theory. Toward this end, we aimed to present in this article a bottom-up framework for behavioral intervention to produce consistent change in behavior and subsequent change in personality that begins with consideration of a theoretical framework for behavioral change that is closely relevant to the core characteristics of the trait of interest. From this, one can identify a behavioral intervention in line with this theoretical framework to target behavioral changes closely relevant to the trait and emphasize routinized practice of these behaviors over time.

We provided a specific example to illustrate how a theoretically driven framework may guide intervention efforts to change conscientiousness in a bottom-up fashion. In identifying a closely related theory, we focused on an alternate motivational theoretical framework, EVT, which highlights how identity shapes values, goals, and subsequent behaviors in a manner that may produce lasting change. Moreover, we used EVT as a theoretical framework to guide selection of an empirically supported intervention, BA; although BA has not yet been tested as an intervention to change personality, it has at its core the goal of building new behavioral patterns in line with the overarching theory of EVT and the trait of conscientiousness.

Future directions from this work should examine the most appropriate dose (i.e., number of sessions) and format (i.e., group vs. individual) that are needed to slowly change the most intractable of personality traits. Specific to conscientiousness, future directions may include further explicit links between the principles of EVT and BA delivery, particularly the components of EVT that are most relevant to conscientiousness, as well as using EVT to drive the measurement of changes in conscientiousness following BA. Moreover, future research must test the extent to which intervention effects truly occur as a bottom-up process. This could be facilitated by using assessment measures during and after treatment to demonstrate that the intended behavioral changes occurred and that these changes then led to longer term, sustained personality changes. In addition to measures of the personality trait itself, this may also involve assessment of potential mediators that might include measures of motivation (Miller & Rose, 2009), activation, or reward-based measures used to evaluate behavioral changes in BA (e.g., the Behavioral Activation for Depression Scale; Kanter, Mulick, Busch, Berlin, & Martell, 2007, or the Reward Probability Index; Carvalho et al., 2011), or measures developed to assess EVT-related constructs (see, e.g., Wigfield & Eccles, 2000, for example items to assess ability beliefs and subjective task values).

In summary, although we have focused specifically on EVT, conscientiousness, and BA, the overarching aim of the present article was less about the specificity of a particular trait, theory, or intervention, but rather the depiction of a theoretically driven systematic approach for intervening to change personality using a bottom-up approach. This approach to intervention may be applicable also to a range of personality traits, such as those previously tested in depression trials (neuroticism, extraversion; Tang et al., 2009). Lastly, although we used an existing empirically supported intervention with close relevance as our example, future work may consider developing a novel intervention, a priori, that is derived closely from personality theory. Whether adapting an existing intervention or formulating a new approach, an underlying theory should be used to guide the efforts going forward to change aspects of personality closely related to healthy behavior.

References


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