# Chapter Twelve: Personality Disorders PSY 440: Abnormal Psychology Dr. Rick Grieve Western Kentucky University

# **Personality Disorders**

## Personality Disorder

- Excessively rigid patterns of behavior or ways of relating to others
- Prevents people from adjusting to external demands
- Beginnings are present in childhood

# **Personality Disorders**

- Three clusters:
  - Cluster A: People who are perceived as odd or eccentric
  - Cluster B: People whose behavior is overly dramatic, emotional, and erratic
  - Cluster C: People who appear fearful or anxious

## Paranoid Personality Disorder

- Diagnostic Criteria
  - Pervasive suspiciousness
  - Excessive mistrust of others
  - No delusional thinking
- Associated Features
  - Overly sensitive to criticism
  - Easily angered

- Hold grudges
- Unlikely to confide in others
- Question sincerity and trustfulness of others
- Suspect infidelity
- Hypervigilent
- Deny blame for misdeeds
- Argumentative
- Litigious
- Perceived as aloof, cold, scheming, devious, and humorless

- Prevalence rate
   0.5-1%
- Schizoid Personality Disorder
  - Diagnostic Criteria
    - Social isolation
    - Lacks interest in social relationships
    - Emotions seem blunted or shallow
  - Associated features
    - Indifferent to criticism or praise

- Wrapped up in abstract ideas
- Usually recognized by early adulthood
  Schizotypal Personality Disorder
  - Diagnostic Criteria
    - Difficulties forming close relationships
    - Behavior, mannerisms and thought patterns are odd, but not odd enough to warrant a diagnosis of schizophrenia
       Wider range of behaviors, beliefs, and preoccupations than Schizoid PD

- Associated Features
  - Anxious in social settings
- Usually evident by early adulthood
- Prevalence rate
- Etiology
  - genetic

## Antisocial Personality Disorder

- Diagnostic Criteria
  - A pattern of irresponsible and antisocial behavior in which the rights of others or major social norms are violated
  - Must be 18 years old and have been diagnosed with Conduct Disorder before the age of 15
  - Aggressive and impulsive behaviors

- Criminal behavior
- Lack of emotional commitment
- Associated Features
  - Impulsivity
  - Lack of guilt/remorse
  - Superficial charm
  - Egocentricity
  - Manipulative
  - Callousness toward others

- Failure to conform
- Irresponsibility
- Aimlessness and lack of long-term goals
- Substance abuse
- Disregard for the truth
- Interpret others' behaviors as more threatening than they are
- Two components:
  - Personality
  - behavior

- Prevalence
- APD and criminal behavior
- Etiology
  - Learning theories
    - Uliman & Krasner
    - Bandura
  - Family Perspectives
  - Genetic

# Borderline Personality Disorder

- Diagnostic Criteria
  - Pervasive pattern of instability of relationships, self-image, and mood, and a lack of control over impulses
  - Uncertain about personal identities
  - Nagging feeling of boredom and emptiness
  - Cannot tolerate being alone

- Instability of moods
- Associated Featurs
  - Impulsive
  - Self-mutilation
  - Suicide attempts
  - Trouble familial relationships
  - View relationships as problematic
  - Difficult to work with in psychotherapy
- Prevalence Rate

### Etiology

- Psychodynamic Perspective
  - Otto Kernberg
- Family Perspective
- Genetic



## Histrionic Personality Disorder Diagnostic Criteria

 Excessive emotionality and an overwhelming need to be the center of attention

- Tendency to be dramatic and emotional
- Associated Features
  - Demand that others meet their need for attention
  - Self-centered and intolerant
  - Grow restless with routine and crave novelty and stimulation
  - Flirtatious and seductive
  - Use physical appearance as a means of drawing attention to themselves

- Lack in self-esteem
- Prevalence Rate
- Etiology
  - Learning Perspectives
    - Theodore Millon

## Narcissistic Personality Disorder

Diagnostic Features

 Inflated or grandiose sense of self and extreme need for admiration

- Enjoy basking in the light of adulation
- Associated Features
  - Self-absorbed
  - Lack empathy
  - Preoccupied with fantasies of success and power, ideal love, or recognition
  - Gravitate to careers where they can be the center of attention
  - Envious of those who have greater success

- Insatiable ambition
- Strained interpersonal relationships
- Prevalence Rate
- Etiology
  - Psychodynamic Perspective
    - Hans Kohut

## Avoidant Personality Disorder

- Diagnostic Criteria
  - Terrified of rejection and criticism
  - Unwilling to enter into a relationship unless there are strong reassurances of
    - acceptance
  - Avoid group occupational or recreational activities
  - Prefer to spend time alone

- Have an interest in social relationships but are paralyzed
- Associated Features
  - Social isolation
  - Fear public embarrassment
  - Stay with usual routines
- Prevalence Rate

# Dependant Personality Disorder Diagnostic Criteria

- Excessive need to be taken care of by others
- Overly submissive
- Extremely fearful of separation
- Associated Features
  - Find it difficult to do things on their own
    Very reliant on others for support and guidance

- Avoid positions of responsibility
- Overly sensitive to criticism
- Preoccupied with fears of rejection and abandonment
- Higher rate of "oral" behaviors
- Prevalence Rate
- Comorbid Disorders
  - Psychological
  - Physical

- Etiology
  - Psychodynamic
  - Learning
  - Family
- Obsessive-Compulsive Personality Disorder
  - Diagnostic Criteria
    - Excessive degree of orderliness, perfectionism, and rigidity

- Difficulty coping with ambiguity
- Difficulty expressing feeling
- Meticulousness in work habits
- No obsessions or compulsions
- Associated Features
  - Cannot complete things in a timely fashion
  - Focus on details rather than wholes
  - Impaired social relationships

- Do not participate in social or leisure activities
- Stingy with money
- Difficulties making decisions
- Overly rigid in terms of morality
- Prevalence Rate
- Etiology
  - Learning
    - Theodore Millon

# **Problems with the Classification of Personality Disorders**

# Undetermined reliability and validity

 Problems distinguishing between Axis I and Axis II disorders
 Overlap among disorders
 Problems distinguishing between normal and abnormal behavior

# **Problems with the Classification of Personality Disorders**

# Sexist bias Confusing labels with explanations

## Treatment

## Personality Disorders are difficult to treat

## Psychodynamic Approaches

- Help people become more aware of the root of the disorder and deal adaptively with the problem
- Some success

# Treatment

## Behavioral Approach

- Focus on changing clients' behaviors, not personality structures
- CBT has been successful
- Dialectical Behavioral Therapy also is successful at treating BPD
  - CBT and supportive therapy combined

## Treatment

# Biological Approaches Not successful

## References

- American Psychiatric Association (1994). *Diagnostic and statistical manual of mental disorders* (Fourth Ed.). Washington, D. C.: Author.
- Kassler, R. C., McGonagle, K. A., Zhao, S., Nelson, C. R., Hughes, M., Eshleman, S., Wittchen, H. U., & Kendler, K. S. (1994). Lifetime and 12-month prevalence of DSM-III-R psychiatric disorders in the United States: Results from the National Comorbidity Survey. *Archives of General Psychiatry*, *51*, 8-19.
- Nairne, J. S. (1999). *Psychology: The adaptive mind* (2nd Ed.). Albany, NY: Brooks/Cole Publishing Company.
- Nevid, J. S., Rathus, S. A., & Greene, B. (2003). *Abnormal psychology in a changing world.* Upper Saddle River, NJ: Prentice Hall.