



# Personality Disorders

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PSY 249: Psych of Personality

5/9/2023

# Announcements

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- Final Questions? Due May 19<sup>th</sup>. (no extensions no Redo)
- Grading Check in 4
- Check in 5 optional
- Extra Credit Kahoot Tuesday

When you think of the phrase  
“Personality Disorder” what  
comes to mind?

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# What is a Personality Disorder?

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- A personality disorder is a way of thinking, feeling and behaving that deviates from the expectations of the culture, causes distress or problems functioning, and lasts over time. (Psychiatric Journal)
- a deeply ingrained pattern of behavior of a specified kind that deviates markedly from the norms of generally accepted behavior, typically apparent by the time of adolescence, and causing long-term difficulties in personal relationships or in functioning in society. (Oxford Dictionary/)
- An enduring pattern of inner experience and behavior that deviates markedly from the expectations of the individual's culture. (DSM-V)
- An evolutionary adaptation developed overtime in response to abnormal conditions. (Million, 1996)

# Personality Disorder Criteria

## Maladaptive Pattern

- A persistent, inflexible, pervasive pattern of maladaptive traits involving  $\geq 2$  of the following: cognition, affectivity, interpersonal functioning, and/or impulse control

## Distress & Dysfunction

- Significant distress or impaired functioning resulting from the maladaptive pattern

## Early Onset

- Maladaptive pattern can be traced back to at least adolescence but more likely childhood.

# What they are and what they are not

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- Personality disorders **ARE** **NOT** mood disorders or psychosis related disorders
- Personality disorders **ARE** **NOT** easily diagnosable or easily treatable
- Personality disorders **ARE** **NOT** words to use in place of other descriptors or personality traits
- Personality disorders **ARE** mental health related afflictions that need to be diagnosed
- Personality disorders **ARE** best understood and diagnosed within the context of someone's life.
- Personality disorders **ARE** extremely difficult to treat.

# Two dominant perspectives

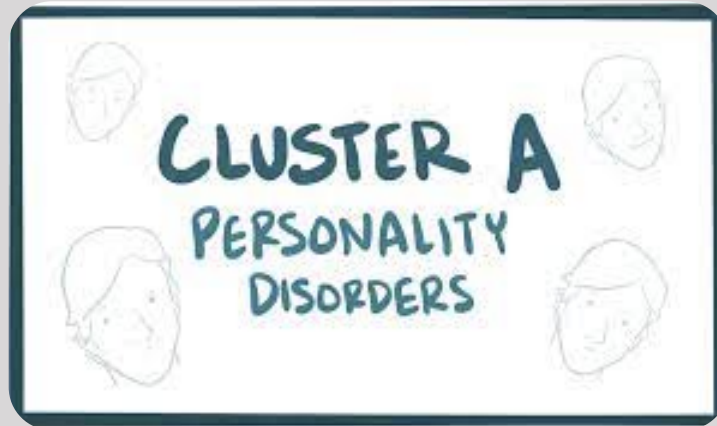
## DSM-V

- 10 different personality disorders grouped in 3 different categories
- Cluster A Odd/Eccentric
- Cluster B Emotional/Erratic
- Cluster C Anxious/Fearful

## The Evolutionary Perspective

- Personality disorders fall in 4 categories
- Pleasure Deficient
- Interpersonally Imbalanced
- Intrapsychically Conflicted
- Structurally Defective

# DSM: 10 Personality Disorders



Characterized by odd or eccentric behavior

- Paranoid: Distrust
- Schizoid: Disinterest
- Schizotypal: Distortion



Characterized by Emotional or Erratic behavior

- Antisocial: Disregard
- Borderline: Dysregulation
- Histrionic: Attention Seeking
- Narcissism: Grandiosity



Characterized by anxious or fearful behavior

- Avoidant: Disengage
- Dependent: Over engage
- Obsessive-Compulsive: Perfectionism



# Cluster A: Odd and/or Eccentric Disorders.

- **Paranoid Personality Disorder:** Pervasive distrust and suspicion of others particularly concerning their motives without adequate justification. Early warning signs include social anxiety and hypersensitivity to criticism.
- **Schizoid Personality Disorder:** Pervasive disinterest in forming emotional or personal connections with others. General, indifference toward human connection. Early warning signs include indifference toward praise and criticism, cold and aloof in all interactions.
- **Schizotypal Personality Disorder:** Pervasive emotional and cognitive distortions of reality. Exceedingly odd beliefs or ideologies. Early warning signs include hyper-fixation with fantasies.

# Cluster B: Emotional and/or Erratic Disorders

- **Antisocial Personality Disorder:** Pervasive disregard for the health, safety, and well-being of others and often themselves. Early warning signs violence and aggression, frequent lying.
- **Borderline Personality Disorder:** Pervasive dysregulation of emotions and understanding. Seeing the world only in extremes. Early warning signs inability to self-soothe, inability to compromise.
- **Histrionic Personality Disorder:** Pervasive attention seeking and heightened emotionality. Highly dramatic behavior with the purpose of being noticed/acknowledged. Early warning signs excessive tantrums, lying, and self-exaggeration.
- **Narcissistic Personality Disorder:** Pervasive grandiosity and self importance. Complete lack of empathy toward others and a desperate need for admiration. Early warning signs extreme selfishness, violence, distorted self view.

# Cluster C: Anxious and/or Fearful Disorders

- **Avoidant Personality Disorder:** Pervasive disengagement with others and social situations. Desperately avoids social interactions, connections, and events. Early warning signs excessive shyness, agoraphobia
- **Dependent Personality Disorder:** Pervasive over-engagement with others and social situations. Over reliant on others to meet their physical and emotional needs. Early warning signs extreme separation anxiety, inability to learn simple tasks
- **Obsessive Compulsive Personality Disorder:** Pervasive perfectionism. Desire for control, rigidity in the face of change or difference. Early warning signs extreme resistance to change, over reaction to criticism. (NOT THE SAME AS OCD)

Which personality disorder might this be?

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Braden is 29 years old, and he has never had a single person he calls a good friend. He is not socially anxious, nor does he seem like he dislikes people. He just really has no interest in meeting or getting to know anyone.

# Which personality disorder might this be?

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Josie is the kind of girl that gets **OBSSESSED** with every single boyfriend she has. In fact, she has never really been single. She always has a boyfriend caring for her, doing things for her. She can't seem to do anything on her own.

# Which personality disorder might this be?

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Patrick is so badass! He's always up to something. Yesterday he jumped out of a second story window during lunch time. Last week he called the principal "Mommy" over the PA system. AND TODAY he started a food fight in the cafeteria!



# Personality Disorders

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# Announcements

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- Assignment 4 should be done grading later today which means REDO due next Thursday. (for everyone)
- Final Due May 19<sup>th</sup> (24hr grace, no extensions, no redos)
- Tuesday is an extra credit game (attendance optional)



# Few Questions

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Take a moment to think of and discuss some behaviors that are abnormal, unacceptable, or dysfunctional.

What is wrong about these behaviors? How and when did you learn that these behaviors were wrong?

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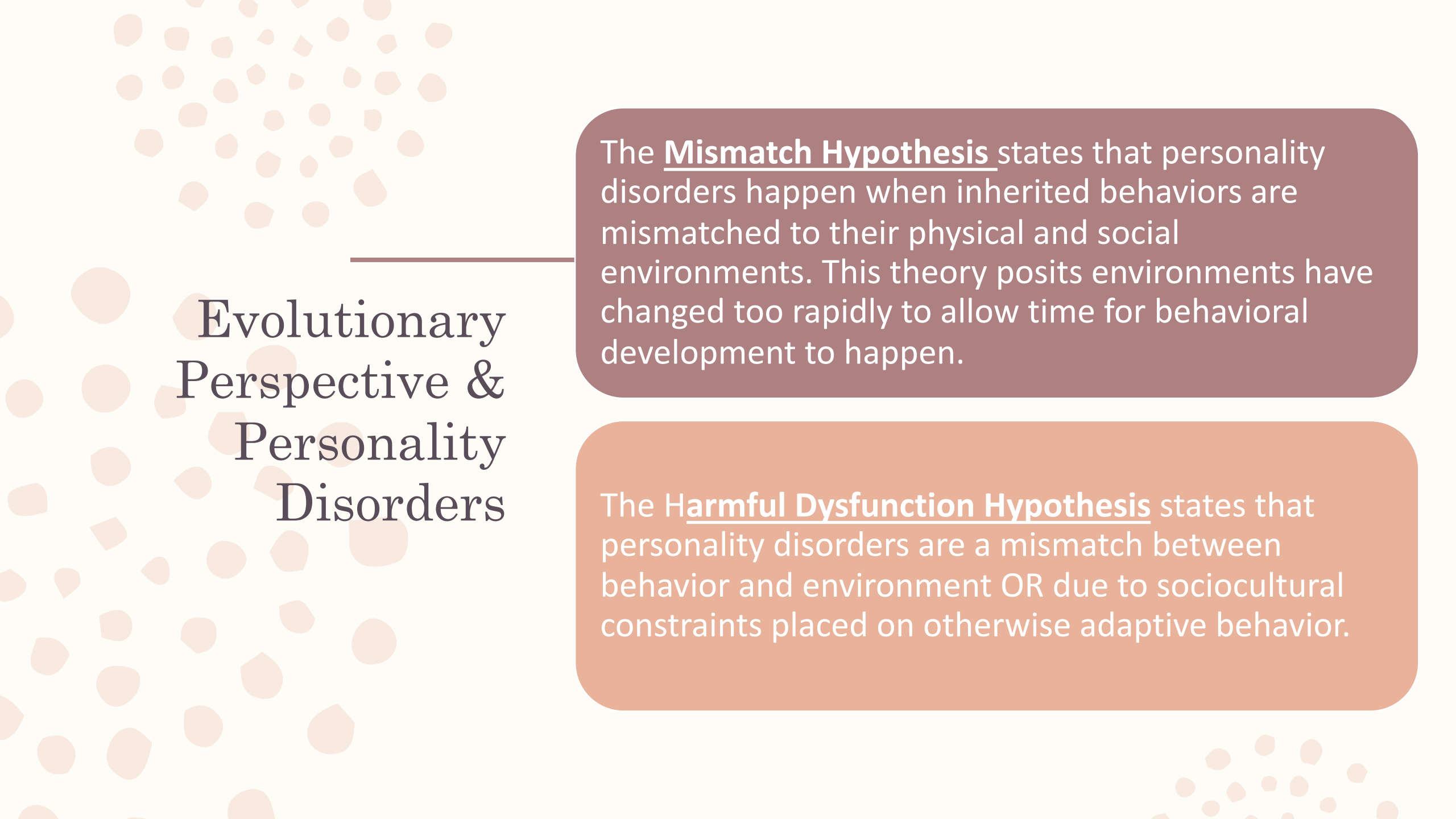
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My new roommate Mattie can never seem to relax. Seems like she just doesn't believe anything anyone says. I asked her if I could help her bring up her groceries the other day and she looked at me like I was going to steal them from her!

# The Evolutionary Perspective

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- Evolutionary psychology has also generated 4 categories of Evolutionary based personality/context/environment misalignments
- This perspective attempts to move away from detriment based or individual blame models of personality disorder
- Similarly to the DSM however these are categorized by a maladaptive behavior or mentality.
- The evolutionary perspective relies on 2 hypotheses



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## Evolutionary Perspective & Personality Disorders

The Mismatch Hypothesis states that personality disorders happen when inherited behaviors are mismatched to their physical and social environments. This theory posits environments have changed too rapidly to allow time for behavioral development to happen.

The Harmful Dysfunction Hypothesis states that personality disorders are a mismatch between behavior and environment OR due to sociocultural constraints placed on otherwise adaptive behavior.

# Evolutionary Categories

Schizoid

## Pleasure deficient:

Individuals who lack the ability to experience the joys, rewards, and positive experiences of life

Avoidant

Antisocial

## Interpersonally

Imbalanced: Individuals are either overly focused on themselves and their needs OR the needs of others.

Dependent

Histrionic

Narcissistic

## Intrapsychically Conflicted:

Individuals whose internal ideologies are at war within themselves

Obsessive  
Compulsive

## Structurally Defective:

Individuals with issues in internal functioning and their connection to the world.

Paranoid

Borderline

Schizotypal



# Treating personality Disorders

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- More often people are unaware that they have a personality disorder because personality develops in childhood and remains largely stable over time.
- So people tend to think of their functioning's as normal or see no way/need to address these issues.
- Personality disorders are extremely difficult to treat for these reasons.
- One of the effective approaches to treating Borderline personality disorder is has been Dialectical Behavior Therapy (DBT)
- Cognitive therapy is used when thinking of BPD and the other disorders



# Trying Dialectical thinking

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- Try to think of two parts of yourself you find to be conflicting. (Ex. Ambitious & Lazy; Optimistic & Depressed; Compassionate & Aggressive)
- Discuss first how you manage these parts. Do you hold them at once? separate them mentally? Relate them to moods/time? Or something else?
- Next discuss what it would mean and feel like for you to fully accept both aspects of yourself at once.



# Discussion Questions

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- Which perspective on personality disorders do you find most useful? Why? (DSM or Evolutionary)
- Do you believe you can apply what you learned in this lecture to your final and personality analysis of a fictional character?
- What example(s) might you give as evidence of or against the diagnosis of a personality disorder?