

# Personality Disorders

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## WHAT'S COVERED

In this lesson, you will learn about the category of disorders called personality disorders. These disorders are longstanding, rigid behaviors and beliefs that are unhelpful in life. They are difficult for people to recognize in themselves, because they are so ingrained. Disorders like Anxiety and Depression feel bad to us and we want to change them. Personality disorders are “just how I am” and are difficult to recognize and change. A person who has a personality disorder has difficulty adapting their behavior to be appropriate to a situation, causing problems in relationships, and work. These disorders usually begin in childhood, but are not diagnosed until late adolescence. Specifically, this lesson will cover:



## BEFORE YOU START

Personality traits shape how we behave and what situations we prefer and can also show ways that we are different from other people. By exploring the term “neurodiversity,” you learned that differences, even from typical societal expectations, are not always negative.

However, in personality disorders, a person’s thoughts, feelings, and behaviors are not only different from societal expectations but are long-term patterns that can cause distress and serious problems in areas like relationships, school, and work. Symptoms vary widely depending on the specific type of personality disorder. According to the Mayo Clinic (2016) and the American Psychiatric Association (2022), there are 10 types of personality disorders listed in the DSM-5. The DSM-5 clusters the disorders into three groups based on similar characteristics: cluster A, which includes disorders with eccentric behavior; cluster B, which includes disorders with dramatic behavior; and cluster C, which includes disorders with anxious behavior.

It is estimated that 9% of U.S. adults have at least one personality disorder (American Psychiatric Association, 2022). Research shows that obsessive-compulsive personality disorder is one of the most prevalent types of personality disorders, and dependent personality disorder is one of the least prevalent (Volkert et al., 2018). Individuals with personality disorders are more likely to be male and have lower education levels and lower socioeconomic status (Fariba et al., 2023). However, women are more likely than men to have borderline personality disorder, histrionic personality disorder, or dependent personality disorder (Fariba et al., 2023).

## 1. Symptoms

**Personality disorders** are grouped into **clusters**. You don't have to have all of the symptoms to have the disorder.



#### TERMS TO KNOW

##### **Personality Disorder**

Longstanding, rigid behaviors and beliefs that are unhealthy in life and relationships

##### **Cluster**

Group of symptoms

### **1a. Cluster A: Disorders of Eccentric Behavior**

Individuals with cluster A personality disorders show eccentric and odd behavior. The three personality disorders in this cluster are paranoid personality disorder, schizoid personality disorder, and schizotypal personality disorder.

- Individuals with paranoid personality disorder are suspicious of others and guarded in their interactions with others (Esterberg et al., 2010). Other people are assumed to be harmful, deceptive, or threatening (Mayo Clinic, 2016). A person with paranoid personality disorder is less likely to have close, trusting relationships because of these characteristics.
- Individuals with schizoid personality disorder do not desire to seek intimate relationships or social relationships with others (Esterberg et al., 2010). Instead, they prefer to be alone, and may seem cold, indifferent, and unemotional (Mayo Clinic, 2016).
- Individuals with schizotypal personality disorder may exhibit odd beliefs, behavior, speech, or appearance (American Psychiatric Association, 2022). They may also be indifferent, uncomfortable, or suspicious of relationships with others. They may also have social anxiety (Mayo Clinic, 2016).



#### DID YOU KNOW

Schizoid and schizotypal personality disorders have names that sound similar to schizophrenia, another type of mental health disorder. These three disorders can have similar symptoms, such as the inability to make social connections (Mayo Clinic, 2023). However, schizophrenia is not considered a personality disorder.

### **1b. Cluster B: Disorders of Dramatic Behavior**

Individuals with cluster B personality disorders typically behave in ways that are unpredictable, overly emotional, or dramatic (Mayo Clinic, 2016). There are four personality disorders in this cluster: antisocial personality disorder, borderline personality disorder, histrionic personality disorder, and narcissistic personality disorder.

- From the name alone, antisocial personality disorder might seem like it would be similar to cluster A personality disorders, as it is associated with avoiding relationships or viewing them with suspicion. However, individuals with antisocial personality disorder typically disregard the feelings and rights of others for their own personal gain (Johns Hopkins Medicine, 2023). They may show aggressiveness and reckless disregard for other people, and they may even break laws and deceive others repeatedly (American Psychiatric Association, 2023).
- Borderline personality disorder is marked by inconsistent moods, reckless behavior, and unstable relationships. People with borderline personality disorder may have an intense fear of abandonment and show extreme reactions to the prospect of being alone. Their self-image may be distorted, and they may

feel out of touch with reality. People with this disorder also have high rates of co-occurring disorders, such as depression, anxiety disorders, substance abuse, and eating disorders. They may have tendencies of self-harm and suicidal behaviors, and in some cases, may commit suicide.



#### DID YOU KNOW

Because some people with severe borderline personality disorder have brief psychotic episodes, experts originally thought of this illness as atypical or borderline versions of other mental disorders. While mental health experts now generally agree that the name “borderline personality disorder” is misleading, a more accurate universal term does not exist yet. Some organizations have proposed new names such as “emotion regulation disorder,” or “emotional intensity disorder.”

- An individual with histrionic personality disorder constantly seeks attention. They may use excessive and dramatic emotion or sexually provocative behavior to be the center of attention (Mayo Clinic, 2016). People with histrionic personality disorder may present themselves as flirtatious, lively, charming, and manipulative, but they may be easily influenced by others and think relationships with other people are closer than they are (French & Shrestha, 2022).
- Narcissistic personality disorder is marked by a need to be admired by others and a lack of empathy for others (American Psychiatric Association, 2023). Individuals with this disorder may think they are more important than other people, come across as arrogant, and exaggerate their achievements or talents (Mayo Clinic, 2016). However, these qualities mask their often fragile self-esteem and their difficulty with criticism as they secretly feel a sense of insecurity and shame.

## 1c. Cluster C: Disorders of Anxious Behavior

Individuals with cluster C personality disorders demonstrate behaviors rooted in anxiety and fear. These disorders are distinct from the ones you learned about in the previous lesson titled “Anxiety Disorders,” though there can be some similarities in symptoms. The three personality disorders in this cluster are dependent personality disorder, avoidant personality disorder, and obsessive-compulsive personality disorder.

- Those with dependent personality disorder need constant care and reassurance from others. They fear being alone and seek out relationships even when they are abusive (Mayo Clinic, 2016). They may be clingy toward other people and lack the self-confidence to make decisions on their own.
- Individuals with avoidant personality disorder are overly sensitive to rejection and criticism, often feeling extremely shy and inadequate (American Psychiatric Association, 2023). Their fear of any possibility of conflict with others often leads them to withdraw from social situations and relationships (Mayo Clinic, 2016).
- An obsessive-compulsive personality disorder is not the same as the obsessive-compulsive disorder that you learned about in the last lesson titled “Anxiety Disorders.” An individual with obsessive-compulsive personality disorder is consumed by the need for order, perfection, and control (American Psychiatric Association, 2023). They tend to be very inflexible and rigid about their own high standards, often working excessively and neglecting other people or activities because of their preoccupation with routine.



#### DID YOU KNOW

It may be evident that both obsessive-compulsive personality disorder and obsessive-compulsive disorder are marked by obsessions—fixating on something to the point where it is an unhealthy disruption to one’s life. However, recall that a person with obsessive-compulsive disorder uses rituals (compulsions) to

control the anxiety from their upsetting thoughts (obsessions). In contrast, while a person with obsessive-compulsive personality disorder may be fixated on their own self-constructed details and rules, their behavior is not specifically marked by having repeated and disruptive rituals.

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## 2. Assessment

The most frequently-used method of finding out if a person has a personality disorder is a test called the MMPI-2 (Minnesota Multiphasic Personality Inventory - 2nd edition). It is a true-false test with several hundred items. There are items like “I like to put chameleons on plaid cloth” or “I like to drink coffee” and people wonder what these items have to do with anything. It is the most widely used test in the world. It can show if you are lying; if you are lying to look good or lying to look bad. It shows in which areas you have difficulties. But this test is very accurate at measuring aspects of personality and has been studied the world over.

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## 3. Risk Factors and Treatment Options

In addition to the overall risk factors that we noted in the lesson titled “Mental Health,” there are the following specific risk factors of personality disorders:

- Having a family history of personality disorders or other mental health disorders (Mayo Clinic, 2016)
- Harsh parenting style, which can include low levels of warmth from parents, harsh discipline and punishment, and verbal abuse (Bozzatello, 2021)

One study found that children who experienced verbal abuse from their mothers were three times as likely to have some types of personality disorders (Johnson et al., 2001).

Therapy is the primary treatment for personality disorders, and various options exist. Psychotherapy, or talk therapy, which you learned about in the previous lesson titled “Anxiety Disorders,” is the main type of therapy for personality disorders (Mayo Clinic, 2023). Through talk therapy, an individual with a personality disorder can learn to cope with stress through techniques that are more psychologically healthy and also learn effective social skills (Mayo Clinic, 2023). Family members may also be involved in therapy to receive education in supporting the individual.

One specific type of therapy that has been well-studied for its effectiveness in personality disorders, particularly borderline personality disorder, is called dialectical behavioral therapy (DBT). DBT combines group therapy and individual treatment to teach four types of behavioral skills—mindfulness, learning to tolerate difficult situations, regulating emotions, and effective communication in healthy relationships (Greenstein, 2017). Over time, individuals may improve to the point where they no longer meet the criteria for their personality disorder.

Personality disorders can be difficult to treat because of ingrained behaviors and thought patterns, so individuals may need long-term treatment (Johns Hopkins Medicine, 2023). There are no specific medications for personality disorders, but medication may be used with therapy to manage symptoms. There are four main types of medications used for various personality disorders—antidepressants, mood stabilizers, antipsychotic medications, and anti-anxiety medications (Mayo Clinic, 2016).



### SUMMARY

In this lesson, you learned about the three groups or clusters of **personality disorders**. **Disorders of eccentric behavior** are paranoid personality disorder, schizoid personality disorder, and schizotypal personality disorder. **Disorders of dramatic behavior** are antisocial personality disorder, borderline personality disorder, histrionic personality disorder, and narcissistic personality disorder. **Disorders of anxious behavior** are dependent personality disorder, avoidant personality disorder, and obsessive-compulsive personality disorder. You also learned a common way personality disorders are **assessed**. You learned about **risk factors and treatment options** for personality disorders, specifically that family history and parenting style can contribute to personality disorders and that psychotherapy, particularly DBT, is helpful.

Source: THIS TUTORIAL HAS BEEN ADAPTED FROM (1) "WELLNESS" BY EXTENDED LEARNING INSTITUTE (ELI)" AT NOVA. ACCESS FOR FREE AT: [oer commons](#). (2) "HEALTH EDUCATION" BY COLLEGE OF THE CANYONS. ACCESS FOR FREE AT: [open.umn.edu](#). LICENSING (1 & 2): [CREATIVE COMMONS ATTRIBUTION 4.0 INTERNATIONAL..](#)