

Personality Disorders: Working with Challenging Individuals

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Educational Objectives

1. Review the four basic elements of personality functioning as presented in the DSM-5
2. Describe personality as falling along a continuum of pathology
3. Employ practical skills to work more effectively with individuals who exhibit challenging personality characteristic

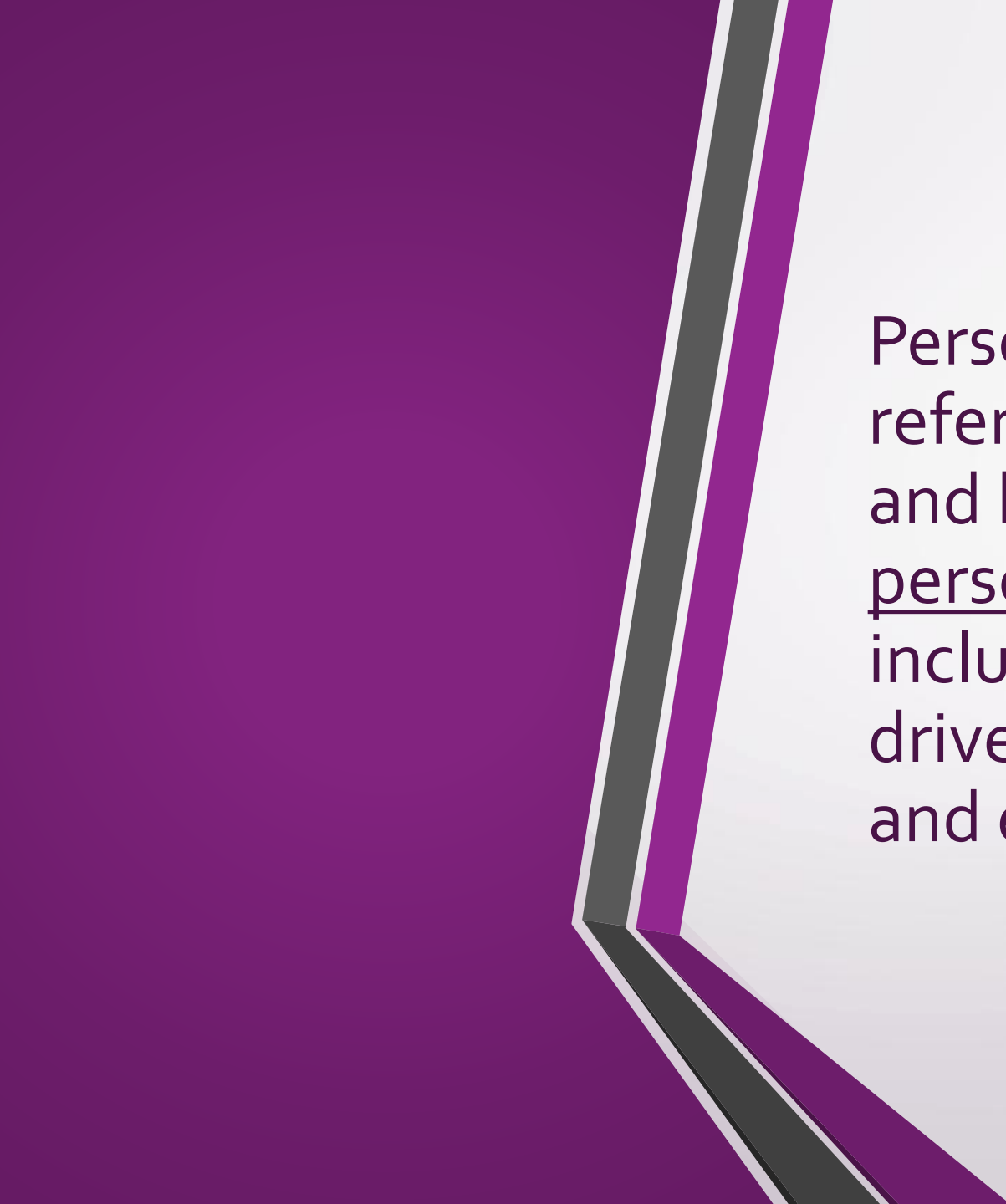


Before we
begin


Deep breath in....

Deep breath out....

What is *Personality*?



Personality
refers to the enduring characteristics
and behavior that comprise a
person's unique adjustment to life,
including major traits, interests,
drives, values, self-concept, abilities,
and emotional patterns.



Continuum of Personality

Self

Identity

Self-
direction

Identity – Little to no impairment

Ongoing awareness of a
unique self; maintains
appropriate boundaries

Consistent and self-
regulated positive self-
esteem, with accurate
self-appraisal

Capable of
experiencing,
tolerating, and
regulating a full range
of emotions

Sets and aspires to
reasonable goals based
on reasonable
assessment of
capabilities

Uses appropriate
standards of behavior

Can reflect on, and make
constructive meaning of,
internal experiences

Self-Direction – Little to no impairment

Interpersonal Functioning

Empathy

Intimacy

Empathy – Little to no impairment

Capable of accurately understanding others' experiences and motives (most of the time)

Comprehends and appreciates others' perspectives, even if disagreeing

Aware of the effect of own actions on others

Intimacy – little to no impairment

Maintains multiple satisfying and enduring relationships

Desires and engages in a number of close, caring and reciprocal relationships

Strives for cooperation and mutual benefit; flexibly responds to a range of others' ideas, emotions, and behaviors

How can a Personality be “disordered”?

- Moderate or greater impairment in personality functioning, manifested by difficulties in two or more of the following:
 - Identity
 - Self-direction
 - Empathy
 - Intimacy

Identity – Severe impairment

Weak sense of autonomy/agency; lack of identity or emptiness; poor or rigid boundaries

Fragile self-esteem (easily influenced by events); un-nuanced self-appraisal (all or nothing)

Rapidly shifting emotions or unwavering despair

Self- Direction – Severe impairment

Difficulty establishing and/or achieving personal goals

Unclear or contradictory internal standards for behavior; life is meaningless or dangerous

Significantly compromised ability to reflect on or understand own mental processes

Empathy – Severe impairment

Significantly limited ability to consider and understand the thoughts, feelings and behaviors of others

Generally unable to consider alternative perspectives (threatening)

Confused about or unaware of the impact on others; often attributes destructive motivations to others

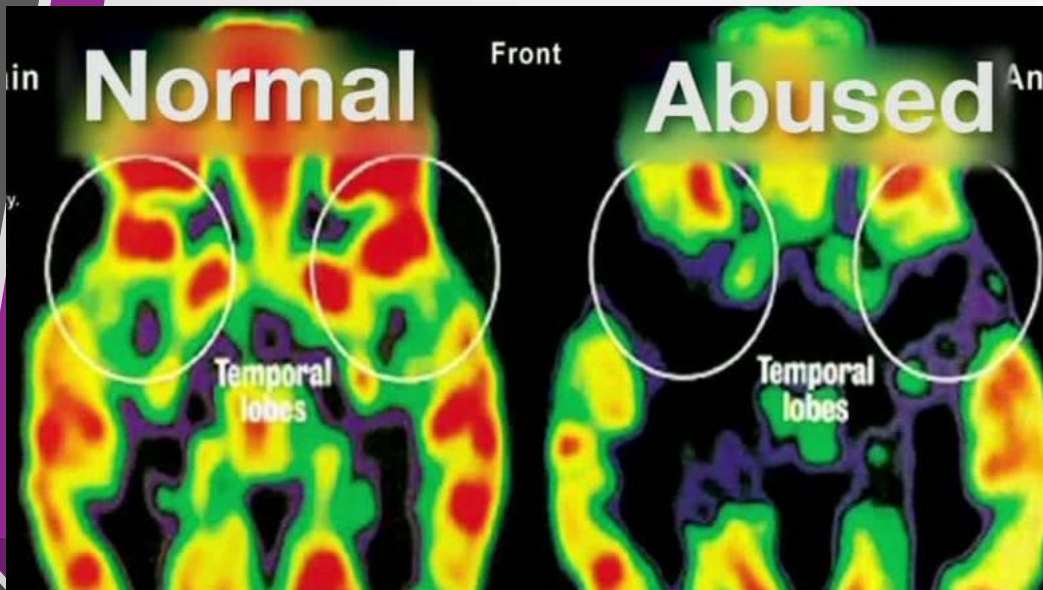
Intimacy – Severe impairment

Some desire for relationships, but capacity for positive and enduring connections is significantly impaired

Feelings about intimacy alternate between fear/rejection and desperate desire for connection

Little mutuality (others seen as how they affect the self); perceives slights from others

The Role of Trauma



<https://salud-america.org/4-ways-childhood-trauma-changes-childs-brain-body/>



Development

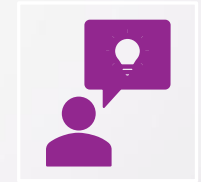
Trust

Expectations of
violence/neglect

Instability

Shame/guilt

Brain dysfunction



Continued

What is "known"

Prediction and
expectations

Substance use as coping





Professional Relationships

Providing support, care and treatment



Professional Relationships

We are not without our own personality characteristics

- Identity
- Self-direction
- Intimacy
- Empathy

Treatment outcomes are related to alliance with individuals with PD

- Yet alliance can fluctuate from time to time, especially for individuals with BPD

Effective strategies when working with an individual with impaired personality traits/personality d/o

Create
Structure

Be Present
and Slow
Down

Acknowledge
Challenges

Be Genuine

Focus on
Emotions

Stay Curious

Create Structure

Establish a clear structure and frame early on in relationship to help create a sense of trust and commitment from the patient. This includes setting an agenda and providing a transparent and collaborative approach. Express clearly that patient is an equal partner.

Be Present & Slow Down

Aim to be present, respectful, and attentive to the patient's experience. Validate the patient's perspective and be open to criticism and questioning. Take responsibility for your contribution to the relationship challenge; this can also foster trust.

Acknowledge Challenges

Be mindful of potential alliance ruptures and navigate them with care. This may involve validating the patient's emotions and experiences, acknowledging their concerns, and exploring the underlying goals/motives behind their behavior.

Be Genuine

Authenticity and an open, non-judgmental attitude are important. Stay firm but flexible and adaptable while remaining transparent and on task.

Focus on Emotions

Help patients navigate relationship challenges by focusing on their emotional experiences in the here and now and providing validation. In psychotherapy, this may involve exploring the patient's fears, vulnerabilities, and underlying emotional pain.

Stay Curious

Actively seek clarification and more information from the patient to gain a better understanding of their experiences and challenges. This can help you empathize with the patient and provide more targeted interventions.

Ms. Greene

Ms. Greene is a 20-year-old cis-gender female in her junior year of college. You have seen her once before for an intake evaluation. During her intake she shared that she has not had mental health treatment previously but has been taken to the emergency room twice in the past year by friends, after she has threatened suicide while intoxicated. Both times she has been released within a few hours with a referral for follow-up but she has not followed through. She reported that other than superficial scratching of her arms once this year, she does not engage in self-injury and is not suicidal. Last week, she came for an intake after breaking up with her girlfriend. She reported chronic relationship conflicts with her friends and romantic partners. Today, she arrives, sits down forcefully, and says, "I'm so tired of all these people! They say they love me, but they don't. They only care about themselves and anyone who isn't me!" She then begins to sob with her head in her hands.

Ms. Greene

Once she calms a bit, she looks at you and says, “You probably think I’m crazy and you don’t want to have anything to do with me. I’m so broken, I’m a mess.

And look at you, so smart, so put-together, you are probably married and have kids and a dog and a beautiful house. You don’t want to touch me with a ten-foot pole!”

Any of these help?

Create
Structure

Be Present
and Slow
Down

Acknowledge
Challenges

Be Genuine

Focus on
Emotions

Stay Curious



Before we part

Deep breath in....

Deep breath out....

Summary


Everyone has a personality



Personality consists of a traits along a continuum




People with personality disorders can have traits which can trigger our own challenging personality traits



Using effective and proven strategies for intervention are helpful for the patients and for us as health professionals

References

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Thank you!

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