

Guidebook

Background Information:

During the Summer of 2014, two secondary school students from Co. Kerry, Ireland, discovered the lack of awareness in the world about Personality Disorders (PDs). Sinead O'Sullivan and Aoibhin O'Neill both had a love and interest in psychology, and after a study into PDs, realised the importance and need for more public knowledge and awareness on them. This lack of information and awareness among the public about PDs is unhelpful to prevention and intervention, and so Sinead and Aoibhin became eager to change it. They later conducted a survey in their school, questioning young people's knowledge and perception of PDs. The results were shocking, with only 5% of the sample having heard of three of the ten PDs, and in addition to that, they knew very little about those three. They decided to enter a project titled "Personality Disorders: Improving Awareness among Young People" into the 2015 BT Young Scientist and Technology Exhibition. They would increase public knowledge and awareness of PDs with the creation of a guidebook, while sharing their work on social media pages such as their own PDs awareness Facebook page, and also on PDAN Facebook page, which has an audience of over 160,000! They later became editors for the PDANteen Facebook page. In October 2014, they found out that their project qualified to be exhibited at the 2015 BT Young Scientist. This is the guidebook they created as part of their project.

- The word 'personality' refers to the pattern of thoughts, feelings and behaviour that makes each of us the individuals that we are. Our personality develops as we go through different experiences in life, and as our circumstances change. We are usually flexible enough to learn from past experiences and to change our behaviour to cope with life more effectively.
- However, people with a personality disorder are likely to find this more difficult. Their patterns of thinking, feeling and behaving are more difficult to change and they will have a more limited range of emotions, attitudes and behaviours with which to cope with everyday life. They don't seem to be able to learn from the things that happen to them.

Note!: A PD diagnosis only applies if you have personality difficulties which affect all aspects of your life, and make life difficult for you and for those around you. The diagnosis does not include personality changes caused by a life event such as a sudden traumatic incident, or physical injury.

- **Personality disorders usually become noticeable in adolescence or early adulthood, but sometimes start in childhood**
- **You can't be diagnosed with a personality disorder before the age of 18**

Life is more difficult if you have a personality disorder, so you are more likely to have other mental health problems such as depression, or drug and alcohol problems.

What can cause a personality disorder?

Upbringing

- **emotional/physical or sexual abuse in childhood**
- **violence in the family**
- **parents who drink too much or abuse other drugs**

Trauma

- **being involved in major incidents or accidents**
- **sudden bereavement**

Genetics and inheritance

- **Some elements of our personality are inherited or just happens in our Genetics**

Research suggests that personality disorders tend to fall into three groups, according to their emotional 'flavour':

Cluster A: 'Odd or Eccentric

Cluster B: 'Dramatic, Emotional, or Erratic'

Cluster C: 'Anxious and Fearful'

Remember!:

- **As you read through the descriptions of each type, you may recognise some aspects of your own personality. This doesn't necessarily mean that you have a personality disorder. It's only when these traits are spoiling your own life and often the lives of those around you, that a personality disorder diagnosis is possible.**

- A person can have the characteristics of more than one personality disorder.

Cluster A: 'Odd and Eccentric'

Paranoid

Are likely to:

- find it very difficult to trust other people, believing they will use you, or take advantage of you
- find it hard to confide in people, even your friends
- watch others closely, looking for signs of betrayal or hostility
- suspect that your partner is being unfaithful, with no evidence
- read threats and danger – which others don't see – into everyday situations.
- suspicious
- feel that other people are being nasty to you (even when evidence shows this isn't true)
- tend to hold grudges
- feel easily rejected

Schizoid

Are likely to:

- be uninterested in forming close relationships with other people including your family
- feel that relationships interfere with your freedom and tend to cause problems
- prefer to be alone with your own thoughts
- want to live your life without interference from others
- get little pleasure from life
- have little interest in sex or intimacy
- be emotionally cold towards others
- don't like contact with other people
- prefer own company
- live in a fantasy world quite a bit

Schizotypal

Are likely to:

- find making close relationships extremely difficult
- think and express yourself in ways that others find 'odd', using unusual words or phrases
- behave in ways that others find eccentric
- believe that you can read minds or that you have special powers such as a 'sixth sense'
- feel anxious and tense with others who do not share the beliefs of themselves
- feel very anxious and paranoid in social situations
- eccentric behaviour
- odd ideas
- difficulties with thinking
- lack of emotion, or inappropriate emotional reactions
- see or hear strange things
- sometimes related to the mental illness, schizophrenia

(Schizotypal personality disorder can develop into the mental illness 'schizophrenia'.)

Cluster B: 'Dramatic, Emotional and Erratic'

Narcissistic

Are likely to:

- believe that there are special reasons that make you different, better or more deserving than others
- have fragile self-esteem, so that you rely on others to recognise your worth and your needs
- feel upset if others ignore you and don't give you what you feel you deserve
- resent other people's successes
- put your own needs above other people's, and demand they do too
- be selfish and 'above yourself'

- take advantage of other people.
- have a strong sense of you're own self-importance
- dream of unlimited success, power and intellectual brilliance
- crave attention from other people, but show few warm feelings in return
- take advantage of other people
- ask for favours that do not then return

Antisocial

Are likely to:

- act impulsively and recklessly, often without considering the consequences for yourself or for other people
- behave dangerously and sometimes illegally
- behave in ways that are unpleasant for others
- do things – even though they may hurt people – to get what you want, putting your needs above theirs
- feel no sense of guilt if you have mistreated others
- be irritable and aggressive and get into fights easily
- be very easily bored and you may find it difficult to hold down a job for long
- believe that only the strongest survive and that you must do whatever it takes to lead a successful life, because if you don't grab opportunities, others will
- have a criminal record
- have had a diagnosis of conduct disorder before the age of 15.
- don't care much about the feelings of others
- easily get frustrated
- tend to be aggressive
- commit crimes
- find it difficult to make close relationships
- impulsive - do things on the spur of the moment without thinking about them
- don't feel guilty about thing they've done
- don't learn from unpleasant experiences

Borderline (emotionally unstable)

Are likely to:

- feel that you don't have a strong sense of who you really are, and others may describe you as very changeable
- suffer from mood swings, switching from one intense emotion to another very quickly, often with angry outbursts
- have brief psychotic episodes, hearing voices or seeing things that others don't
- do things on impulse, which you later regret
- have episodes of harming yourself, and think about taking your own life
- have a history of stormy or broken relationships
- have a tendency to cling on to very damaging relationships, because you are terrified of being alone.
- impulsive - do things on the spur of the moment
- finds it hard to control their emotions
- feel bad about themselves
- often self-harm, e.g. cutting themselves or making suicide attempts
- feel 'empty'
- make relationships quickly, but easily lose them
- can feel paranoid or depressed
- when stressed, may hear noises or voices

Histrionic

Are likely to:

- feel very uncomfortable if you are not the centre of attention
- feel much more at ease as the 'life and soul of the party'
- feel that you have to entertain people
- flirt or behave provocatively to ensure that you remain the centre of attention
- get a reputation for being dramatic and overemotional
- feel dependent on the approval of others
- be easily influenced by others.
- over-dramatise events
- self-centered
- have strong emotions which change quickly and don't last long
- can be suggestible

- worry a lot about their appearance
- crave new things and excitement
- can be seductive

Cluster C: 'Anxious and Fearful'

Avoidant

Are likely to:

- avoid work or social activities that mean you must be with others
- expect disapproval and criticism and be very sensitive to it
- worry constantly about being 'found out' and rejected
- worry about being ridiculed or shamed by others
- avoid relationships, friendships and intimacy because you fear rejection
- feel lonely and isolated, and inferior to others
- be reluctant to try new activities in case you embarrass yourself.
- very anxious and tense
- worry a lot
- feel insecure and inferior
- have to be liked and accepted
- extremely sensitive to criticism

Obsessive-Compulsive

Are likely to:

- need to keep everything in order and under control
- set unrealistically high standards for yourself and others
- think yours is the best way of making things happen
- worry when you or others might make mistakes
- expect catastrophes if things aren't perfect
- be reluctant to spend money on yourself or others
- have a tendency to hang on to items with no obvious value.
- worry and doubt a lot
- perfectionist - always check things
- rigid in they do, stick to routines

- cautious, preoccupied with detail
- worry about doing the wrong thing
- find it hard to adapt to new situations
- often have high moral standards
- judgemental
- sensitive to criticism
- can have obsessional thoughts and images (although these are not as bad as those in obsessive-compulsive disorder)

(OCPD is separate from obsessive compulsive disorder (OCD), which describes a form of behaviour rather than a type of personality.)

Dependent

Are likely to:

- feel needy, weak and unable to make decisions or function properly without help or support
- allow others to assume responsibility for many areas of your life
- agree to things you feel are wrong or you dislike to avoid being alone or losing someone's support
- be afraid of being left to fend for yourself
- have low self-confidence
- see other people as being much more capable than you are
- be seen by others as much too submissive and passive.
- passive
- rely on others to make their own decisions
- do what others want them to do
- find it hard to cope with daily chores
- feel hopeless and incompetent
- easily feel abandoned by others

Sex differences in the frequency of personality disorders:

Type of personality disorder

Sex

Paranoid personality disorder:	Male
Schizoid personality disorder:	Male
Schizotypal personality disorder:	Male
Antisocial personality disorder:	Male
Borderline personality disorder:	Female
Histrionic personality disorder:	Female
Narcissistic personality disorder:	Male
Avoidant personality disorder:	Equal
Dependent personality disorder:	Female
Obsessive–compulsive personality disorder:	Male

Treatment

1. Psychological: talking treatments or therapies

Psychotherapies seem to work well, particularly for cluster B personality disorders ('Dramatic, Emotional and Erratic').

- **Mentalisation-based therapy**
- **Dialectical Behaviour Therapy**
- **Cognitive Therapy**
- **Schema Focused Therapy**
- **Transference Focused Therapy**
- **Dynamic Psychotherapy**
- **Cognitive Analytical Therapy**
- **Treatment in a therapeutic community**

2. Physical: medication

Antipsychotic drugs (usually at a low dose)

- Can reduce the suspiciousness of the three cluster A personality disorders (paranoid, schizoid and schizotypal).
- Can help with borderline personality disorder if people feel paranoid, or are hearing noises or voices(Delusions).

Antidepressants

- Can help with the mood and emotional difficulties that people with cluster B personality disorders (antisocial or dissocial, borderline or emotionally unstable, histrionic, and narcissistic) have.
- Some of the selective serotonin reuptake inhibitor antidepressants (SSRIs) can help people to be less impulsive and aggressive in borderline and antisocial personality disorders and also can decrease the anti social pd symptoms due to their low serotonin.
- Can reduce anxiety in cluster C personality disorders (obsessive-compulsive, avoidant and dependent).

Mood stabilisers

Medication such as lithium, carbamazepine, and sodium valproate can also reduce impulsiveness and aggression.

These medications and treatments also help if someone with a personality disorder develops depression or schizophrenia.

Further Information:

Emergence: Supports all people affected by a diagnosis of personality disorder, whether you are a service user, carer (which is a family member or friend of a service user) or a professional in the field

<http://www.emergenceplus.org.uk/>

Samaritans: Available 24 hours a day to provide confidential emotional support for people who are experiencing feelings of distress or despair, including those which may lead to suicide.

Phone number: 116 123 (in ROI only)

The website has helpful information about stress and self-harm:

<http://www.samaritans.org/>

Email: jo@samaritans.org

Rethink Mental Illness: Works to help everyone affected by severe mental illness recover a better quality of life. Has information on personality and personality disorder.

<http://www.rethink.org/>

Aware: Assists and supports those suffering from depression (which can occur in those diagnosed with a personality disorder) and their families in Ireland. A helpline is available as well as support groups, lectures, and current research on depression.

<http://www.aware.ie/>

Self-help for those with a personality disorder

- Try to unwind when stressed - have a hot bath or go for a walk. You may find yoga, massage or aromatherapy useful.
- Make sure to get a good night's sleep.
- Look after your physical health and what you eat. You'll feel better on a balanced diet going by the food pyramid.
- Avoid drinking too much alcohol or using dangerous drugs.
- Take some regular exercise. This doesn't have to be extreme.
- Give yourself a treat (not drugs or alcohol) when things are difficult or you have coped at a stressful time.
- Take up an interest or hobby. This is a good way to meet others and take your mind off day-to-day stresses.
- Talk to someone about how you are feeling. This could be a friend or relative or, if preferred, a therapist or counsellor. If you don't have access to a counsellor or therapist, then try your GP.
- The internet is a good resource of information.
- If things get really tough, try phoning Samaritans,

Family & friends

Day-to-day living with someone who has a personality disorder can be difficult - but it isn't always difficult. The following can be useful

- give them their own space
- listen to and acknowledge their concerns
- involve others (friends, relatives and, at times, mental health professionals – nurses, therapists or doctors)

- also remember to look after your own physical and mental health in any way that you can

What needs to be done?

- Mental health services have been focused on mental illnesses such as bipolar disorder and depression, but not personality disorders. Recent research makes it clear that mental health services can, and should, help people with a personality disorder. With the right help, many can start to lead a normal and fulfilling life. Most can, at least, cope more effectively with their difficulties.
- Personality disorders can be prevented in some cases if more information and awareness is spread about them in the world.

**A personality disorder is a real problem, and it demands real help.
Lets begin here.**

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#PDawareness

