

Personality Disorders: Identifying Symptoms in Clients & Guidelines for Interaction

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What Will We Cover?

- Who am I?
- Working definitions
- What are the personality disorders?
- What are the symptoms to look for in our clients?
- What are some guidelines for interaction?
- Thoughts and questions

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Who Am I?

Qualifications

- Licensed professional counselor and registered neutral/mediator
- National Certified Counselor
- Full-time trauma counselor at NOA: No One Alone, a domestic violence shelter serving Lumpkin and Dawson counties
- Associate trainer with Resolve to Solve, Inc. in Cumming, GA
- Private practice: therapist, parent coordinator, and mediator

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Working Definitions

Some definitions: What is mental health?

Mental Health

- A person's overall emotional, psychological, social, and cognitive health
- Integral part of Mind-Body-Spirit; impacts the whole person
- Impacts relationship with self: self-esteem and how a person understands one's place in the world
- Impacts relationships with others: perception, attachment, communication, family, jobs

Some definitions: What is a mental disorder?

Mental Disorder (DSM-5)

- “A mental disorder is a syndrome characterized by clinically significant disturbance in an individual’s cognitions, emotion regulation, or behavior that reflects a dysfunction in the psychological, biological, or developmental processes underlying mental functioning. Mental disorders are usually associated with significant distress or disability in social, occupational, or other important activities.” (DSM-5 p.60-61)
- Cannot be culturally explained
- Social deviance does not count unless behavior is caused by a disorder

Some Definitions: What is a personality disorder?

Personality Disorder (DSM-5)

- “A personality disorder is an enduring pattern of inner experience and behavior that deviates markedly from the expectations of the individual’s culture, is pervasive and inflexible, has an onset in adolescence or early adulthood, is stable over time, and leads to distress or impairment.” (p.970)
- Filter for viewing yourself and the world you live in
- Nature vs. Nurture?
- Three clusters of personality disorders
 - Cluster A: Odd or eccentric
 - Cluster B:

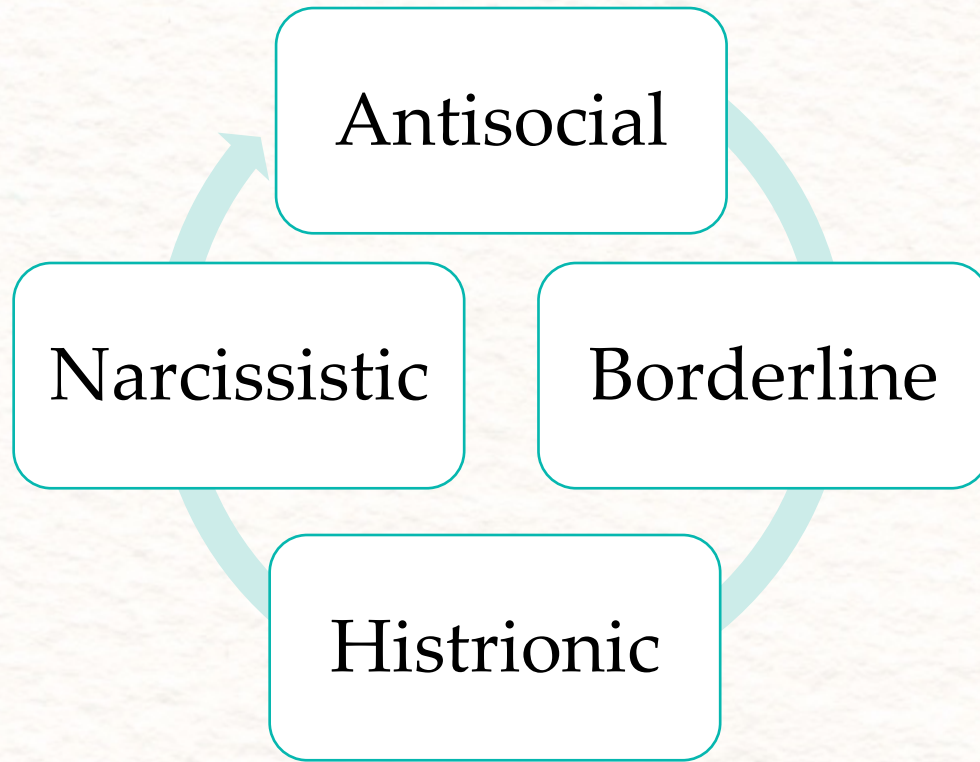
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What Are the Personality Disorders?

What are the personality disorders?

- Three clusters:
 - Cluster A
 - Odd and eccentric
 - Underlying suspicion of others and relationships
 - Paranoid, schizoid, and schizotypal
 - **Cluster B**
 - Cluster C
 - Neurotic and anxious
 - Underlying fear
 - Avoidant, obsessive-compulsive, and dependent

Cluster B Personality Disorders



- Dramatic and emotional
- Underlying impulsivity and erraticism
- Familial link to specific disorder or other disorders in the cluster
- History of trauma
- Extreme caretaking figures: complete absence physical/emotional or highly demanding

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What Are the Symptoms to Look For?

Symptoms of Antisocial Personality Disorder

A pattern of disregard for, and violation of, the rights of others (DSM, p.987)

- History of unlawful behavior and lack of respect for social norms: may/may not be a history of arrests
- Marked deceitfulness: lying, cons, aliases
- Impulsivity or failure to plan ahead
- History of fights and assaults: irritability and aggressiveness
- Reckless disregard for safety of others: dismissive of others' fears or worries
- History of inconsistent work behavior or honoring financial obligations: inability to sustain
- Lack of remorse and empathy
- Onset of symptoms prior to 15 years of age, yet, cannot be diagnosed before 18 years of age
- Symptoms cannot be due to schizophrenia or bipolar disorder

Symptoms of Borderline Personality Disorder

A pattern of instability in interpersonal relationships, self-image, and affects, and marked impulsivity (DSM, p.992)

- Avoids real or imagined abandonment: leaves relationships without cause, quits job if disagreement
- Alternates between idealization and devaluation of others: pattern of unstable and intense personal relationships
- Unstable self-image or sense of self
- Impulsivity in at least two areas that are potentially self-damaging: gambling, promiscuity, etc.
- History of suicidality: recurrent suicidal behaviors, gestures, threats, or self-mutilating/harming behavior
- Reactive in mood and instability of affect
- Chronic feelings of emptiness
- Inappropriate, intense anger or difficulty controlling anger
- Stress-related paranoid ideation and/or severe dissociative symptoms: everyone is against me, checking out/zoning out

Symptoms of Histrionic Personality Disorder

A pattern of excessive emotionality and attention seeking
(DSM, p.997)

- Must be the center of attention; doesn't know what to do if he/she is not
- Often inappropriately sexually seductive or provocative during interactions with others
- Shallow and rapidly shifting expressions of emotions
- Uses physical appearance to draw attention to self
- Excessively impressionistic speech lacking in detail
- Self-dramatization, theatricality, and exaggerated expressions of emotion
- Suggestible
- Everyone is their best friend: believes relationships to be more intimate than they are

Symptoms of Narcissistic Personality Disorder

A pattern of grandiosity, need for admiration, and lack of empathy (DSM, p.1000)

- Grandiose sense of self-importance
- Preoccupied with fantasies of unlimited success, power, brilliance, beauty, or ideal love
- Believes he/she is “special” and unique and can only be understood by, or should associate with, other special or high-status people
- Requires excessive admiration
- Sense of entitlement
- Interpersonally exploitative and opportunistic
- Lacks empathy
- Often envious of others or believes others are envious of him/her
- Shows arrogant, haughty behaviors or attitudes

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**What Are Some Guidelines for
Interaction?**

Guidelines

1. Usually when one disorder can be diagnosed, there is more than one.
2. “Personality Disordered”: symptoms can bounce around within the clusters at any given time regardless of diagnosis(es).
3. Stress and fears are the triggers: symptoms can suddenly manifest or worsen.
4. Ground and root: be a calm presence. You and your energy are being read quickly. Having something to be read is actually incredibly comforting. Not finding something can trigger panic and fear.
5. Stick to your boundaries: be clear and firm. You are being assessed for opportunity. If you are able to be manipulated, then they win and respect for you is actually lost.
6. Don’t allow your buttons to be pushed. An emotionally reactive response means what I believe about myself is true. You just proved it in your response.
7. Say what will happen, say it is happening, then say what happened. Basically, no surprises. Surprise is the unknown....the unknown can feel traumatic and triggering.
8. Stick to the facts, yet, validate feelings. Move right through from validation to getting back to the business at hand.
9. Give homework during mediation breaks or between appointments.
10. Encourage breaks when emotions ramp up. Don’t become the audience to the emotional volatility.
11. Not weirdly, a positive word or a positive validation goes a long way.

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Thoughts and Questions