

## **The Dichotomy of Personality Disorder: it's Social and Medical Aspect**

### **Introduction**

A personality disorder is identified by a pervasive pattern of experience and behavior that is abnormal with respect to any two of the following: *thinking, mood, personal relations, and the control of impulses.*

The character of a person is shown through his or her personality -- by the way an individual thinks, feels, and behaves. When the behavior is inflexible, maladaptive, and antisocial, then that individual is diagnosed with a personality disorder.

Most personality disorders begin as problems in personal development and character which peak during adolescence and then are defined as personality disorders. Personality disorders are not illnesses in a strict sense as they do not disrupt emotional, intellectual, or perceptual functioning. However, those with personality disorders suffer a life that is *not* positive, proactive, or fulfilling. Not surprisingly, personality disorders are also associated with failures to reach potential.

### **Is Personality Disorder a Genuine Medical Problem or a Social one?**

It is a recognized field of expertise that is attached to the trunk of psychology. It is not a pseudo-science as some critics would conceivably call the psychological and psychiatric field of medicine. A century ago that would have been an insult to the forefather's of today's international psychological society. It would have debunked the groundwork lain down by the likes of Sigmund Freud,

Carl Jung, Ivan Pavlov and other luminaries in the psychological stage. But the essential question that reverberates within the academe is if this particular branch of psychology more social in nature than psychological?

### **The Social Impact of Personality Disorders**

The seeming inter-relatedness of personality disorders and Sociology cannot be helped, whatever the individual is diagnosed with by an attending psychiatrist or psychologist would inevitably be manifested to the rest of society in general. It may not come out full bloom, but, in graduated stages or it may be triggered by a catalyst; a traumatic past, emotional instability, environmental factors, or worse a personality flaw that has been aggravated by one or all of the aforementioned reasons.

Currently, there are 10 distinct personality disorders identified in the DSM-IV, which is considered the veritable bible in the personality classification field.

#### **Antisocial Personality Disorder:**

It is the general lack of regard for the moral or legal standards in the local culture, marked inability to get along with others or abide by societal rules. Sometimes called psychopaths or sociopaths.

#### **Avoidant Personality Disorder:**

This is the marked social inhibition, feelings of inadequacy, and extremely sensitive to criticism.

#### **Borderline Personality Disorder:**

It is conceivably the lack of one's own identity, with rapid changes in mood, intense unstable interpersonal relationships, marked impulsively, instability in affect and in self image.

**Dependent Personality Disorder:**

It is the extreme need of other people, to a point where the person is unable to make any decisions or take an independent stand on his or her own.

**Histrionic Personality Disorder:**

This is exaggerated and often inappropriate displays of emotional reactions, approaching theatricality, in everyday behavior. Sudden and rapidly shifting emotion expressions.

**Narcissistic Personality Disorder:**

This is a behavior or a fantasy of grandiosity, a lack of empathy, a need to be admired by others, an inability to see the viewpoints of others, and hypersensitive to the opinions of others.

**Obsessive-Compulsive Personality Disorder:**

Characterized by perfectionism and inflexibility; preoccupation with uncontrollable patterns of thought and action.

**Paranoid Personality Disorder:**

Marked distrust of others, including the belief, without reason, that others are exploiting, harming, or trying to deceive him or her; lack of trust; belief of others' betrayal; belief in hidden meanings; unforgiving and grudge holding.

**Schizoid Personality Disorder:**

Primarily characterized by a very limited range of emotion, both in expression of and experiencing; indifferent to social relationships.

**Schizotypal Personality Disorder:**

This is characterized by the peculiarities of thinking, odd beliefs, and eccentricities of appearance, behavior, interpersonal style, and thought (e.g., belief in psychic phenomena and having magical powers).

**Self-centeredness**

This manifests itself through a *'me-first'* mentality, is essentially self-preoccupied attitude.

**Lack of individual accountability**

This is the result of a victim mentality and blaming others, society and the universe for their own problems.

**Lack of perspective-taking and empathy**

**Manipulative and exploitative behavior**

**Unhappiness**, suffering from depression and other mood and anxiety disorders

**Vulnerability to other mental disorders**, such as obsessive-compulsive tendencies and panic attacks

**Distorted or superficial understanding of self and others' perceptions**, being unable to see his or her objectionable, unacceptable, disagreeable, or self-destructive behaviors or the issues that may have contributed to the personality disorder

**Socially maladaptive:**

This is characterized by changing the rules of the game, introducing new variables, or otherwise influencing the external world to conform to their own needs

### **Treatment of Personality Disorders**

Therapists have the most difficulties with those suffering from personality disorders. *They are difficult to please, block effective communication, avoid development of a trusting relationship, [and] cannot be relied upon for accurate history regarding problems or how problems arose (Adams, 2000).*

Therapy and medications can help, but it is the individual's decision to take accountability for his or her own life that makes the difference. To heal, individuals must first have the desire to change in order to break through that *enduring pattern* of a personality disorder. Individuals need to want to gain insight into and face their *inner experience and behavior*.

This involves changing their thinking--about themselves, their relationships, and the world. This also involves changing their behavior, for *that which is not acted upon is not learned*. Then, with a support system (therapy, self-help groups, friends, family, medication), they can free themselves from their imprisoned life.

## **References**

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