

*Understanding Personality Disorders: Nuances,
Interventions and The Role We Play as Therapist*

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Introduction:

- Who the heck is Dr. V?
 - COO- ALL IN
- What are our goals?
 - Remove the stigma!!!!
- Dr. V's ground rules and requests for an awesome training
 - Ask questions
 - Be present
 - Challenge

Conceptualization: How Will We Talk About This Topic?

- Functional Trait
- View of World
- View of Selves
- View of Others
- Deal with World by...

First....What Do We Know About Personality Disorders?

1. Are well-established as a unique phenomenon.
2. May be increasing in prevalence rates...unlike other dx's that are consistent (pre-Covid).
3. Are frequently mistaken for other mental health dx's.
4. Are often under-diagnosed because they can present with vague, general, indistinct, even benign- sounding (although chronic) complaints of distress.
5. Can produce serious, debilitating, or dangerous behavioral, emotional and social effects.
6. Generally, can be considered the most difficult and troublesome health care cases.
7. Are often difficult to successfully manage and treat.
8. Are often unaffected by traditional treatment and behavioral management approaches.
9. Are often related to other serious behavioral conditions.
10. Struggle with chronic behavioral and emotional distress.

What Do We Know About Personality Disorders? Cont'd

11. Show a lack ability to productively use insight.
12. Frequently have difficulty forming trusting relationships and effective therapeutic alliances.
13. Can demonstrate behavior that is: unreasonable, demanding, resistant and avoidant.
14. Often show a pattern of shutting down or becoming highly escalated when they experience strong feelings.
15. Often create upset and distress in people around them.
16. Are interpreted by others as difficult or “bad” rather than as clinically dysfunctional or impaired.

Borderline Personality Disorder

Functional Trait

Intense changeability/Instability - a pervasive pattern of instability of: mood, interpersonal relationships and self-image beginning in early adulthood.

View of World- Rejecting

View of Self- Vulnerable

View of Others- Angels or Devils

Deal with World by- Emotional Justification

Histrionic Personality Disorder

Functional Trait

Expressiveness a pervasive pattern of excessive emotionality and attention- seeking beginning in early adulthood

View of World- Impressionistic

View of Self- Fetching

View of Others- Admirers

Deal with World by- Performing

Narcissistic Personality Disorder

Functional Trait

Self- aggrandizement with a pervasive pattern of grandiosity in behavior or fantasy with a need for admiration and a lack of empathy beginning by early adulthood.

View of World- Theirs

View of Self- Special

View of Others- Servants

Deal with World by- Image Management

Anti- Social Personality Disorder

Functional Trait

Exploitation with a pervasive pattern of disregard for and violation of the rights of others since teenagers years.

View of World- Dog- Eat- Dog

View of Self- Superior

View of Others- Suckers

Deal with World by- Opporturism

What is OUR Role During Session?

Identify the drama triangle in order to STAY out of it:

1. Borderline Drama Pattern

- a. Drama Entry Point: Victim or Rescuer
- b. Drama Switch: Persecutor

2. Histrionic Drama Pattern

- a. Drama Entry Point: Victim
- b. Drama Switch 1: Victim to Persecutor
- c. Drama Switch 2: Persecutor to Victim

3. Narcissistic Drama Pattern

- a. Drama Entry Point: Rescuer
- b. Drama Switch: Persecutor

What is OUR Role During Session? Cont'd

Identify the drama triangle:

4. Antisocial Drama Pattern

- a. Drama Entry Point: Rescuer or Victim
- b. Drama Switch: Rescuer/Victim to Persecutor

5 Steps of Intervention:

Step 1: Assess for a Personality Disorder

General Characteristics to Look for:

1. Irresponsibility
2. Deficit in Empathy
3. Deficient Problem- Solving Behaviors
4. External Locus of Control
5. Generation of Upset and Internal Conflict in Others
6. Disordered System that Activates when Something is Experienced as Being Wrong

5 Steps of Intervention

Step 2: Assess for Treatability

Positive Signs for Treatability:

1. Ability to form relationship with therapist
2. High Intelligence (Except AntiSocial)
3. An unusual talent
4. If they have history of substance use, they are currently sober
5. Motivated
6. Can talk about own weakness
7. Can trust or be loyal
8. Can weigh contingencies

5 Steps of Intervention

Step 2: Assess for Treatability

Negative Signs for Treatability:

1. Unresponsive depression
2. Unresponsive substance abuse
3. History of felony arrests
4. History of lying
5. History of conning

5 Steps of Intervention

Step 3: Assess Your Risks and Resources

1. The nature and goals of setting and situation
2. The current stress of the provider
3. The skill and knowledge of provider- do you know your drama tendencies?
4. Availability of consultation
5. Severity of the personality disorder
6. Health and safety risks
7. The other people involved and affected
8. The ability to take on long-term vs. short-term commitment
9. Availability of backup/inpatient/medical support

5 Steps of Intervention

Step 4: Your Skills

1. Be Active and Responsive
2. Use an “Altered Traditional” Approach
3. Be Multimodal
4. Maintain Empathetic Neutrality
5. Maintain a Position of Freedom and Power
6. Accept and Tolerate the Transference and Countertransference
7. Have Consult Team Available
8. Be Comfortable Using Silence; Going Slowly
9. Be Willing to Succeed or Fail
10. Have an Ability to Admit Mistakes
11. Be Comfortable with Reality- Based Confrontations
12. Comfort with Saying No- Boundaries
13. Have a Willingness to Break the “Rules” of the Drama

5 Steps of Intervention

Step 5: Intervention Options

Intervention Type 1: Profound Treatment

Goal: Stop the drama and replace it with problem-solving

Treatment Model: Psychoanalytic Transference

Intervention Type 2: Stylistic Treatment

Goal: Reduce the Intensity of the Drama

Treatment Model: Cognitive- Behavioral

Intervention Type 3: Focalized Treatment

Goal: Produce One Change in One Specific Area

Treatment Model: Brief Therapy

Intervention Type 4: No Treatment

Goal: Conserve Therapeutic Resources- Do No Harm

Intervention Type 5: Behavioral Management

Goal: Referral to higher level of care

Now you know everything!!!!!!

Just kidding....questions?????

Thank you for your time and attention!!!