Poll Question
Webinar Objectives

- Describe the primary features of DSM-5 personality disorders.
- Appreciate the allure of personality disordered partners (PDPs) for many adults.
- Describe ways to help clients detect and understand personality disordered partners.
- Articulate methods for helping clients to either cope more effectively with a PDP or prepare to leave.

Personality Disorder

Consistent ways of thinking, acting, and feeling

| 0 | Flexible | Rigid | 100 |
Personality Disorder Criteria

- Rigid pattern of deeply etched and pervasive traits
- Traits are inflexible and maladaptive
- Impaired interpersonal relationships
- Onset in teens or early adulthood
- Behavior deviates from culture
- Results in clinical distress or impairment socially or occupationally

Personality Disorders con’t

- Increase probability of Axis I disorders
- The disorders are self-perpetuating
- Requires assessment of long-standing patterns of behavior
- Extremely resistant to change
- Treatment is unlikely to “cure” the disorder
- Some PDs become less severe with age
Referrals and Treatment

- Seldom self-referred FOR the P.D.
- “Ego-Syntonic” experience
- Commonly under-diagnosed
- Difficult to detect upon initial evaluation
- Testing: MCMI-III (Millon)
- Place significant strain on service providers
PDs and Couples

  - 15% of the U.S. population has a PD
  - 44 million potential partners!
  - 50% of those seeking mental health care
- John Gottman research
  - 69% of conflict/difficulty in a marriage is related to personality traits or other factors that cannot be easily resolved.
  - http://www.gottman.com/research/about/

Personality Disorder Clusters

- Cluster A—Odd, Eccentric, & Weird
  - Paranoid, Schizoid, Schizotypal
- Cluster B—Dramatic, Erratic, & Dangerous
  - Antisocial, Borderline, Histrionic, Narcissistic, Passive-aggressive
- Cluster C—Anxious, Withdrawn, & Needy
  - Avoidant, Dependent, Obsessive-Compulsive, Depressive
What’s the Attraction to a PDP?

- Fooled by 1st impressions
- Tunnel Vision (attraction buttons)
- Pattern of pursuing the same PD type
- Need to be needed
- Not worthy of more
- Trying to patch a perceived hole
- Feel too guilty to leave
- PD traits in self
- Oops! (it was an accident)
Paranoid P.D. 301.0 (F60.0) 
The **Doubting** Partner

- Hidden Meaning Seen in Others’ Remarks
- Unjustified Doubts About Trustworthiness of Friends and Associates
- Grudges Held
- Suspects Others of Exploitation, Deceit, and harm
- Fidelity of Partner Doubted
- Attacks on Character Are Perceived
- Reluctant to Confide in Others

What to Expect

- Their partner will distrust them
- Their partner feels “cold” and humorless
- Will stew and nurse perceived wrongs
- Source of paranoid behavior is *fear*
- Your client will be suspected/accused of infidelity
- On rare occasions, become dangerous
Living with a Paranoid
(Counsel for Your Client)

- Be realistic in your expectations
- Work patiently at establishing trust
- Although tempting, don’t rise to the bait
- Engage in verbal holding
- Therapy will produce modest results
- Don’t compromise health or safety
- If you leave, be careful
Schizoid P.D. 301.20 (F60.1)  
The *Detached* Partner

- Neither Enjoys nor Pursues Relationships
- Apathy toward praise and criticism
- Sexual Experiences Solitary or Absent
- Solitary Lifestyle
- Emotionally Detached, “seems cold”
- Takes Little Pleasure in Activities

What to Expect

- Unlikely to meet your client’s emotional needs
- Will appear apathetic about client’s love
- Will lack sexual interest and desire
- Indifferent to threats of separation
- Your client may feel utterly alone
- May be perplexed at your client’s complaints
Living with a Schizoid
(Counsel for Your Client)

- Be realistic in your expectations
- Don’t push to hard
- Whatever your partner enjoys, join them!
- Reinforce, don’t push
- Find ways to meet emotional needs outside relationship
- Therapy is unlikely to help

The Schizotypal Personality
Schizotypal P.D. 301.22 (F21)  
The *Odd* Partner

- Unusual Perceptions (illusions)
- Often Friendless Except for Family
- Odd Beliefs, Magical Thinking & Speech
- Affect is Inappropriate or Constricted
- Ideas of Reference
- Doubts Others - Suspicious & Paranoid
- Eccentric Appearance & Behavior
- Reluctant in Social Situations, Anxious
- 30-50% have concurrent dx of MDD

What to Expect

- What was once eccentric is now *weird*
- Your client’s social circle may steadily decline
- Conflict with loved ones over their partner
- Possible financial stress; partner jobless
- Loneliness and emotional distance
- Your client’s partner will be hyper-sensitive to rejection
Living with a Schizotypal
(Counsel for Your Client)

- Commit to accept partner unconditionally
- Don’t push too hard, or too fast
- Help your partner establish consistent social relationships
- Reinforce appropriate social skills
- Help your partner evaluate the validity of beliefs
- The goal is not to decrease oddness
Antisocial P.D. 301.7 (F60.2)
The Dangerous Partner

- Conduct Disorder Before Age 15; Now 18
- Antisocial Acts
- Lies Frequently and Manipulates Others
- Lacks Remorse
- Disregard for Safety & Well-being of Others
- Impulsive, Does Not Plan Ahead
- Fails to Honor Obligations or Keep a Job
- Aggressive/Assaultive
- Lives On the Edge

What to Expect

- Your client’s partner is incapable of genuine empathy
- Lying and deceit makes it hard to trust
- Constantly testing client’s limits and patience
- Feels little genuine remorse for hurting client
- What was charming is now shallow
- Financial irresponsibility
- Infidelity is common
Living with an Antisocial Personality
(Counsel for Your Client)

• Change will come in baby steps!
• Take necessary steps to protect yourself
• Kindly but firmly hold partner accountable
• Trust but verify
• Therapy not likely to be very helpful
Borderline P.D. 301.83 (F60.3)  
The Stormy Partner

- Abandonment Frantically Avoided
- Mood Instability
- Identity Disturbance
- Anger Poorly Controlled
- Relationships Are Unstable
- Impulsivity is self-destructive
- Suicidal Behavior is Recurrent
- Emptiness

Borderline Personality  
What to expect

- Your client is constantly accused of “not caring”
- Walking on eggshells is client’s way of life
- Partner’s moods and accusations leave your client feeling anxious, angry, and fatigued
- The partner will threaten harm or suicide
- Care-giver exhaustion will set in for client
- Your client’s social circle will shrink
Living with a Borderline
(Counsel for Your Client)

- Professional help is mandatory
- Expect turmoil!
- Accept the re-parenting role
- Do not reinforce self-destructive behavior
- Validate partner in other ways
- Challenge black and white thinking
- REINFORCE strengths
Histrionic P.D. 301.5 (F60.4)
The *Theatrical* Partner

- Inappropriate Behavior; Seductive & Provocative
- Center of Attention
- Relationships Superficial
- Physical Appearance Most Important
- Vulnerable To Suggestions of Others
- Emotional Expression Exaggerated
- Shifting Emotions
- Impressionistic Speech
- Believes Relationships are More Intimate Than They Are

What to expect

- What was exciting is now *superficial*
- Client feels overwhelmed by emotionality
- Client must give partner *all* his/her attention
- Partner is flirtatious and seductive socially
- Client may be embarrassed by partner
- Partner shows very little capacity for real empathy
Living with a Histrionic
(Counsel for Your Client)

- Set firm boundaries and limits
- Provide consistent and reliable feedback
- Encourage warmth and empathy
- Don’t feed into the drama
- Help develop depth and ideas
- Always, realistic expectations are key
Narcissistic P.D. 301.81 (F60.81)
The Self-Absorbed Partner

- Fantasizes About Unlimited Success, Beauty & Brilliance
- Empathy Lacking For Others
- Explotive
- Entitled: Shows Haughty Behavior and Attitudes
- Only Special People Can Only Understand Them
- Admiration Required in Excessive Amount
- Grandiose Sense Self
- Arrogant
- Manipulative
- Envious Of Others

What to expect

- Partner expects top billing in all things
- Client should not expect any genuine empathy
- Your client is window dressing, a “prop”
- Your client must always accommodate
- Partner easily wounded; prone to sulking
- Partner will be threatened by your client’s success
- Sex is for the partner, not your client
Living with a Narcissist
(Counsel for Your Client)

- First, take care of yourself
- Provide narcissistic mirroring
- See through your partner’s jealousy
- Set limits on demeaning behavior and narcissistic rage
- At times, use narcissism to your advantage
- Reinforce even SMALL gains in empathy
- Psychotherapy is a looooonnnnngg endeavor
Passive-Aggressive P.D.  
The *Undermining* Partner

- Says Yes, But Acts No  
- Obstructionist  
- Forgetting, “Accidentally On Purpose”  
- Victimization  
- Indecisive  
- Procrastinates  

What to Expect

- Your client will often be angry and confused  
- Client’s self-esteem is undermined  
- Client begins to question his/her own sanity  
- Partner sabotages your client’s success  
- Intimacy replaced with bitter anger  
- Sexual relationship used to punish
Living with a Passive-Aggressive
(Counsel for Your Client)

• See your partner’s behavior for what it is
• Set firm limits and stick to them
• Recognize that therapy is rarely a solution
• Refuse to validate anger and resentment at authority figures
• Don’t start to second guess yourself, decisions and your own power
Avoidant P.D. 301.82 (F60.6)

The Scared Partner

- Avoids Interpersonal Activities
- Certainty of Being Liked Required
- Restrained Within Relationships
- Criticism or Rejection Preoccupation
- Inhibited and Reluctant Socially
- Self-Deprecating (feels inferior)
- Prone to Shame

What to expect

- Your client needs to provide constant reassurance
- Partner always doubts client's sincerity
- Client has fewer friends; partner avoids
- Excessive demands on client to care-take
- Boring!
- Client’s partner easily wounded
Living with an Avoidant
(Counsel for Your Client)

- Be very honest about your expectations
- Gently, but honestly talk to your partner about issues
- Open new doors for you and your partner
- Try to have fun with partner
- Urge your partner to seek out professional help
Dependent P.D. 301.6 (F60.7)  
The **Sticky Partner**

- Needy of Others
- Expression of Disagreement Unlikely
- Excessive Lengths For Nurturance/Support
- Decision-Making Difficult
- Preoccupied With Fears of Being Alone
- Urgently Seek One Relationship After Another
- Self-Confidence Lacking
- Won’t Initiate Activities; Waits for Direction
- Helpless When Alone

What to expect

- Your client feels smothered and overwhelmed
- The partner makes no move without client
- Client begins to resent care-taker role
- The more your client seek independence, the more anxious/insecure partner becomes
- Relationship burnout likely
Living with a Dependent (Counsel for Your Client)

• Be cautiously optimistic
• Help your partner enjoy small successes
• Open up your partner’s world
• Reinforce acquisition of competencies
• Allow partner to be the expert and call the shots
• Urge partner to make daily choices
Obsessive-Compulsive 301.4 (F60.5)

The *Rigid* Partner

- Preoccupied With Details, Rules, Organization
- Expression of Emotion Restricted
- Reluctant to Delegate Tasks
- Frugal
- Excessively Devoted to Work
- Controls Others
- Task Completion Complicated by Perfectionism
- Over-conscientious About Morals & Ethics
- Not Able to Discard Items; Hoards Objects
What to expect

- Partner needs to control everything (including your client)
- Work comes first
- Partner places rules before intimacy
- Partner feels cold and mechanical
- What was organization is now rigidity
- Relationship feels humorless and sterile
- Client feel like a child

Living with an Obsessive-Compulsive
(Counsel for Your Client)

- Be very clear about your expectations
- Help your partner see the bigger picture
- Help your partner with empathy
- Plan fun outings, vacations
- Plan down time together
- Don’t buy into “you are to blame…”
Question and Answers

• Let’s take time to respond to questions submitted via the “chat” window

• For technical questions, please contact: djohnson@counseling.org

• For content questions, please contact: jduggan@counseling.org

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