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B. The enduring pattern is inflexible and pervasive across a broad range of personal and social situations.

C. The enduring pattern leads to clinically significant distress or impairment in social, occupational, or other important areas of functioning.

D. The pattern is stable and of long duration, and its onset can be tracked back at least to adolescence or early adulthood.

E. The enduring pattern is not better accounted for as a manifestation or consequence of another mental disorder.

F. The enduring pattern is not due to the direct physiological effects of a substance (e.g., a drug of abuse, a medication) or a general medical condition (e.g., head trauma) (DSM-IV-TR, p. 689).

A. AN ENDURING PATTERN OF INNER EXPERIENCE AND BEHAVIOR THAT DEVIATES MARKEDLY FROM THE EXPECTATIONS OF THE INDIVIDUAL'S CULTURE

This pattern is manifested in two (or more) of the following areas:

Cognition

Persons afflicted with a personality disorder commonly perceive themselves, other people, and events around them differently than viewed by others. They typically view themselves differently than others. They also view the people around them and events in light of that perception of themselves. Consequently, they have perceptions that are not necessarily accurate or accepted by others. Further, they demonstrate behaviors that are not appropriate or acceptable to others. These persons are considered to be ego-syntonic.

Webster (2001) defines ego-syntonic as “of or pertaining to aspects of one’s behavior or attitude viewed as acceptable and consistent with one’s fundamental beliefs” (p. 623). This is not an easy concept to grasp and understand. Persons not afflicted with a personality disorder generally have accurate and realistic perceptions of themselves and the world around them.

Non-disordered persons have fluctuations in their perceptions of themselves. These fluctuations are influenced by their relationship with events and other people. An individual with a normally realistic and strong sense of self-worth can be derailed by rejection and failure, but their self-worth will reinstate itself when future events and others provide positive support. Non-disordered persons also recognize and acknowledge emotions and behaviors that are not consistent or appropriate for particular events and generally control themselves accordingly.
corner tavern with his friends. Knowing that her concern regarding the conspiracy would fall upon her husband’s deaf ears, Donna decided to tell her last remaining friend and coworker, Millie. She asked Millie to join her for lunch and told her the entire conspiratorial story. Millie tried to calm Donna, but Donna would have nothing to do with it. Donna was certain that this group was trying to get her fired.

As quitting time finally arrived, Donna approached Millie and demanded to know what she and the supervisor were talking about. Before Millie could respond, Donna began calling her a traitor and told her she would never speak to her again. Millie’s alleged violation of confidentiality assured Donna that Millie was part of the conspiracy and she would treat her like all others; she would alienate herself from Donna and feel sorry. Donna could hold a grudge longer than anyone she knew. She would wait for Millie to come crawling back begging for forgiveness. Donna created a scene by storming out and slamming the door in her face.

Upon arrival home, Donna began to prepare her husband’s favorite dinner. He would arrive just about 6 PM. Donna was anxious to tell him about Millie’s actions in telling the supervisor about the conspiracy. At 7 PM, Donna’s husband arrived home, only to find a demanding Donna. She wanted to know where he had been and why he hadn’t called to inform her that he would be late. Before he could open his mouth to tell her that he had to finish the automobile he was working on because the customer needed to use it in the morning. Donna accused him of “whoring” around. Not willing to stand and take another verbal battering, he spun on his heels and walked out, informing her that she needed help and if she didn’t get some, he was leaving her. Donna rose in fury and threw an ashtray at him as he walked out the door. Donna determined that he was involved in the conspiracy as well and was probably having an affair with Millie.

Donna is afflicted with paranoid personality disorder.

The American Psychiatric Association identifies “the essential feature of the paranoid personality disorder is a pattern of pervasive distrust and suspiciousness of others such that their motives are interpreted as malevolent” (DSM-IV-TR, 2000, p. 690).

The APA delineates the diagnostic criteria as follows:

A pervasive distrust and suspiciousness of others such that their motives are interpreted as malevolent, beginning by early adulthood and present in a variety of contexts, as indicated by four (or more) of the following:

1. suspects, without sufficient basis, that others are exploiting, harming, or deceiving him or her
2. is preoccupied with unjustified doubts about the loyalty or trustworthiness of friends and associates
serious substance abuse often present the same characteristic bland or blank expression.

**Etiology and Course**

Due to the small prevalence of this disorder, little is known regarding its origin. However, children and adolescents growing up in an environment with a first-degree biological relative diagnosed with schizoid personality disorder have a higher predisposition to develop the disorder. Consequently, this suggests the potential for inheritability or the influence of modeled behavior.

Persons afflicted with schizoid personality disorder commonly do not seek treatment, but are referred by family members. The afflicted person is generally not receptive to therapeutic interventions as he does not regard himself as disturbed and he is not experiencing distress. He finds comfort in his lifestyle and discomfort in any attempts to change him from his authentic self. Basically, he sees the problem in the family members for their failure to accept him for who he is. He is not only reluctant to change; he is resistant. “It’s your problem, not mine. Love me the way I am and leave me alone” is the verbal definition of his behavioral manifestation.
Even the hallowed halls of the prestigious business school could not deter the muffled laughter of the graduate students as Joe entered the finance lecture class. Joe was peculiar. He arrived 5 minutes into the lecture. The presiding senior professor was not amused by Joe’s lack of timeliness or his appearance and conduct that had distracted the entire class. Oblivious to the muttered laughter and the professor’s stern glare, Joe walked to the front center of the lecture hall and plopped down on the seat. Still oblivious of his distraction, Joe noisily unpacked his laptop and following the loud musical introduction to the laptop’s operating system, Joe looked up at the professor and waited for the lecture to begin.

This was typical of Joe’s behavior and despite his obvious high intelligence, people looked at him in amazement. Others referred to him as strange, weird, and eccentric. His appearance drew immediate attention to him. His clothing was always mismatched, inappropriate for the setting, and unkempt. He rarely brushed his hair and was not attentive to the details of hygiene. While the other students were clad in jeans and sports shirts, he would dress in a sport coat, a wildly colorful tie, an extremely wrinkled and soiled white shirt, trousers that did not complement his sport coat, and red basketball shoes. In contrast, he would attend faculty receptions for the graduate students in bib overalls, T-shirt, and sandals with no socks. The faculty, students, and their spouses were appropriately dressed in business formal clothing.
CHAPTER 5

Conduct Disorder

CONDUCT DISORDER—CHILDHOOD-ONSET

TYPE SCENARIO

Tom is 9 years old and in the third grade. He is a year older than his classmates as he was held back in first grade because of immature and aggressive behavior. The extra year increased his maturity; however, his behavior also increased in aggressiveness. It was less obvious. His maturity also included the recognition that his acting out behavior in the presence of teachers, parents, and other adults resulted in varied levels of punishment—from restrictions to beatings. Tom realized that he could accomplish his objectives without using acting out behavior.

Prior to this acknowledgment, he would follow his emotions with impulsive, irrational behavior. If he was angry at another child, he would strike him. If he disapproved of his mother’s “grounding” restriction on him, he would go out anyway. If a teacher would rebuke him, he would stand his ground and refuse to obey. These behaviors were self-defeating. The punishment would increase in duration and intensity. It was not until his father smacked him across the face for his bold defiance that he realized that there was more than one way to accomplish his goals. Rather than waiting until he was old enough and big enough to retaliate, he would become more covert in his behavior.

Tom firmly believed that the “only” person he could trust was himself and the feelings of others were absolutely insignificant to him. He could care less if someone’s mother had died of cancer or their brother had
the gang’s qualified members. Tom was adopted as a “wanna be,” and he spent all of his free time with the members. He learned to smoke and drink, and he was taught how to handle a knife. The gang used Tom as a “runner,” dropping off numbers and drugs.

Tom’s intimacy with the gang was observed by the police as they conducted surveillance. In an attempt to cut off the flow of new members, the police contacted the principal of Tom’s school. The principal met with Tom’s parents and Tom’s subsequent beating was the worst of his life. Tom was now under the close scrutiny of his parents and other adult relatives, the school officials, and the police. Tom had to modify his behavior to their expectations. They could make him modify his behavior, but not his egocentricity and attitude. Tom would become more secretive about his behavior.

Tom was still able to evade his parents at night and he would prowl the shadows looking for open windows to crawl through to steal money from purses and wallets. He would purchase his treasures, and hide them in his room. He was also saving for a gun to buy on the streets. When his level of frustration increased to the boiling point, he would displace his aggression. Tom began to delight in killing cats and dogs. Tom is afflicted with childhood-onset conduct disorder.

ADOLESCENT-ONSET CONDUCT DISORDER SCENARIO

Allen suffered miserably as a child and young adolescent. His father was a heavy hitting drunk. Allen cowered in the corner as he watched his father beat his mother. The combination of Friday and a paycheck resulted in a bender, and the combination of the drunkenness and the slightest innocuous comment resulted in the beatings. Allen, at 15, was ecstatic when his father was killed on the job.

His father’s death opened a whole new world for Allen and his mother. The double indemnity life insurance policy and mortgage payoff propelled Allen and his mother from his father’s imposed poverty. His mother bought new clothes and told Allen he could have whatever he wanted. His mother’s feelings of guilt for her inability to protect him from his father motivated her to overindulge Allen. Allen could do no wrong and could do and have anything he wanted. It didn’t take Allen long to realize this priority position and he exploited it. If he learned anything from his father, he learned to take anything you want, because nobody is going to give it to you. Allen determined that if his mother was so stupid to give it to him, he would take it all. Allen’s ego grew in direct proportion to the indulgence. The transformation from poor abused kid to the pampered kid precipitated a significant change in Allen’s personality.
13. often stays out at night despite parental prohibitions, beginning before age 13 years
14. has run away from home overnight at least twice while living in parental or parental surrogate home (or once without returning for a lengthy period)
15. is often truant from school, beginning before age 13

B. The disturbance in behavior causes clinically significant impairment in social, academic, or occupational functioning.

C. If the individual is age 18 years or older, criteria are not met for antisocial personality disorder. (DSM-IV-TR, 2000, pp. 98–99)

**Caveat**

There is considerable controversy pertaining to the diagnosis of conduct disorder. Is conduct disorder a psychiatric condition, or a “set” of behaviors adopted by adolescents to adapt to their environment? The American Psychiatric Association acknowledges this controversy.

Concerns have been raised that the conduct disorder diagnosis may at times be misapplied to individuals in settings where patterns of undesirable behavior are sometimes viewed as a rite of passage (e.g., threats of being impoverished, high crime). Consistent with the DSM-IV definition of conduct disorder, the conduct disorder diagnosis should be applied only when the behavior in question is symptomatic of an underlying dysfunction within the individual and not simply a reaction to the immediate social context. (p. 96)

This caveat or disclaimer does not help in ascertaining if an individual should be diagnosed with conduct disorder. Many of the behaviors delineated in the diagnostic criteria are behaviors common to all adolescents, some just more than others. The behaviors delineated in the entire subclassification of serious Violations of Rules are commonly “rights of passage” adolescent behaviors. What behaviors can be considered a function of adolescent development versus pathological?

This is an inquiry that must be addressed prior to any suggestion of a diagnosis. Further, the normal or expected behavioral manifestations exhibited by adolescents are relative to the individual’s environment and perception of their environment. The variables that precipitate higher rates of crime in the urban environment also precipitate higher levels of conduct disorder like behaviors, but are youths accurately diagnosed with conduct disorder?

An adolescent growing up in a gang-infested neighborhood has few choices for survival and success. Youths who are not particularly athletic, highly intelligent, or large in stature have great difficulty in escaping the recruitment of the violent street gangs. Street gangs mark their


**Diagnostic Criteria**

This author has interviewed and evaluated several thousand adolescents that have been diagnosed with conduct disorder (CD) and served as a sworn expert witness in a large number of criminal trials involving these youth. The author will utilize specific examples of behavior as exhibited by these youth in the presentation of the specific diagnostic criteria for the disorder.

Conduct disorder can be diagnosed with a childhood-onset type and an adolescent-onset type. The types are differentiated by the single variable that the child must exhibit one of the criteria prior to the age of 10 years and the adolescent type cannot have exhibited any of the criteria prior to the age of 10. Further, it is common for those youths who are diagnosed with the childhood–onset type to display the criteria in greater number and in greater severity.

Males and females are both afflicted with the disorder; however, rates for males are significantly higher. Male behaviors are also more serious than those of females. The author will utilize the male gender in this discussion, but asks the reader to be cognizant that the disorder and associated behaviors are also found in females.

**Aggression to People and Animals**

1. *Often Bullies, Threatens, or Intimidates Others (p. 98).* The CD child or adolescent is the neighborhood and playground bully. He is found in every school playground. He always finds smaller children to threaten or intimidate. If he can gain a following of others, which he usually can, he may pick on a youth of a similar size and rely on the backup of his comrades to reinforce his threatening behavior. He may also utilize one of his followers to do the assault for him. He does not require an issue to initiate his bullying behavior. He may tell the youth to give him his lunch or his lunch money and failing to do so will result in a beating. He may just tell another youth that he doesn’t like the color of his hair, or an item of clothing he is wearing. He may just insinuate that the other youth was looking at him and he demands to know why.

The intent is not to acquire the money or other items, but rather to position himself as the “king” of the playground that everyone must fear. The bully’s ego is reinforced and he does the behavior purely because it is pleasurable and he lacks any concern for the victim. The victim is merely a rung on his ladder of establishing his dominance. Younger children, particularly those smaller in stature, live in constant fear that today is the day the bully will extract his pound of flesh from them. Once
common to initiation rights. There are hundreds of reported incidents of female shoppers assaulted by knife and razor wielding gang initiates as they are walking to their vehicles at the mall.

The bully who is receiving retaliatory action from a vigilante student group will arm himself and use the gun without reservation. He does not give up his objective of achieving “machismo” status, and carrying a gun enhances it. The vigilante group discontinues their retaliatory activity and ignores the bully. They are not the recipients of his bullying activity and choose not to face the gun he now carries.

4. Has Been Physically Cruel to People (p. 99). The child or adolescent afflicted with CD will intentionally be physically cruel to others. He will deliver pain to others for his own personal gratification. Sadistic behavior is not uncommon. In a fight, he will deliver more blows than necessary to “win” the altercation. He may intentionally kick the person to break ribs, or stomp on a hand to break fingers. He does this sadistic torturous behavior because he finds pleasure in doing so. It meets his intrinsic psychological needs.

He does not limit his physical cruelty to victims of a fight. He will be physically cruel to younger siblings and even weaker adults, such as his mother. He will pinch, pull hair, and put his younger siblings in an arm lock until they begin to cry from the physical pain. He has no empathy or concern for the welfare of his victim. He laughs as he releases them, demonstrating his joy in causing them pain.

5. Has Been Physically Cruel to Animals. This is a very early indicator of the development of conduct disorder. It is commonly displayed by childhood-onset type conduct disorder. It is a behavior that continues into adolescence even after the CD youth has transferred his aggression toward other persons. The cruelty to animals is readily observed and has many manifestations.

The cruelty is reactionary as well as premeditated. Children with CD will pick up a puppy or a kitten by the scruff of the neck and if it scratches or bites him, he will throw it against a wall, break its neck, or drop it and kick it across the room.

The premeditated cruelty demonstrates a higher level in pleasure achieved by the behavior. There are an infinite number of examples, but these few will provide the reader with insight to the cruel nature of the conduct disordered youth:

- Drowning a bag of kittens in a lake or throwing the bag out of the car on a busy highway
- Holding two cats and tying their tails together with a short rope
- Tying firecrackers on the tail of a cat
activity, thus reducing the potential for apprehension. They change the type of crime they commit and are apt to work alone rather in gangs. Each additional collaborator in crime increases the probability of detection.

**Irritability and Aggressiveness, as Indicated by Repeated Physical Fights or Assaults**

This criterion, similar to the previous criteria, has differing levels of severity contingent upon the intelligence of the afflicted person. Irritability and aggression are common characteristics in all persons diagnosed with ASPD. It is the expression of these characteristics that differ.

The person with ASPD and lower intelligence overtly exhibits his irritability and aggressiveness through frequent confrontations with others. These confrontations may result in assaulting behavior and fighting. A predisposition to be confrontational, when coupled with impulsivity, increases the probability of a physical fight. Lower intelligence and lack of maturity indicate that the person's repertoire of behavioral responses is limited. When confronted by another person, his impulsivity and his lack of behavioral alternatives result in a physical confrontation. Being berated or humiliated by his peers by a store owner may result in his throwing a rock through the store window or assaulting the owner. Irritated and aggressive, he lashes out in anger without considering the consequences of his actions.

Inmates between the ages of 18 and 25 represent the majority of the U.S. prison population. Latent adolescence, unemployment, and impulsivity alone can account for much of this population; however, the characteristics of ASPD are readily apparent. Medium security prisons for these youthful offenders are nicknamed as “gladiator camps.” These young, immature, and perhaps ASPD inmates are irritable and aggressive. Fights are commonplace every day. They lacked the maturity to keep themselves from being apprehended in the first place, and now they lack the maturity to keep themselves out of trouble while behind the walls. They fail to recognize that every time they fight time is added on to their early release date.

**Reckless Disregard for the Safety of Self and Others**

Persons afflicted with ASPD have an ever-increasing need for heightened stimulation. Coupled with impulsivity and disregard for social norms, these characteristics collide and precipitate an unsafe environment. Young street-dwelling persons with ASPD carry weapons. It is
drive others away. Tami is either monopolizing the time of a friend or she is between friends and desperately seeking out a new one. When Tami identifies a new acquaintance, she moves in quickly to establish a commitment. She also perceives the friendship as more intimate than the other party and she sets herself up for failure. Tami not only monopolizes the leisure time of the new friend, but also exhibits jealousy if the friend talks with or goes out with someone other than her. When Tami hears of her “best” friend having lunch with someone else, she initiates an aggressive challenge that is offensive to all parties. She demands to know where they went, what they did, and why she wasn’t included in the activity. Tami will not initiate the daily contact expecting the other party to do so in definition of her commitment to the relationship. When the other person does not call, she is furious and demanding. It is only a matter of time before the other person calls off the relationship and Tami is devastated.

Tami is either intensely monopolizing her lover/husband or without a lover/husband and looking for one. Her sexual relationships are as intense as her friendships. When Tami is between lovers, she is desperately seeking a new one and demonstrates impulsivity in the process. She searches through the singles bars, drinking excessively, and flirting with every available man. She demonstrates little judgment and is sexually promiscuous. In the sober state of the morning after, she realizes that it was a one-night stand and she has been abandoned again. This circumstance does not modify her approach to the problem or her behavior. Fearing the sense of loneliness, she repeats the pattern of behavior until she finds someone who stays more than just the night. If he calls the next day asking her out for dinner, Tami’s impulsivity is demonstrated in her belief that this very brief encounter is going to be long-lasting. She grabs on as if there is no tomorrow. Tami believes that her new lover is as completely committed to the relationship as she is, but he must prove it to her. Tami demands that his total time be hers and that he will drop all other friendships, male, and particularly female. If he maintains his male friends, she is always complaining about how much time he spends with them, what were they doing, and making accusations of infidelity. Tami’s demands on his time eventually drives him away and she is devastated.

Tami’s initial response to his departure is one of intense anger characterized by screaming, swearing, and assaulting behavior. When she realizes that the anger pushed him even further away, she resorts to suicidal threats to get him to return. Tami’s sense of worth and perception of self is destroyed again. Her sense of being unworthy is reinforced by the abandonment. Tami invariably experiences a bout of depression following the loss of the relationship, however, she will not learn from
Finally, the long years of hard work and sacrifice had paid off. John sensed the accomplishment as he entered the cocktail reception in celebration of his promotion to vice president of one of the largest insurance companies in the world. The accomplishment was further enhanced by the fact that at age 35, he was youngest ever to achieve the rank of vice president. In fact, no one had even approached the level prior to their mid-forties. John’s personal celebration was not for the level of accomplishment, but rather the release from his self-imposed slavery.

John’s father had abandoned his mother and three siblings when he was 10 years old. John and his siblings had grown up in poverty. He worked at fast food franchises, tended bar, and pulled third shift to make enough money for tuition and to help out at home. John attended the local community college, received his Associate of Arts, and then enrolled at the state university in the community. John’s work schedule and persistence to be successful took its toll. There were only 24 hours in any given day and after work, classes, and studying, what little time remaining was allotted to sleep. John had no time for recreation or a social life.

He had attempted establishing a social life in his first semester at the state university, but he found his grades slipping by midterms. John reexamined his priorities and put aside a personal social life. His goals and objectives were clear. He wanted to be successful, not for the fame,
The narcissist male will also have expectations of his female dinner partner. He believes that he is entitled to a sexual encounter following the conclusion of the evening’s activities. He believes that he is entitled to a sexual encounter because he paid for her meal and theater tickets; he expects a sexual encounter because she was privileged to have his company for the evening. His special and unique qualities entitle him to the sexual encounter.

**Interpersonally Exploitative**

A salient characteristic of the narcissistic personality disorder is the exploitation of others. It is particularly significant because the exploitation is of persons with whom they have interpersonal relationships. It is a common characteristic of the antisocial personality disordered person to take advantage of others through criminal activity. The narcissist exploits personal acquaintances to his own advantage. They engage in activities that meet their personal goals and needs.

This characteristic is commonly encountered in the workplace. A narcissistic supervisor will demand work product from his subordinates and credit himself for it. He excuses their contribution as being merely the activity that he brilliantly required of them and that they could never have accomplished the work without his direction. Individual members of a group involved in a group task may take credit for the work of all of the others and, if given the opportunity, will denigrate and downplay the contributions of the other group members.

The narcissist will exploit others as they climb the corporate ladder. The role of others is merely another rung to be climbed, regardless if he has to “step” on the others to meet his goals. This “stepping” on others on the ladder to success may include deceit beyond that of profiting from the contribution of others. Competing for a promotion, a narcissist may start a rumor that has negative implications on his competitor—questions pertaining to honesty, infidelity, sexual harassment of other employees. He initiates the rumor from a place of safety where his involvement is protected from detection. He excuses his behavior through his perception of entitlement.

Upon receipt of the promotion, he “humbly” accepts the admiration and congratulations from others. He further exploits his competitor by suggesting that it must have been a very difficult choice because their credentials are very similar and wishes him well in future opportunities.

The workplace is ripe for sexual exploitation. The “casting couch” and late night working hours are opportunities for the narcissist to offer financial reward and promotion for sexual favors. Young, underpaid, and
and learn the nuances of the behavior and they observe the rewards and consequences received by the person who performed the behavior. If the outcome for the behavior appears to have a pleasing reward that meets the needs of the individual who performed the behavior, they are more apt to attempt the behavior themselves. If they observe a negative consequence received by the person who performed the behavior, they are less apt to perform the behavior.

Further, if the individual observing the behavior perceives the negative consequence as the result of a poor execution of the behavior, he learns to modify his execution of the behavior in hope of obtaining the desired reward. Rational persons perform behaviors with intent, intent to meet their intrinsic psychological needs. These behaviors are performed because the perceived result is pleasurable. Rational persons do not authentically perform behaviors that are distinctly unpleasant or fail to meet their intrinsic needs.

A child or youth watches as his older sibling or father performs a behavior and observes the subsequent reward or consequence the sibling or father receives. The youth evaluates the situation and the behavioral trait becomes part of his catalogue of experiential data to draw upon. If the older sibling or father is diagnosed with narcissistic personality disorder, they will exhibit behaviors typical of the disorder. If the person exhibiting the behavior experiences a reward, the observing son or sibling has identified a behavior that meets desired needs without a negative consequence, and will begin to exhibit the behavior himself.

This lends to an interesting inquiry. Even though the modeled behavior is characteristic of the narcissistic personality disorder, is the person who has adopted these behaviors through modeling a disordered person? The American Psychiatric Association recognizes this potential and addresses the issue. “Only when the traits are inflexible, maladaptive, and persisting and cause significant functional impairment or subjective distress do they constitute Narcissistic Personality Disorder” (DSM-IV-TR, 2000, p. 717).

This statement provides insight into the capacity for therapeutic intervention with the persons exhibiting behaviors characteristic of the narcissistic personality disorder. The narcissistic personality disorder, similar to other personality disorders is chronic and lifelong. Many persons afflicted with the disorder are very successful in their professional lives, and consequently do not experience distress. Those who experience professional or interpersonal distress precipitated by their disorder may seek treatment on their own or upon the advice of significant others. Narcissistic males that are facing divorce proceedings due to infidelity may find the consequences of their behaviors so personally painful that
they choose to change the behaviors rather than suffer the consequences. It is also significant to note that persons afflicted with narcissistic personality disorders are very capable manipulators and their willingness to participate in therapy may be malingering and a mechanism utilized to escape the probable consequences.

Persons who adopt narcissistic personality disorders through modeling as a mechanism to adapt and often control their environment are flexible and more receptive to change. If an individual observes another receive a negative consequence for a particular behavior, he will drop the behavior from his repertoire. In fact, modeling works in a reverse fashion. It is common for an individual to eliminate certain behaviors when they are no longer necessary to meet his intrinsic needs. The young man who adopts certain narcissistic behavioral traits for success in college may find these behaviors are not necessary and perhaps viewed negatively in the workplace.

Most therapeutic modalities can be successful with those individuals who are truly interested in modifying their behavior. In circumstances in which persons are reluctant to modify their behaviors, a consistently applied system of rewards and punishments is more effective. The adolescent that must endure consistently applied consequences for inappropriate conduct will, in time, choose to modify the behavior rather than face the carefully proscribed consequence. That is, if the consequence is personally meaningful to the person who must endure it. Removal of phone and email privileges, grounding, and driving restrictions commonly are consequences that adolescents find personally painful. Adolescents, like malingering adults, will challenge their boundaries, and consistency in application of rewards and punishments is requisite for behavior change.
CHAPTER 10
Avoidant Personality Disorder

AVOIDANT PERSONALITY DISORDER SCENARIO
Mike’s father was constantly calling him stupid and clumsy. Mike’s father was a master mechanic and Mike couldn’t tell the difference between a wrench and a socket. Mike has an IQ of 140 and is exceptional in math and science and dreams of going to college and studying physics. Mike’s father joined the U.S. Marines, completed his GED, and studied to become a mechanic. After his tour of duty, he came home and proudly displayed his U.S. Marine tattoo. Strong and handsome, all of the young women of the hometown were desirous of his attention.

With the help of a loan from a Marine veteran bank officer, Mike’s father opened an automobile repair shop. He could repair any engine and his business flourished. His leisure time was spent building “muscle” cars, drinking beer with his car buddies, and dating every young woman who looked his way. One of the young women, Angie, became pregnant, and in adherence to the local culture and her father’s insistence, Mike’s father married Angie. Mike was born 3 months after the wedding.

Mike’s father was not overwhelmingly happy about this state of affairs, but moving his business or divorcing Angie would be an economic disaster. Consequently, Mike’s father did his best to live his current life and keep his single life as a discreet night and weekend hobby. He continued to build racecars, drink beer, and sneak out of town for a little infidelity. When he was home, he was miserable and Angie and Mike would pay the penalty of being his burden to carry. He drank every night and would
The increased incidence of stranger child-abduction by sexual predators has created a social hysteria among parents. The social hysteria has also precipitated legislative changes that are overreactive and may in fact exacerbate the problem. Law enforcement officers are not going to excuse sophomoric sexual misconduct such as “streaking” or “mooning” as an act of immaturity and stupidity. Rather than adjusting the conduct to “drunk and disorderly,” they will explicitly describe the conduct, which in fact, is a criminal sexual conduct of displaying one’s genitals. Prosecuting attorneys, concerned with the potential of releasing a potential sexual predator, charge the young adults with the criminal sexual conduct charge. Judges and juries, concerned with the same issue, convict the individual as a sex offender and he is placed on a sexual registry for the rest of his life. The probability of this young adult re-offending is zero, but his “stupidity” will now have a negative connotation for the rest of his life. He will always be a suspect.

The failure to rationally contemplate the “reality” of the behavior overloads the sex offender registry and dilutes the surveillance and supervision ability of the criminal system. Worse, at the time of child abduction, the majority of the persons on a sex offender registry are unlikely suspects and precious time is lost in the identification of the probable suspect group.

Every time an Amber Alert is initiated, parents all over the United States become more paranoid and overly protect and supervise their children. I am not suggesting that we should not supervise our children or educate them to the concept of stranger danger, but when the parent’s paranoia isolates the child, the child becomes fearful of all unknown persons. The parent’s anxiety is transferred directly and indirectly to the child. The child becomes shy and fearful when the parent tells them not to talk to anyone who the parent does not know. The child also becomes shy and fearful when they are not allowed to participate in age group activities—soccer, T-Ball, gymnastics, etc. It is the parents’ responsibility to watch who is watching their children and act responsibly. Videotaping the audience at an age group event and examining the persons against the sex offender registry is more responsible than refusing their child to participate in the activity. Carefully checking the credentials of the volunteer swim coach is more responsible than refusing the child to participate on the age group swim team. Consequently, many children are shy and fearful because they are made that way, not born that way.

Children who are moved about or acculturated into a new dominant culture are also unsure of themselves. They do not understand the normative behavior of the new group and the shyness is natural. Parents and elementary educators have a responsibility to assist in the child’s adaptation to the new environment. Few children are naturally gregarious in
Has Difficulty Expressing Disagreement with Others Because of Fear of Loss of Support or Approval

The person afflicted with dependent personality disorder chooses not to disagree with others. The person is fearful that their contrasting opinion may appear inadequate and “stupid” and they are very fearful of losing their base of support and approval. Consequently, they appear to concur, however, in fact, they choose to passively sit back and not offer a differing opinion. They will always concur with the masses, unless their care provider (e.g., parent, spouse), is of the opposing opinion. They choose to agree with the care provider rather than risk the loss of support and approval.

This criterion produces anxiety for the young married adult who must choose the side of their spouse or the parent who has provided care and support over the years of childhood and adolescence: the no win situation; failure to respond is confronted and the afflicted person is demanded to demonstrate loyalty to each side.

Has Difficulty Initiating Projects or Doing Things on His or Her Own Because of a Lack of Self-Confidence in Judgment or Abilities Rather Than a Lack of Motivation or Energy

The person afflicted with dependent personality disorder is very reluctant to initiate new projects. The fear of inadequacy paralyzes the afflicted person. They have little or no confidence in their ability to initiate, organize, and implement a project. Consequently, they do not volunteer to take on responsibility in school, work, and social contexts. However, they are willing participants, as long as they are not required to assume responsibility. They participate if they feel adequately supervised. Unfortunately, this reinforces their self-perception of inadequacy and incapability of taking care of themselves.

Goes to Excessive Lengths to Obtain Nurturance and Support from Others, to the Point of Volunteering to Do Things That Are Unpleasant

The person afflicted with dependent personality disorder may be incapable of extracting themselves from abusive relationships. The young woman who is overly nurtured and informed that she is not competent enough to take care of herself will be attracted to a man whose is dominant and obviously is capable of taking care of her. Unfortunately these men are often also abusive—emotionally, physically, and sexually.
CHAPTER 12

Obsessive-Compulsive Personality Disorder (OCPD)

JOHN WOKE TO THE CLASSICAL MUSIC CHANNEL ON HIS ALARM CLOCK/RADIO AT 5:45 AM. HE RISES AT 5:45 AM EVERY WORKDAY, MONDAY TO FRIDAY. JOHN NEATLY FOLDS THE BLANKETS AND PULLS THE THREAD BARREN QUILT OVER THE BED. HE FOLLOWS HIS NORMAL ROUTINE; MAKING A POT OF COFFEE, CAREFULLY MEASURING OUT THE COFFEE GROUNDS, SLIDING A TABLE KNIFE ACROSS THE MEASURING SPOON TO EXACT THE AMOUNT, AND POURS THE EXACT VOLUME OF COLD WATER FROM THE REFRIGERATOR IN THE COFFEE MAKER.


AFTER HIS NORMAL TWO EGGS, BACON, TOAST, AND SECOND CUP OF COFFEE, THE PARTS OF THE NEWS THAT MEET WITH HIS OPINIONS AND STANDARDS HAS BEEN READ AND THEN HE DRESSES FOR WORK. EVERY SQUARE INCH OF JOHN’S CLOSET IS FULL WITH CLOTHING AND SHOES. JOHN ROUTINELY GAINS WEIGHT AND THEN GOES ON CRASH DIETS. HIS CLOSET IS FULL OF CLOTHING OF VARYING SIZES AND MOST ARE VERY OLD. THE STYLES ARE A DECADE OR MORE OLD, BUT JOHN KNOWS HIS WEIGHT WILL RISE AND FALL AGAIN, AND LEISURE SUITS WILL AGAIN BECOME THE RAGE.
his move, the OCPD persons will not allow the youth to withdraw his move. If the state prohibits gambling, this includes playing poker with matchsticks as a violation. If their work schedule dictates that they will be at the office from 8 AM to 5 PM with an hour lunch break, the afflicted person will be there before 8, take exactly a 1-hour lunch, and not leave before 5 PM, even if they spent 3 hours working at home the night before. Their strict adherence to rules affects others as well. The OCPD person will judge the behavior of others and often negatively influence his relationship with colleagues. These persons do not consider mitigating circumstances or allow for flexibility. They are rigid in adherence to the perceived expectations.

**Is Unable to Discard Worn-Out or Worthless Objects Even When They Have No Sentimental Value**

Stacks of old newspapers, balls of bits of string, and the last of each roll of aluminum foil are hoarded by the person afflicted with OCPD. They do not fail to discard these items because they are lazy; they believe that they may have use for them in the future. It is not uncommon for the person to have difficulty moving through their room because of the accumulation of worthless items.

The American Psychiatric Association considers this criterion definitive in the diagnosis of OCPD.

**Is Reluctant to Delegate Tasks or to Work With Others Unless They Submit to Exactly His or Her Way of Doing Things**

The person afflicted with OCPD cannot collaborate with others. They are capable of working with others in group activities, but only if all of the members of the group follow his or her rules and expectations explicitly. They demand that the work be completed exactly as they dictate. This is not limited to the world of work. The OCPD father who is teaching his son to fish will demand that he follows his instructions explicitly, even down to threading the worm on the hook. The afflicted person will demonstrate anger to the other person when the instructions are not followed explicitly. The youth who fails to follow the instruction of the OCPD basketball coach may have to run extra laps or shoot 100 free throws until he can demonstrate the coaches’ instructed technique. Creative thinking is not encouraged; it is penalized.
Adopts a Miserly Spending Style Toward Both Self and Others; Money Is Viewed as Something to be Hoarded for Future Catastrophes

Money is viewed in the same fashion as accumulated worthless items; it is not spent, but hoarded. The person afflicted with OCPD has his or her own view of necessities of life. Clothing that may be old and outdated still has utility and should be worn rather than spending money on new clothing. Clothing is handed down from one child to another. Shoes are still functional until the soles fall off, and many can be glued back on. The defining characteristic of this criterion is that money for purchase is available, but the OCPD person hoards it in contemplation of the inevitable “rainy day,” when it will be really needed to survive.

Shows Rigidity and Stubbornness

This criterion is observed in all the previous criteria and is a defining characteristic. Persons afflicted with OCPD are inflexible, reluctant to change. They have their opinions and strictly adhere to them. Their inability to see the world through the eyes of another precipitates alienation and distress. Work, play and “life in general” must be played out to their expectations.

Etiology and Intervention

It is most common that persons afflicted with OCPD have been nurtured in an environment with a dominant person afflicted with the disorder. The American Psychiatric Association indicates that males are diagnosed at double the rate of females, which lends credibility of an increased predisposition to develop the disorder in a family dominated by a person afflicted with OCPD.

The disorder generally manifests in late adolescence and young adulthood, and is considered chronic and lifelong. The rigidity and stubbornness characteristic of the disorder reduces the possibility of successful therapeutic intervention.
ALFRED ADLER (1870–1937)

Alfred Adler, educated as a medical doctor, was an early follower of Sigmund Freud, but disassociated himself following recognition that they differed in their theoretical perspectives on the nature of man. Adler believed that man is motivated by his striving for future goals rather than being motivated by past experiences. Adler believed that man is a “whole” person who develops his own unique style of life. It is his creative self that strives for experiences that enhance his life perspective. He is cognitive and evaluates experiences and opportunities in relation to the self.

Man may also strive for unachievable goals and the subsequent failure may produce an irrational belief of inferiority. This lack of success is based upon an inaccurate perception of his abilities and an egotistically skewed view of the experience or opportunity. Adler also promulgated the theory that man was inherently altruistic for the purpose of correcting society and his efforts to serve and correct society compensates for his inability to accomplish personal goals and objectives.

GORDON ALLPORT (1897–1967)

Allport’s contribution to the discipline was the proposition that some persons have specific “traits” that are uncommon in the general population. The study of personality disorders is the recognition that some persons have “traits” that are not commonly found in the general population. Allport also indicated that a person’s behavior is indicative of these “traits.” He cannot act in fashions that are alien to the “trait.” If a person has developed the trait of submissiveness, he will respond to the environment in a submissive manner.

Allport posited that persons are not biologically predisposed to develop the “traits,” but rather develop the traits over time and their relationships and experiences with the environment. Allport utilized steps of personality development similar to the works of others. He also attempted to describe the “mature personality” as an extension of his positive traits that are recognized, utilized, and most significantly, are realistic and rational.

ALBERT BANDURA (1925–)

Albert Bandura is considered one of the leading developmental psychologists. He is recognized for development and promulgation of his Social Learning Theory. Drifting from the strict school of behaviorism,
an undesirable result. Ellis also posits that when man clearly examines the environmental stimuli, he can evaluate alternative responses and react in a rational manner, meeting his desired goals.

Ellis’ theories assist in understanding personality disorders. The chronic nature and rigidity of the personality disorders prohibit the individual from clearly examining the environmental stimulation, assessing viable alternatives, and reacting in a rational manner.

ERIK ERIKSON (1902–1994)

Erikson is recognized for his work in child psychology and specifically his recognition of stages of development that are associated with socialization. As a child develops through childhood and adolescence, his experience with the social environment is instrumental in the development of his identity. The roles that a child adopts and consequently experiences, success or failure within the social environment, precipitate the self-identity. Erikson acknowledged the significance of parenting and the social setting of school in the development of the identity. He also suggests that at each stage of development, the potential for crisis exists. As the identity is established, the child or adolescent has self-imposed expectations of success or failure. When the individual’s experience in the environment does not meet his expectations, his view of his identity is questioned and in crisis. In contrast, if he meets his self-imposed expectations, his perception of self or his identity is reinforced.

HANS EYSENCK (1916–1997)

Eysenck is best known for his work in the analysis of psychopathy, which includes his development of a checklist to be utilized by clinicians in the diagnosis of the Antisocial Personality Disorder. Eysenck’s work was controversial, based upon his theoretical perspective that psychopathy is a genetic trait and consequently children of a biological parent diagnosed with Antisocial Personality Disorder are genetically predisposed to develop the disorder. He rejected theories pertaining to development and learning.

SIGMUND FREUD (1856–1939)

No discussion of personality is complete without an acknowledgment of the contributions of Sigmund Freud. Freud’s contribution to the discipline was varied, but it is his theory of personality that is relevant to the discussion of personality disorders. Freud divided the personality into
the discovery of similar brain activity of Antisocial Personality Disordered adults and adolescents, Hare posited that the brains of the Antisocial Personality Disordered adults were arrested in development during adolescence, or maturation retardation. This hypothesis explained why some Antisocial Personality Disordered adults ceased their characteristic behavior without intervention. The brain merely began to mature.

Many clinicians find Hare’s work relevant because the behaviors of the Antisocial Personality Disordered adults and adolescents are very similar; lacking in remorse, pathological lying, irresponsibility, need for heightened stimulation, inability to defer gratification, and egocentricity.

**KAREN HORNEY (1885–1952)**

Horney’s theoretical perspective pertaining to anxiety and neurosis was extremely significant in understanding the relationship of fear, anxiety to behavior. Horney described the relationship of a child to its environment. Disturbances in the child’s environment threatened the child’s perception of security and the child demonstrated his displeasure regarding the anxiety-producing experience in a variety of behavioral manifestations: temper tantrums, crying, isolation, and aggressive behavior, etc. Her theoretical perspective has significance to adults as well.

When an adult senses the discomfort associated with an anxiety-producing situation, the natural reaction is to reduce the discomfort. Persons develop different mechanisms for eliminating the anxiety, which Horney described as moving toward the anxiety-producing stimuli, moving away from the stimuli, or moving against the stimuli. Failure to move or respond results in a continuation of the anxiety, and maladaptive behaviors are adopted to adapt: for example, substance abuse, phobias, displaced aggression, and depression, etc.

**CARL JUNG (1875–1961)**

Jung was a close associate and follower of the theoretical perspectives of Sigmund Freud. Interested in developing his own theoretical model, Jung dissolved his relationship with Freud in 1913. Much of Jung’s work mirrors that of Freud with just a modification in terminology. Jung’s research was directed at the relationship of psychology and religion. His primary contribution and change in direction for Freud’s work was his belief that a person strived for equilibrium and stability, and thus was receptive to psychotherapeutic intervention for emotional well-being.
About the Author

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