

# EXTRA HELP FOR DISORDERS OF THE SELF

People who depend on others to feel important or cared about may focus on controlling their loved ones rather than changing themselves. The methods they use to avoid painful feelings (substance abuse, lashing out, or clinging) create considerable distress for people in their lives. Friends and relatives may need to be the first ones to change before people with self-defeating behavior can begin to alter well-entrenched patterns. Mark any strategies below that you would be willing to make to plant seeds for new growth.

- \_\_\_ Read everything you can to help you understand difficult people. The more you know, the less responsible you will feel and the more options you will have.
- \_\_\_ Return helplessness with helplessness. If you are asked to do all of the problem solving, act as if you don't know the answers. Establish a habit of giving your opinion after others have said theirs. Set limits on what you will and will not do.
- \_\_\_ Model the middle-ground response to excessive reactions. Silent withdrawal or efforts to control extreme behavior are replicas of the circumstances that created it. Instead, show support, identify feelings, and state the truth—"I really care about you. I know you spoke the way you did because you were so frustrated with me. However, I will wait until you can discuss this issue without calling me names."
- \_\_\_ Make an agreement to use a timer during conversations so both people have equal time to express themselves. Repeatedly ask for feedback to make sure the other person is listening—"Did you get my point? Could you tell me what it was?"
- \_\_\_ Set a limit for how long each person can spend talking about himself or herself. Put questions on file cards that the other person can ask to show an interest in you.
- \_\_\_ Determine your own standards for cleanliness, spending money, morals, or dress. Get outside input. Sympathize with your partner's distress when you are not willing to live up to his or her standard, but stay firm about meeting (only) your own expectations.
- \_\_\_ Do not give up your power and blame your partner for "controlling" you. Make your own sensible decisions and sympathize with your partner's reaction—"I know it's hard for you to believe I love you when I don't do what you want me to do."
- \_\_\_ Do not reassure, explain, or attack. Consistently empathize with difficulties rigid people have enduring change—"It must feel awful when I don't do what you want."
- \_\_\_ Do not accommodate to your partner's avoiding or isolation. Make plans to do what you want to do and give your partner the choice to accompany you or stay home.
- \_\_\_ Express any complaints you have as requests for change—"Would you . . . , . . . , or . . . ?" Find out if your partner is willing to work on making improvements.
- \_\_\_ Identify actions you can take if you do not see any cooperation. Implement them one at a time until you notice a difference. Be firm while understanding distress.
- \_\_\_ Determine how far you are willing to go for change. Do not wait until all love dies before taking action. Keep a bag packed as a symbol that you can leave.
- \_\_\_ Do not return home after leaving until the person takes concrete action: attending a certain number of 12-step meetings or talking with a therapist and allowing you to attend a session to gain a professional opinion on the possibilities for improvement.
- \_\_\_ Get help for yourself if you tolerate unacceptable behavior or try to fix people with problems. Support groups and therapy can be helpful.

## **FRIENDLY CAUTIONS**

If you have come to a point in your life where you've decided you need to change self-defeating habits, bravo! Choose family members and friends as coaches who can be honest, firm, and sympathetic with you. Don't look for people who will give you the answers you want to hear. Feedback that makes you feel bad may be accurate. Learn to stay with those emotions long enough to comfort the wounded child within you who has difficulty being self-supporting, admitting mistakes, or connecting with others. Give others' ideas full consideration before you reject them. As you identify your patterns, let others know how they can help—"Give me a signal if I talk too long."

## **NATIONAL NETWORKS, SUPPORT GROUPS, AND OTHER RESOURCES**

There are few nationwide organizations or networks devoted to specific personality disorders. However, many 12-step groups deal with self-defeating behaviors people with these problems have. Listings of local meetings can be found in your community newspaper. Web sites and books can offer additional assistance, for example:

- 12-step groups: Alcoholics Anonymous (AA), Narcotics Anonymous (NA), ALANON Family Groups (ALANON), Adult Children of Alcoholics and Dysfunctional Families (ACOA), and Co-Dependents Anonymous (CoDA).
- General Internet sites offer online diagnosis, research articles and information on treatment: [www.mentalhealth.com](http://www.mentalhealth.com), [www.healthguide.com](http://www.healthguide.com), [www.cmhc.com](http://www.cmhc.com), [www.bpdcentral.com](http://www.bpdcentral.com) for erratic or borderline personalities (BPD).
- *The Angry Heart* by Joseph Santoro and Ronald Cohen for BPD (New Harbinger, 1997).
- *Codependent No More* by Melody Beattie (Hazelden, 1992).
- *I Hate You, Don't Leave Me* by Jerald Kreisman and Hal Straus for BPD (Avon Books, 1989).
- *Lost in the Mirror* by Richard Moskowitz for BPD (Taylor Publications, 1996).
- *New View of Self* by Larry Siever on biochemistry of disorders (Macmillan, 1997).
- *Reinventing Your Life* by Jeffrey Young and Janet Klosko (Penguin Books, 1993).
- *The Search for the Real Self* by James Masterson (The Free Press, 1988).
- *Personality Disorders, New Symptom-Focused Drug Therapy* by Sonny Joseph (Haworth Medical Press, 1997).

## **PROFESSIONAL HELP**

Counseling is very important when personality traits interfere with work or relationships. Often, family members will seek help for people with disorders. Until the late 1990s, the prevailing belief was that treatment of personality disorders took years. When different theoretical orientations and treatment modalities (individual, family, group therapy, and support groups) are combined, significant improvement may be seen in less than a year. Psychopharmacology is the newest addition to the treatment mix. Drugs can moderate underlying temperaments to help people make gains from other forms of treatment. However, the reality needs to be faced that low-functioning personality disorders and defiant, guarded, and inflated people in particular may not be able to benefit from any form of help.