Personality

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Objectives:

- What Is Personality?
- Freud and the Psychodynamic Perspective
- Humanistic Approaches
- Biological Approaches
- Trait Theorists
- Cultural Understandings of Personality
- Personality Assessment

Definition of Personality

Personality - A relatively stable set of characteristics that influences an individual's behavior .

Refers to the long-standing traits and patterns that propel individuals to consistently think, feel, and behave in specific ways.

Personality Theories

Psychodynamic Theory - emphasizes the unconscious determinants of behavior

Humanistic Theory - emphasizes individual growth and improvement

Trait Theory - understand individuals by breaking down behavior patterns into observable traits

Freud and the Psychodynamic Perspective

- Our unconscious refers to that mental activity of which we are unaware and are unable to access (Freud, 1923). According to Freud, unacceptable urges and desires are kept in our unconscious through a process called repression.

Personality Structure
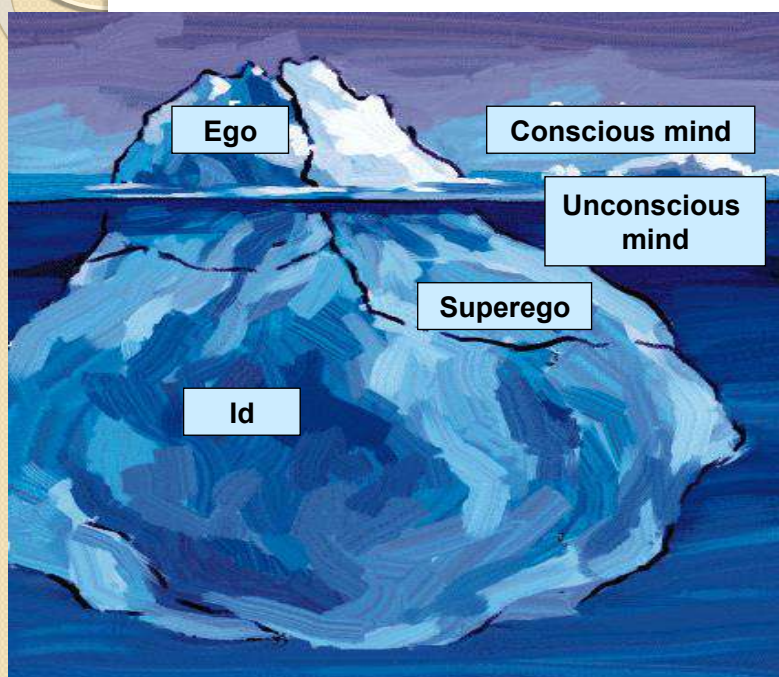
- Freud's idea of the mind's structure

- According to Freud, our personality develops from a conflict between two forces: our biological aggressive and pleasure-seeking drives versus our internal (socialized) control over these drives.

- Our personality is the result of our efforts to balance these two competing forces.

- Freud suggested that we can understand this by imagining three interacting systems within our minds. He called them the **id, ego, and superego**

Personality Structure

- Id
  - Contains a reservoir of unconscious psychic energy
  - Strives to satisfy basic sexual and aggressive drives
  - Operates on the pleasure principle, demanding immediate gratification
  - Present at birth

Personality Structure

- Superego
  - the part of personality that presents internalized ideals
  - Represents "rules" of society
  - Provides standards for judgment (the conscience) and for future aspirations
  - The superego determines our conscience or moral compass (what we ought to do).
  - Begins development by age 5
  - Learned from caretakers
  - Insists on socially acceptable behavior, sometimes to the point of individual deprivation
 - Can be punitive

Id and Superego

- Id and Superego are in constant conflict
- This cause guilt and anxiety
- People need to learn how to cope with this conflict– some do it successfully and others don't
- Conflicts must be resolved by ego

Personality Structure

- Ego
  - The largely conscious, "executive" part of personality
  - Mediates among the demands of the id, superego, and reality
  - Operates on the reality principle, satisfying the id's desires in ways that will realistically bring pleasure rather than pain

Id
"I want to do that now!"

Superego
"It's not right to do that."

Ego
"Maybe we can compromise."
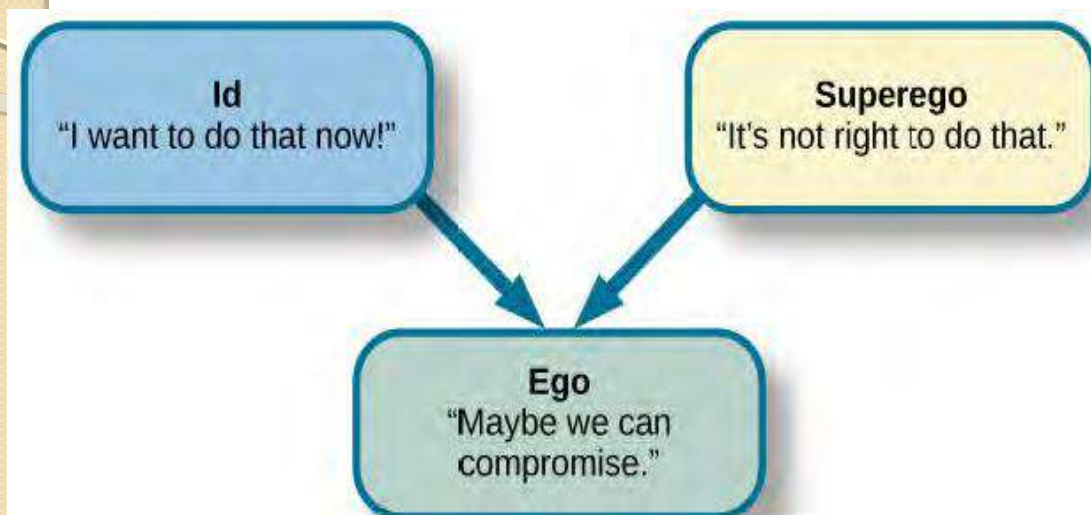
DEFENSE MECHANISMS

- Freud believed that feelings of anxiety result from the ego's inability to mediate the conflict between the id and superego. When this happens, Freud believed that the ego seeks to restore balance through various protective measures known as defense mechanisms.

- When certain events, feelings, or yearnings cause an individual anxiety, the individual wishes to reduce that anxiety.

DEFENSE MECHANISMS

- To do that, the individual's unconscious mind uses ego **defense mechanisms**, unconscious protective behaviors that aim to reduce anxiety.

- When we use defense mechanisms, we are unaware that we are using them. Further, they operate in various ways that distort reality. According to Freud, we all use ego defense mechanisms.
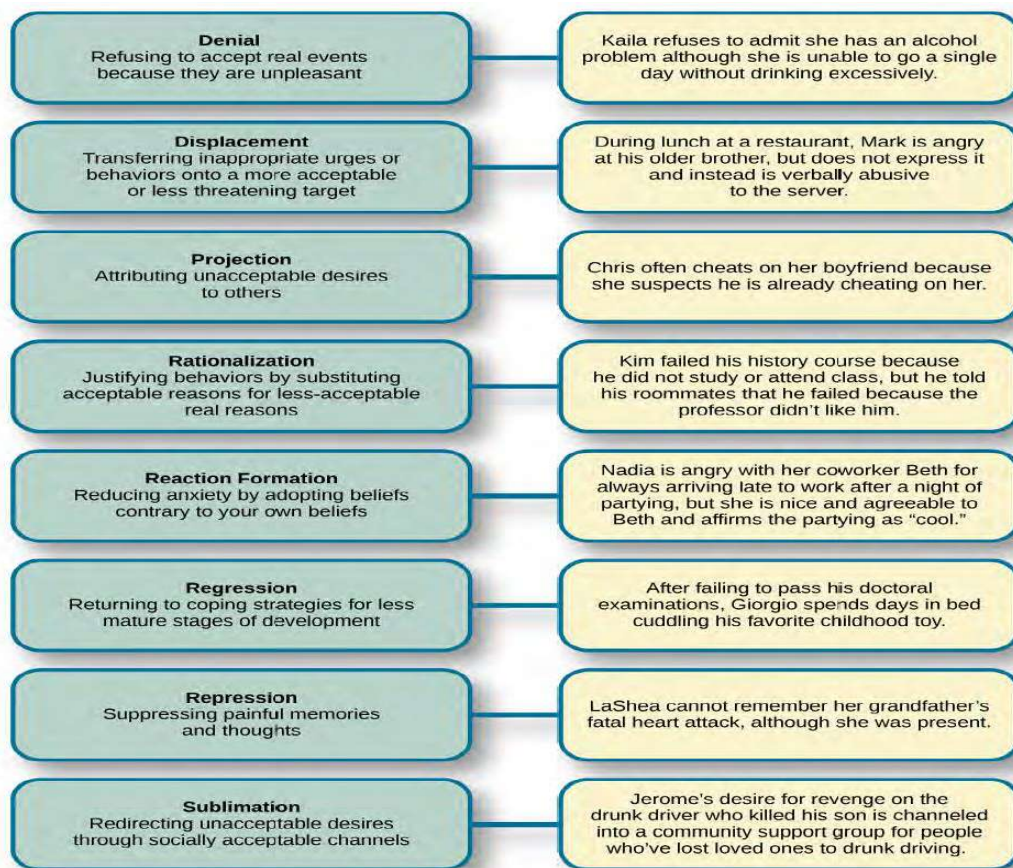
DEFENSE MECHANISMS

- Defenses are the primary tools of the ego used to manage the internal conflicts between the id and superego. They are the means by which the ego wards off anxiety, and controls instinctive urges and unpleasant effects (emotions).

- All defenses are unconscious, with one exception: suppression.

- Defenses change over time; we are only aware of our defenses in retrospect.

- Defenses are adaptive as well as maladaptive.

DEFENSE MECHANISMS

- Defense Mechanisms
  - the ego's protective methods of reducing anxiety by unconsciously distorting reality (can be a normal process, but can also lead to disordered behavior)
- Repression
  - the basic defense mechanism that banishes anxiety-arousing thoughts, feelings, and memories from consciousness (e.g., memories of childhood or past marriage)

| Denial | Kaila refuses to admit she has an alcohol problem although she is unable to go a single day without drinking excessively. |
| Refusing to accept real events because they are unpleasant | |

Denial
Refusing to accept real events because they are unpleasant
— Kaila refuses to admit she has an alcohol problem although she is unable to go a single day without drinking excessively.

Displacement
Transferring inappropriate urges or behaviors onto a more acceptable or less threatening target
— During lunch at a restaurant, Mark is angry at his older brother, but does not express it and instead is verbally abusive to the server.

Projection
Attributing unacceptable desires to others
— Chris often cheats on her boyfriend because she suspects he is already cheating on her.

Rationalization
Justifying behaviors by substituting acceptable reasons for less-acceptable real reasons
— Kim failed his history course because he did not study or attend class, but he told his roommates that he failed because the professor didn't like him.

Reaction Formation
Reducing anxiety by adopting beliefs contrary to your own beliefs
— Nadia is angry with her coworker Beth for always arriving late to work after a night of partying, but she is nice and agreeable to Beth and affirms the partying as "cool."

Regression
Returning to coping strategies for less mature stages of development
— After failing to pass his doctoral examinations, Giorgio spends days in bed cuddling his favorite childhood toy.

Repression
Suppressing painful memories and thoughts
— LaShea cannot remember her grandfather's fatal heart attack, although she was present.

Sublimation
Redirecting unacceptable desires through socially acceptable channels
— Jerome's desire for revenge on the drunk driver who killed his son is channeled into a community support group for people who've lost loved ones to drunk driving.

Defense mechanism	Explanation	Example
Repression	Unacceptable or unpleasant impulses are pushed back into the unconscious	A woman unable to recall that she was raped
Regression	People behave as if they were at earlier stage of development	A boss has a temper tantrum when an employee makes a mistake
Displacement	The expression of unwanted feeling or thought is redirected from a more threatening powerful person to a weaker one	A brother yells at his younger sister after a teacher gives him a bade grade
Rationalization	People distort reality in order to justify something that has happened	A person who is passed over for an award says she didn't really want it in the first place

Defense mechanism	Explanation	Example
Denial	People refuse to accept or acknowledge an anxiety producing piece of information	A student refuses to believe that has flunked a course
Projection	People attribute unwanted impulse and feelings to some one else	A man who is angry at his father acts lovingly to his father but complains that his father is angry with him
Sublimation	People divert unwanted impulses into socially approved thoughts, feeling or behavior	A person with strong feelings of aggression becomes a soldier
Reaction formation	Unconscious impulses are expressed as their opposite in consciousness	A mother who unconsciously resents her child acts in an overly loving way to the child.

Defense mechanism	Explanation	Example
Acting out	Expressing an unconscious wish or impulse through action to avoid being conscious of an accompanying affect.	The unconscious fantasy is lived out impulsively in behavior, thereby gratifying the impulse, rather than the prohibition against it.
Isolation	Splitting or separating an idea from the affect that accompanies it but is repressed.	The man who is bury dead bodies every day isolate the death event from emotion accompanying the event of death
Altruism	Using constructive and instinctually gratifying service to others to undergo a Vicarious experience.	A person with acting as a social helper and giving help to others
Identification with the aggressor	Adopting the psychological characteristics of people we find threatening	A college basketball player who initially fears his tyrannical coach comes to admire him and adopts his dictatorial qualities.

Personality Development

- Psychosexual Stages
  - the childhood stages of development during which the id's pleasure-seeking energies focus on distinct erogenous zones

Mentioned before

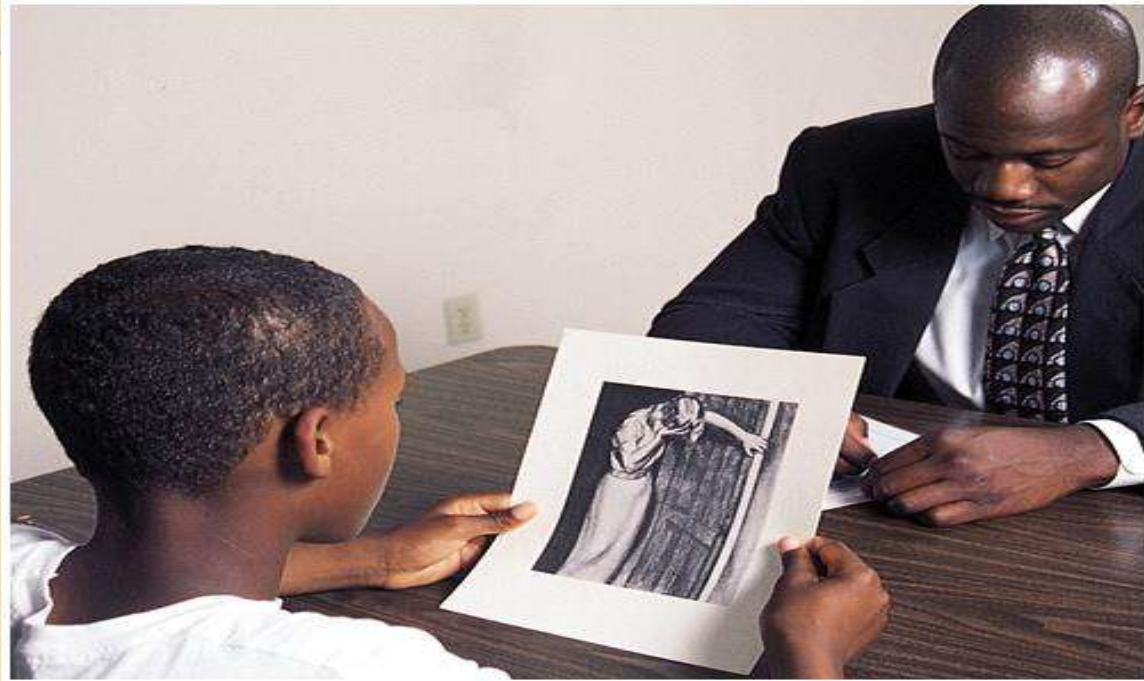# Assessing the Unconscious

- Projective Test
  - a personality test, such as the Rorschach or TAT, that provides ambiguous stimuli designed to trigger projection of one's inner dynamics

- Thematic Apperception Test (TAT)
  - a projective test in which people express their inner feelings and interests through the stories they make up about ambiguous scenes

Assessing the Unconscious--TAT

Assessing the Unconscious--Rorschach

CARL JUNG

- Jung also proposed two attitudes or approaches toward life: extroversion and introversion (**Table**). These ideas are considered Jung's most important contributions to the field of personality psychology, as almost all models of personality now include these concepts.

Introverts and Extroverts

Introvert	Extrovert
Energized by being alone	Energized by being with others
Avoids attention	Seeks attention
Speaks slowly and softly	Speaks quickly and loudly
Thinks before speaking	Thinks out loud
Stays on one topic	Jumps from topic to topic
Prefers written communication	Prefers verbal communication
Pays attention easily	Distractible
Cautious	Acts first, thinks later

Humanistic Approaches

- This perspective focuses on how healthy people develop. Abraham Maslow, studied people who he considered to be healthy, creative, and productive, including Albert Einstein, Eleanor Roosevelt, Thomas Jefferson, Abraham Lincoln, and others.

- Maslow found that such people share similar characteristics, such as being open, creative, loving, spontaneous, compassionate, concerned for others, and accepting of themselves

Humanistic Approaches

- Maslow's hierarchy of needs theory, in which Maslow proposes that human beings have certain needs in common and that these needs must be met in a certain order.

- The highest need is the need for self-actualization, which is the achievement of our fullest potential

Maslow's Hierarchy of Needs

Self-actualization	Inner fulfillment
Esteem	Self-worth, accomplishment, confidence
Social	Family, friendship, intimacy, belonging
Security	Safety, employment, assets
Physiological	Food, water, shelter, warmth
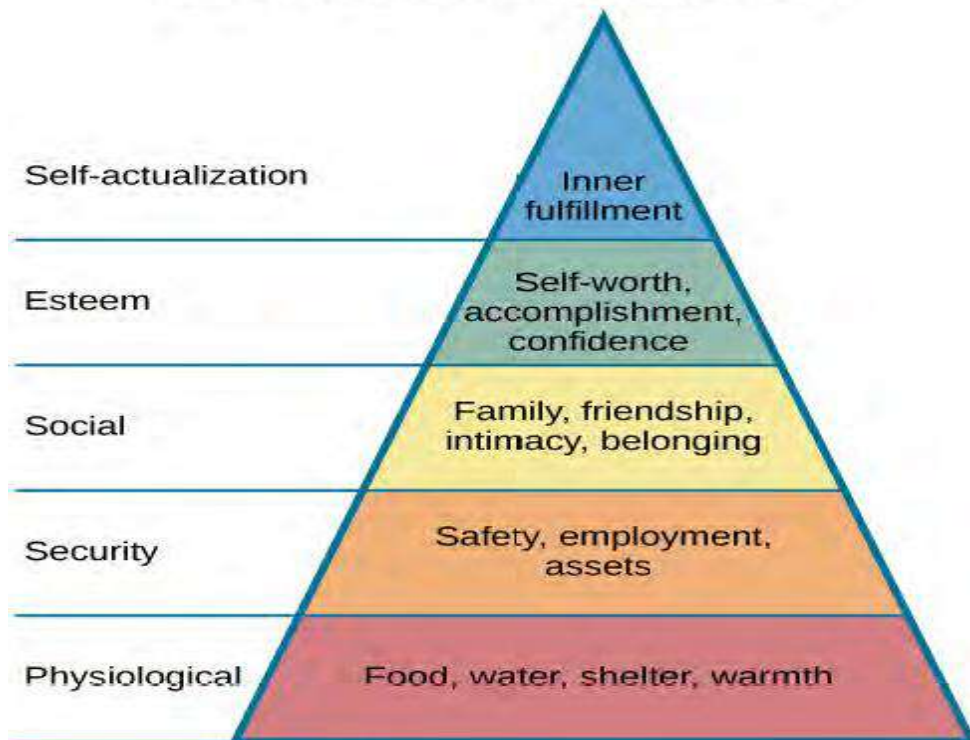
- Another humanistic theorist was **Carl Rogers**. One of Rogers's main ideas about personality regards **self concept**, our thoughts and feelings about ourselves.

- Rogers further divided the self into two categories:

- The ideal self and the real self.

- The **ideal self** is the person that you would like to be;

- The **real self** is the person you actually are.
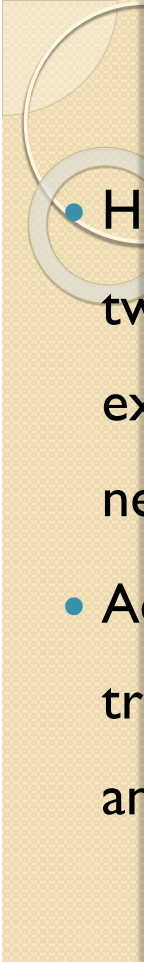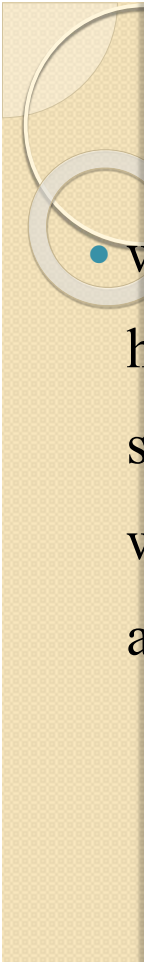
Biological Approaches

- **Heritability of some personality traits.**

- Some aspects of our personalities are largely controlled by genetics;

- Traits are not determined by a single gene,

- Epigenetic factors control whether the genes are expressed.
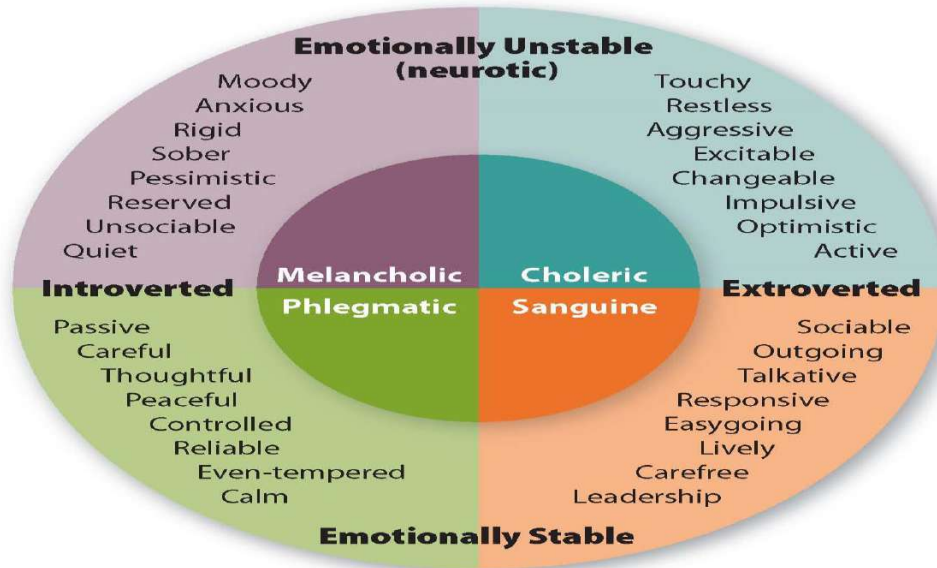
Trait Theorists

- Trait theorists believe personality can be understood via the approach that all people have certain **traits**, or characteristic ways of behaving. Do you tend to be sociable or shy? Passive or aggressive? Optimistic or pessimistic? Moody or even-tempered?

- Hans and Sybil Eysenck viewed people as having two specific personality dimensions: extroversion/introversion and neuroticism/stability.

- According to their theory, people high on the trait of extroversion are sociable and outgoing, and readily connect with others,

- whereas people high on the trait of introversion have a higher need to be alone, engage in solitary behaviors, and limit their interactions with others. Summary of their theory of traits are present in the following figure:

EYSENCK'S PERSONALITY DIMENSIONS

Emotionally Unstable (neurotic)

Moody
Anxious
Rigid
Sober
Pessimistic
Reserved
Unsociable
Quiet

Introverted

Passive
Careful
Thoughtful
Peaceful
Controlled
Reliable
Even-tempered
Calm

Melancholic
Phlegmatic

Choleric
Sanguine

Touchy
Restless
Aggressive
Excitable
Changeable
Impulsive
Optimistic
Active

Extroverted

Sociable
Outgoing
Talkative
Responsive
Easygoing
Lively
Carefree
Leadership

Emotionally Stable

This diagram shows how closely Eysenck's personality dimensions relate to the four personality types identified by Hippocrates.
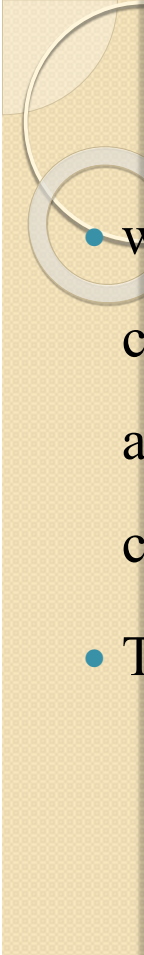
Skills Focus INTERPRETING VISUALS According to the diagram, which of Hippocrates's personality types are most unstable?

Source: Eysenck, H.J. and Eysenck, M.W. *Personality and Individual Differences.* Plenum Publishing, 1958.

Types of Traits
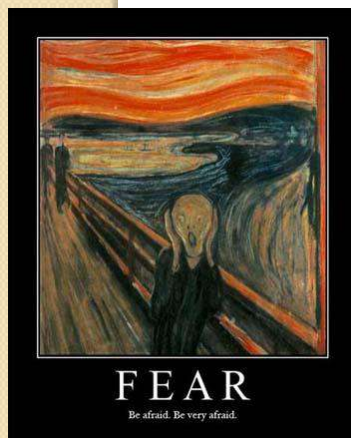
- Later, the Eysencks added a third dimension: **psychoticism versus superego control**.
- In this dimension, people who are high on psychoticism tend to be independent thinkers, cold, nonconformists, impulsive, antisocial, and hostile,
- whereas people who are high on superego control tend to have high impulse control—they are more altruistic, empathetic, cooperative, and conventional.
- The big five

- **The big five personality factors and dimensions of sample trait: represent the best description of personality**

Openness to experience		Conscientiousness	
Curious	Uninquisitive	Dependence	Careless
Imaginative	Conventional	Organized	Sloppy
Creative	Conforming	Reliable	Inefficient
Complex	Simple	Ambitious	Negligent
Refined	Unrealistic	Hardworking	Lazy
Sophisticated	Traditional	Peresevering	Irresponsible
Extraversion		**Agreeableness**	
Talkative	Quiet	Kind	Critical
Sociable	Shy	Cooperative	Antagonistic
Passionate	Inhibited	Sympathetic	Callous
Assertive	Bashful	Helpful	Selfish
Bold	Reserved	Courteous	Rude
Dominant	Submissive	Warm	Cold
Neuroticism			
Nervous	Calm	Insecure	At ease
Moody	Steady	Jealous	Secure
Emotional	Relaxed	Unstable	Contented
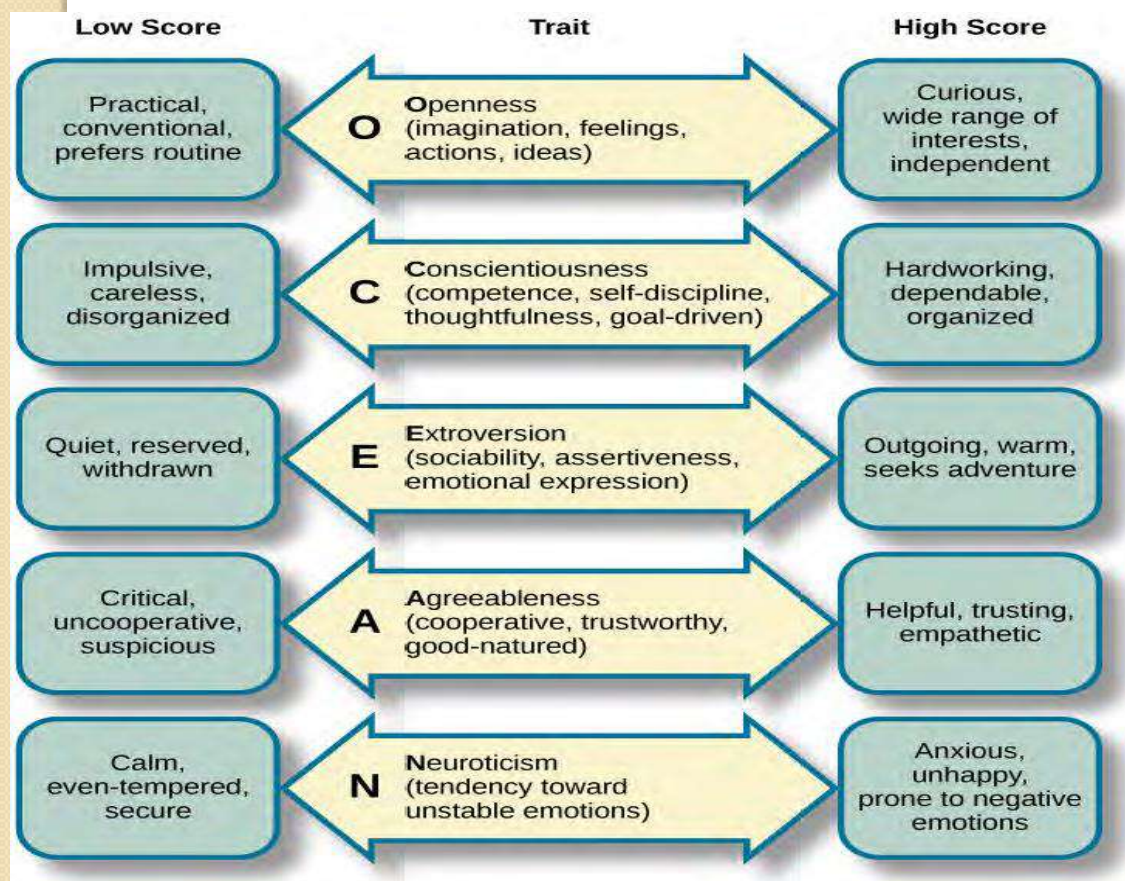
Cultural Understandings of Personality

- The culture in which you live is one of the most important environmental factors that shape your personality.

- The term **culture** refers to all of the beliefs, customs, art, and traditions of a particular society.

- It appears that there are both universal and culture-specific aspects that account for variation in people's personalities.

Cultural Understandings of Personality

- Asian cultures are more collectivist, and people in these cultures tend to be less extroverted.

- People in Central and South American cultures tend to score higher on openness to experience, whereas Europeans score higher on neuroticism

Personality Assessment

- **SELF-REPORT INVENTORIES**

1- Minnesota Multiphasic Personality Inventory (MMPI),

- **PROJECTIVE TESTS**

1. The Rorschach Inkblot Test,
2. The Thematic Apperception Test (TAT),
3. The Contemporized-Themes Concerning Blacks test,
4. The TEMAS (Tell-Me-A-Story), and
5. The Rotter Incomplete Sentence Blank (RISB)

Personality and Response to Illness

Five areas of such differences are observed:
1. Symptom perception
2. Symptom action
3. Symptom formation
4. Response to illness
5. Response to treatment

1- Symptom Perception:

This refers to the way in which people perceive symptoms occurring in their own bodies. The variation is situationally and culturally determined. For example, it was, reported that:

• **Introverts were** found to have a lower pain threshold; in that they tend to feel pain sooner than extroverts.

• **Situational factors** may also alter pain threshold by affecting anxiety levels. Someone under pressure at home or at work might well be made more anxious and this could amplify the perception of a symptom.

2- Symptom Action:

- This describes what action people take in response to the perception of a symptom and in particular whether they seek medical help or not.
- **Anxiety level** is a factor correlates with high attendance to medical services, the higher the anxiety the more likely the patient is to seek medical help.
- **Locus of control** can influence the type of action, which follows the perception of symptoms.
- Locus of control refers to the extent to which an individual feels that the things, which happen to him are determined by internal factors under his own control, or external factors not affected by his behavior.

2- Symptom Action:

- Some research have shown that patients who have high scores on locus of control questionnaire, i.e. with a strong belief in external determinants, are more likely to seek medical and psychiatric help, since they feel that they are less able to bring about any effective change in themselves and hence rely more on external agents to do so.

3- Symptom Formation:

This describes the possibility that different types of people might be prone to different types of disorders.

Type A and Type B personality

• The type "A" behavior pattern is characterized by enhanced aggressiveness, and competitive drive, a preoccupation with deadlines, and a chronic impatience sense of time urgency. Also, they were able to provide clear evidence that type A behavior has an association with coronary heart disease.

• The type "B" behavior pattern is characterized by being more relaxed, less hurried found of sedentary life.

4- Response to Illness:

• Some people appear to over-react, and others appear to underreact, or deny the seriousness or inconvenience of an illness.

• Others become hostile and aggressive while some people may welcome and exaggerate their illness because it provides an opportunity to express their feelings of dependence on others.

5- Response to Treatment:

Placebo effect:

- In general, people who show large placebo responses are found to be fairly suggestible and dependent types, whereas people with more suspicious natures tend not to respond to placebo tablets.

- The personality of the doctor or person administering the medication also appears to modify the extent of a placebo response.

Response to certain drug:

- It has also been claimed that there are personality differences in response to drugs affecting the CNS. In anxious patients, greater tolerance of sedatives is found amongst the more introverted, whereas the extraverts are found to be much more sensitive to these drugs.

Doctor-patient relationship:

- It has been shown that the personality factors may play a role in determining the effectiveness of communication between doctor and patient.

Personality disorders

General Information

• individuals with personality disorder have an ==enduring pattern of inner experience and behaviour that deviates markedly from the expectations of the individual's culture; manifested in two or more of: cognition, affect, interpersonal functioning, impulse control==

• Inflexible and pervasive across a range of situations

• Pattern is stable and well-established by adolescence or early adulthood (i.e. not a sudden onset)

• Associated with many co-morbidities, such as depression, suicide, violence, brief psychotic episodes, substance use, and treatment resistance

Personality disorders

General Information

• Relationship building and establishing boundaries are important; focus should be placed on validating, finding things to be truly empathetic about, and speaking to the patient's strengths

• Mainstay of treatment is psychotherapy (e.g. CBT, interpersonal psychotherapy, psychodynamic psychotherapy, DBT); add pharmacotherapy to treat associated psychiatric disorders (e.g. depression, anxiety, substance misuse)

Classification

• Personality disorders are divided into three clusters (A, B, and C), with shared features among disorders within each

Types of personality disorders

Cluster	Personality disorder
Cluster A: "Mad" Odd, eccentric and eccentric Common defense mechanisms: intellectualization, projection, magical thinking	Paranoid personality disorder Schizoid personality disorder Schizotypal personality disorder
Cluster B: "Bad" Emotional, dramatic, inconsistent, and impulsive Common defense mechanisms: denial, acting out, regression (histrionic PD), splitting (borderline PD), projective identification, idealization/devaluation	Antisocial personality disorder Borderline personality disorder Histrionic personality disorder Narcissistic personality disorder
Cluster C: "Sad" Anxious and fearful Common defense mechanisms: isolation, avoidance, hypochondriasis	Avoidant personality disorder Obsessive compulsive personality disorder Dependent personality disorder

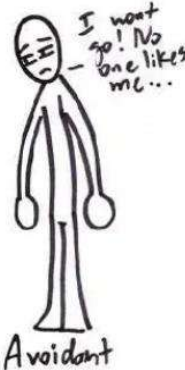ANTISOCIAL   BORDERLINE   HISTRIONIC   NARCISSISTIC
CLUSTER B

Cluster A

Cluster C

Paranoid

Schizotypal

Schizoid

Cluster C

I want to go! No - one likes me...

What do you think I should do?

Ok sure

Yes don't leave

That is not what the list says...

Avoidant   Dependent   Obsessive-Compulsive

Practical part

Case scenarios of different personality disorders

Paranoid PD

- Mr Jhon 35 years old brought by his wife claimed that science she know him she noticed that he harbors a pervasive and unjustifiable suspiciousness and mistrust of others; reluctant to confide in or become close to others; reads hidden demeaning or threatening meaning into benign remarks or events; this attitude not restricted to his work peers it also extended to his neighbors. He takes offense easily and bears grudges; he has no other symptoms suggesting schizophrenia or other psychotic disorders.

- What type of personality disorder …………

Schizoid PD

- A mother brought her daughter of 22 years old she noticed that she lacks interest and desire to form relationships with others; aloof and shows emotional coldness and detachment; indifferent to approval or criticism of others; lacks close friends or confidants. Mother denied presence of other symptoms suggesting schizophrenia or other psychotic disorders, or symptoms of autism spectrum disorder

- What type of personality disorder …………

Schizotypal PD

- Mr Tony brought by his father his describe his son as he exhibits eccentricities in thought, perception, emotion, speech, and behavior; shows suspiciousness or paranoia; has unusual perceptual experiences; speech is often idiosyncratic; displays inappropriate emotions; lacks friends or confidants. Father denied presence of other symptoms suggesting schizophrenia or other psychotic disorders, or symptoms of autism spectrum disorder

- What type of personality disorder …………

Antisocial PD

- Smith is a 34 years old prisoner his history show that he continuously violates the rights of others; has history of antisocial tendencies prior to age 15; often lies, fights, and has problems with the law; impulsive and fails to think ahead; he is deceitful and manipulative in order to gain profit or pleasure; irresponsible and often fails to hold down a job or pay financial debts; lacks feelings for others and remorse over misdeeds

- What type of personality disorder …………

Histrionic PD

- Nancy is 20 years old her friends noted that she is excessively overdramatic, emotional, and theatrical; feels uncomfortable when not the center of others' attention. She has behavior which is often inappropriately seductive or provocative; her speech is highly emotional but often vague and diffuse; emotions are shallow and often shift rapidly; may alienate friends with demands for constant attention

- What type of personality disorder …………

Narcissistic PD

- George his work peers noticed that he is overinflated and has unjustified sense of self-importance and preoccupied with fantasies of success; believes he is entitled to special treatment from others; shows arrogant attitudes and behaviors; takes advantage of others; lacks empathy
- What type of personality disorder …………

Borderline PD

- July a 25 years old come to help for suicidal ideations . She has unstable in self-image, mood, and behavior; cannot tolerate being alone and experiences chronic feelings of emptiness; unstable and intense relationships with others; behavior is impulsive, unpredictable, and sometimes self-damaging; shows inappropriate and intense anger; makes suicidal gestures
- What type of personality disorder …………

Avoidant PD

- Maher is 23 years old his mother noticed that he is socially inhibited and oversensitive to negative evaluation; avoids occupations that involve interpersonal contact because of fears of criticism or rejection; he avoids relationships with others unless guaranteed to be accepted unconditionally; feels inadequate and views self as socially inept and unappealing; unwilling to take risks or engage in new activities if they may prove embarrassing

- What type of personality disorder …………

Dependent PD

- Joseph 45 years old come with his son complaining of his father allows others to take over and run his life; is submissive, clingy, and fears separation; cannot make decisions without advice and reassurance from others; lacks self-confidence; cannot do things on his own; feels uncomfortable or helpless when alone. This behavior is pervasive and dated since he was adolescent.

- What type of personality disorder …………

Obsessive –compulsive PD

- Gehan is a 28 years old house wife has pervasive need for perfectionism that interferes with her ability to complete tasks; preoccupied with details, rules, order, and schedules; excessively devoted to work at the expense of leisure and friendships; rigid, inflexible, and stubborn; insists things be done her way; miserly with money

- What type of personality disorder …………

Thank you for attention