

“Personality Disorder”?



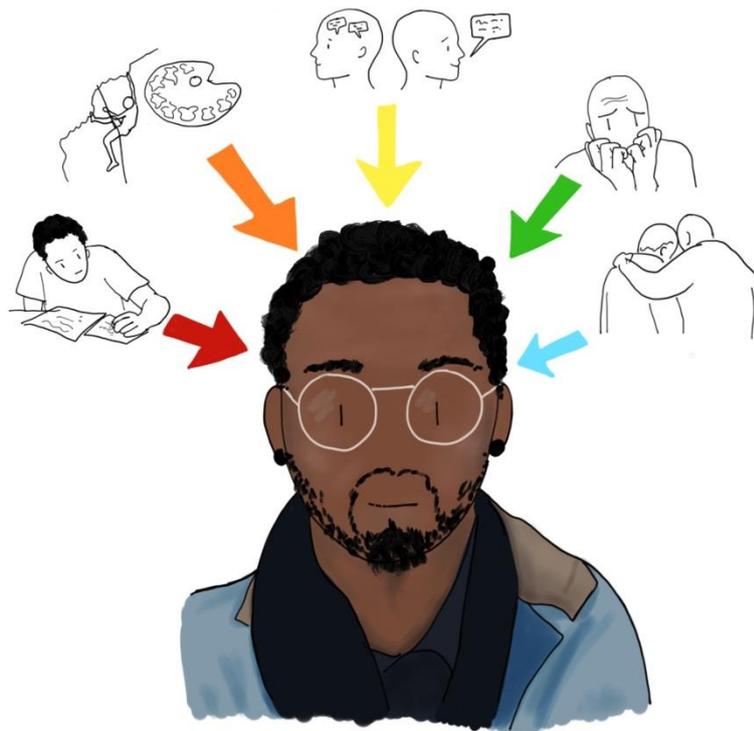
Understanding the diagnosis and how to tell people

A guide created by people who use the Dartmouth Park Unit

If you have been offered this leaflet, you will likely have been given a recent diagnosis of ‘personality disorder’. This leaflet will help you understand what this diagnosis means and suggest some ways in which you might like to tell other people about your diagnosis.

What is a ‘personality disorder’?

A ‘personality’ is the collection of hundreds of personality ‘traits’ or characteristics, which, when mixed together in all their varying degrees and expressions, make us unique as individuals. For example, someone might be very honest and loyal and get upset if they believe other people are acting unfairly or insincerely. Or someone might be shy and standoffish to strangers yet very compassionate and kind to people once they get to know them.



Our personality traits begin forming in childhood and are influenced by our environment, culture, genetics, family, body, intellect, temperament, gender as well as many other factors, including someone's ‘biological sensitivity’. **If someone has a ‘biological sensitivity’ this means that they were born with a brain and nervous system that frequently interprets incoming information as a threat, resulting in strong emotional reactions and sometimes a struggle to cope with change.**

Sometimes people develop a set of very extreme, intense and inflexible personality traits as a response to difficult early life experiences. For example, someone may report difficulties with controlling intense anger even when triggered by seemingly small things, such as someone forgetting

to do something they said they would. This might be interpreted as the person not caring about them and often relates to painful childhood experiences where they felt forgotten, ignored or rejected. Perhaps they were bullied at school or perhaps their primary caregiver had little support and several other children to look after and so their physical and emotional needs were not consistently met. Intense anger is the way their childhood self tried to help them survive repeatedly painful experiences - as a way of defending themselves and desperately trying to get their needs met.



When someone has a set of intense, inflexible personality traits that developed in childhood, have persisted over time and continue to cause significant barriers to a person's wellbeing and ability to manage daily life, people in the medical community will sometimes give them a diagnosis of 'personality disorder'.

The personality 'disorder' is only referring to the set of intense personality traits that create significant problems for the person. That person will still have hundreds of other personality traits that make them unique, interesting individuals and which create no problems for them in their daily life.

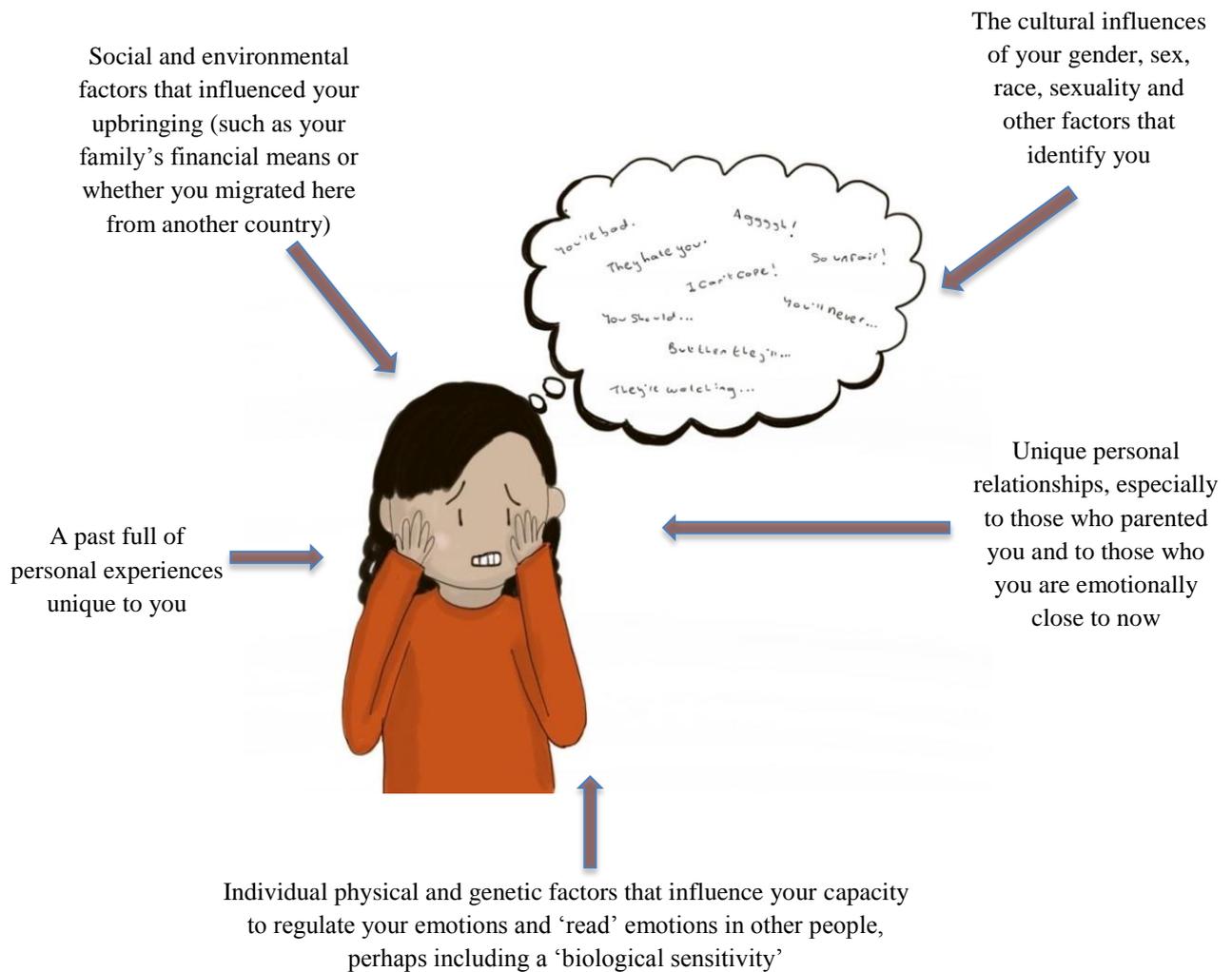
A broad definition of 'personality disorder'

Destabilising early life experiences and an emotionally sensitive temperament can lead to a person developing very intense, inflexible and unhelpful patterns of relating to other people and themselves. These patterns develop in childhood and persist over time causing someone to become overwhelmed with unbearable feelings, and they will often engage in impulsive or self-destructive behaviours as a way of coping. As a result, they will experience severe difficulties managing the demands of daily living and will have frequent emotional crises".

If you have been diagnosed with a personality disorder, it is very important that you understand that the problems you face are not your fault and do not determine your worth as a person. The diagnosis is testament to the fact that your difficulties are both real and serious and specialist help is now available to you.

Your difficulties understood in the context of your life

It can be helpful to understand your difficulties within the context in which you were born and grew up. You will have:



Advantages of receiving a diagnosis

Not everyone will agree with their diagnosis and that's okay - it is just one way of making sense of your difficulties from a medical perspective. A diagnosis does not change who you are - you are still same person you were before.

You will likely notice that people with the same diagnosis will actually be very different to one another, even in their description of their problems and how these play out in their daily lives. You may also realise that all mental disorders share a range of symptoms. For example, some of the defining personality traits of Borderline Personality Disorder are similar to some of the defining features of both Autism Spectrum Disorder and Bi-Polar Disorder. So whilst diagnoses are fairly reliable for most people, at the edges of diagnosis there are uncertainties. Diagnosing people is a skill, and something the medical community are striving to get better at.

With these things in mind, it can be helpful to view a diagnosis as an 'offer' – an offered description of your symptoms and/or a recognition of patterns in your life. It is not a definition and it is not a fact. Instead, **being given a diagnosis is an intention to try and understand you and your problems, and most importantly, to give you access to specialist care and treatment.**

I've been diagnosed, so what do I do now?

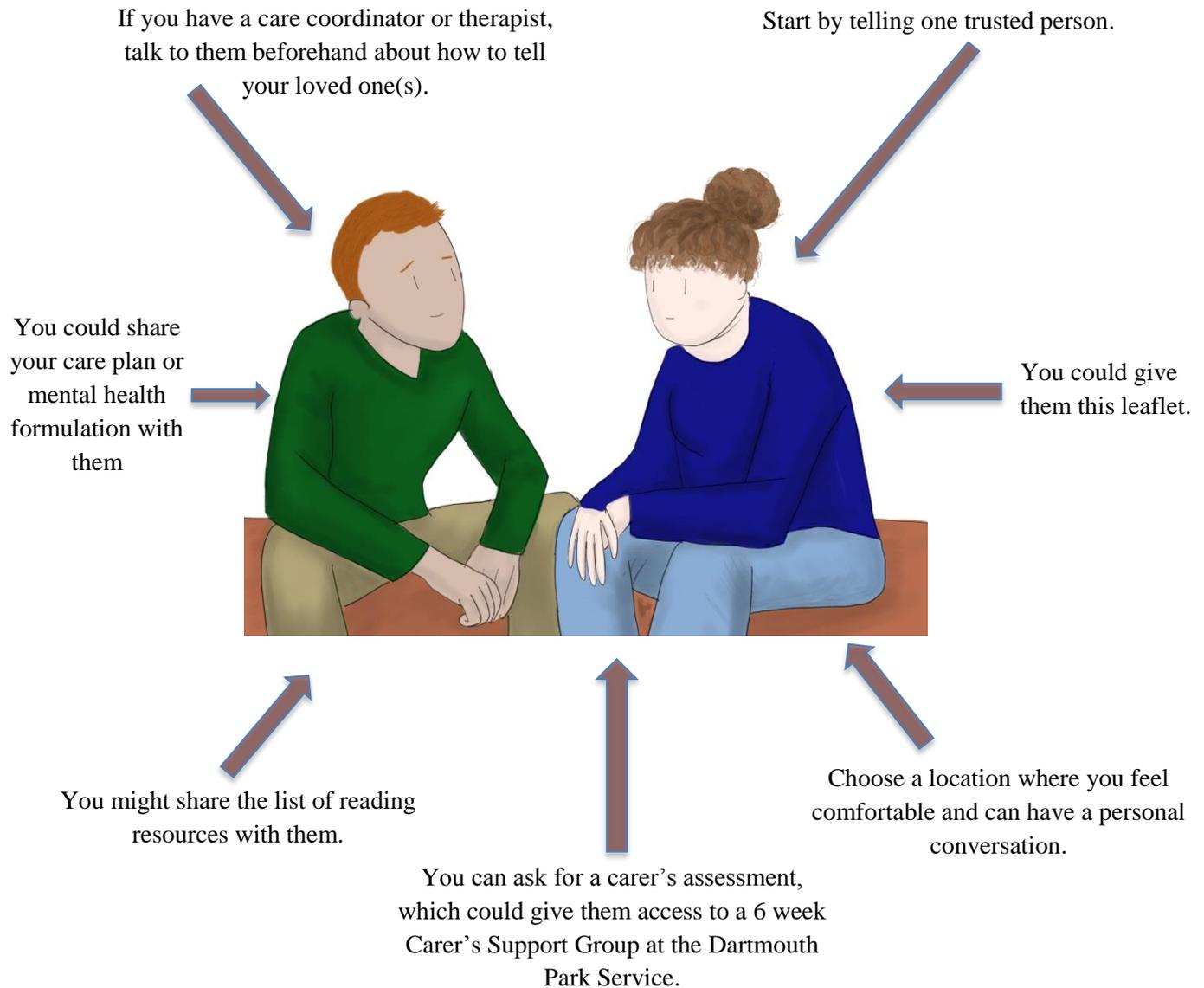
Being diagnosed brings up different feelings in different people. Some people feel relieved and validated to finally be told that what they are going through isn't normal and to be offered help. Other people dislike labels and may have doubts about working with professionals. You may even have frequently changing feelings about it, sometimes feeling comforted by the diagnosis and at other times rejecting it. **This is normal.**



supported are:

Ideally, we would offer everyone specialist treatment or care immediately after being diagnosed. Unfortunately, in the current financial climate, this is often not possible so you may be placed on a waiting list before being able to see a specialist worker on a regular basis. This can understandably feel very frustrating and be hard to accept, especially after finally receiving a diagnosis, which tends to bring up strong emotions in people and sometimes painful childhood memories.

Therefore, in the meantime it is really important that you find other ways to feel supported until you can start working regularly with your care-coordinator or therapist. People who use our service tell us that the most helpful resources for understanding the diagnosis and feeling



If telling your loved ones about the diagnosis doesn't go well, remember:

- **it's not your fault, we can't control others' reactions**
- **be proud of yourself for trying**
- **your loved ones may need time to process things too**
- **people may become more supportive over time**

We hope this leaflet has helped you to start understanding your diagnosis and to consider ways to share it with loved ones, if and when this feels right for you.

Written by people who use the Dartmouth Park Service, illustrated by

