



Mental Health Nursing: Personality Disorders

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A Definition of Intimacy

- A satisfying closeness resulting from positive interpersonal relationships
- Individuals keep separate identities
- Includes sensitivity to other person's needs
- Mutual validation of personal worth



Biological Factors

- Environmental factors may interact with biological factors
 - Lack of anxiety tolerance
 - Aggressiveness
 - Genetic vulnerability
- Inconclusive research shows biological abnormalities similar to those with mood disorder

Developmental Influences

- Life cycle
 - Infancy, preschool years, childhood
 - Preadolescence and adolescence
 - Young, middle, and late adulthood
- Capacity for relatedness results from developmental process
- Lack of attention or stimulation by the parent deprives a child of security



Sociocultural Factors

- Social isolation criteria
 - Stigmatized environment
 - Societal indifference
 - Personal-societal disconnection
 - Personal powerlessness
- Influenced by:
 - Significant others
 - Cultural and socialization practices
 - Self-perceptions



Continuum of Social Responses

- Adaptive Responses:

Solitude, Autonomy, Mutuality,
Interdependence

⇐ Loneliness, Withdrawal,
Dependence ⇒

- Maladaptive Responses:

Manipulation, Impulsivity,
Narcissism

Predisposing Factors



- Precipitating stressors
- Psychological stress, life events, and losses
- Sociocultural stressors, isolation, and loneliness
- Psychological stressors, prolonged or intense anxiety

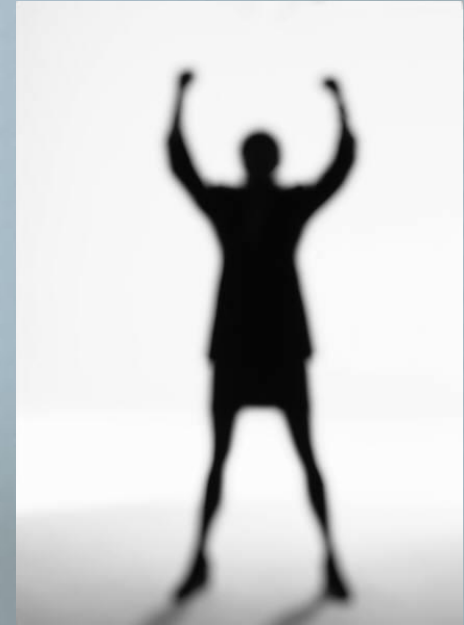
Alleviating Factors

- Broad networks of family and friends
- Social supports may include pets, use of expressive media such as art, music, or writing



Medical Diagnosis

- Antisocial personality disorder
- Borderline personality disorder
- Narcissistic personality disorder



Usually these diagnoses are chronic, long-standing, not based on sound personality structure, and are difficult to change

Behavioral Characteristics of Borderline Personality Disorder

- Relationships are intense and unstable
- Exhibits devaluation, manipulation, dependency, and masochism
- May include manipulative suicide attempts designed to ensure rescue
- Unstable sense of self leads to fear of abandonment and aloneness
- May include depression, anger, paranoia, regression, and dissociation occasionally
- Impulsiveness occurs, usually including substance abuse and promiscuity

Borderline Personality Disorder

- Relationships move through these predictable stages:
 - Idealization and overvaluation ⇒
 - Disappointment when unrealistic needs for maintaining self esteem are unmet ⇒
 - Rationalization and devaluation ⇒
 - Rejection of the other person based on “narcissistic injury”
- Typically, this pattern is repeated- on the job, in marriages, and in friendships

Narcissistic Personality Disorder

- Has pattern of grandiosity, lack of empathy
- Hypersensitivity to evaluation of others, beginning in early adulthood
- May include rageful reactions to criticism, exploitation of others
- Unable to recognize how others feel
- Has sense of entitlement, envy
- May be preoccupied with grandiose fantasies
- Search for constant attention/admiration

Antisocial Personality Disorder

- Occurs in adults with hx conduct disorder
- Usually has poor work record
- Disregard for social norms
- Aggressiveness
- Financial irresponsibility
- Impulsiveness, lying, recklessness
- Inability to maintain close relationships or meet responsibilities
- Lack of remorse for harmful behavior

Assessment of Behaviors

- Manipulation- Relationships are formed to take advantage of others
- Narcissism- Self-centeredness, searching constantly for praise, and may become angry with criticism
- Impulsivity- Unpredictability, unreliability, inability to plan or learn from experience, and overall poor judgment

Examples: Nursing Diagnosis

- Personal identity disturbance r/t early developmental arrest e/b difficulty defining self boundaries
- Self-esteem disturbance r/t physical abuse during childhood e/b verbalized unhappiness with his/her accomplishments
- Impaired social interaction r/t rejection of sociocultural values e/b stated belief that rules do not apply to him/her
- High risk for self-directed violence r/t need to punish self e/b repeated burning of feet when criticized

Nursing Care



- Use realistic, short term goals:
 - Pt will use verbal communication instead of acting out
 - Pt will verbally identify angry feelings when they occur during one-to-one interactions
- Learning to relate more directly and openly causes anxiety
- Increase anxiety-producing activities gradually while increasing environmental supports



Nursing Interventions

- Establish a therapeutic relationship
- Family involvement
- Therapeutic milieu therapy- including expectation of mature, responsible behavior
- Encourage journal writing
- Limit-setting and structure
- Protection from self-harm
- Focusing on strengths
- Behavior modification



Coping Mechanisms

- Projection- places responsibility for antisocial behavior outside of oneself
- Splitting- the inability to integrate the good and bad aspects people/object
 - Expresses contradictions
 - Inconsistent lack of impulse control
 - "All good" or "all bad" perceptions
- Projective identification- part of oneself is projected onto others, and subconsciously the person tends to respond as expected

Nursing Implications

- Staff members must communicate well so consistent messages are given when patients resist rules
- Remember that manipulative patients sometimes lie
- It is important to confront the pt who consciously lies or acts out
- Loss of control may be dealt with by room restriction
- Reality orientation may be necessary

Evaluation



- Patient Outcome/Goal
 - Patient will obtain maximum interpersonal satisfaction by establishing and maintaining self-enhancing relationships with others
- Nursing Evaluation
 - Was nursing care adequate, effective, appropriate, efficient, and flexible?



References



- Stuart, G. & Laraia, M. (2005). Principles & practice of psychiatric nursing (8th Ed.). St. Louis: Elsevier Mosby
- Stuart, G. & Sundeen, S. (1995). Principles & practice of psychiatric nursing (5th Ed.). St. Louis: Mosby