

Stonebriar Psychiatric Services News & Views

Dependent Personality Disorder

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Dependent Personality Disorder

Individuals with a dependent personality disorder often tend to put their needs second to others, and yet at the same time are often able to get others to take care of them and to take responsibility for many areas in their life. They often tend to lack self-confidence and have difficulty in being alone for any length of time. In the past, this personality style has been termed passive-dependent personality because of these characteristics. As far back as Freud, according to one psychiatric text, he described what he termed an "oral-dependent" personality characterized by dependence, pessimism, frequent fear of sexuality in a number of areas, lack of confidence, passivity, easily being influenced, and difficulty in persevering with tasks through difficult times. His description is actually quite similar to many of the characteristics described in the current DSM-IV-TR diagnostic manual.

It is generally accepted that dependent personality disorder tends to be more common in women than in men, and one study that examined personality disorders overall found that approximately 25% of all personality disorders fall into this category. It has also been found in some studies that individuals with chronic physical illness during her childhood may be more prone to the disorder. Although all of the factors for this are not clear, in my experience it often seems related to the fact that because of that childhood illness parents frequently tended to be overprotective with much of that dependence being learned.

In their daily lives, individuals with dependent personalities are often characterized by frequent and rather consistent behavior characterized by dependence upon others and frequently being submissive, particularly if conflict occurs. These individuals struggle in making decisions and often seek a great deal of advice and reassurance from others to the point that frequently they seem to want others to make the decisions for them. Because of this timidity, they frequently avoid positions of leadership, even if they might have the ability to handle the position. The dependent individual also has difficulty in initiating tasks on their own and sticking with them, even though they may be able to do this for other people when the tasks are assigned. Because individuals with dependent personalities do not like to be alone, they frequently may seek out individuals in relationships with stronger personalities on whom they feel they can depend and lean on for strength. Unfortunately, this may also set the individual up for being involved in an abusive relationship, whether it is emotional, verbal, physical, or sexual. Not infrequently one finds that these individuals have rarely been without a boyfriend or girlfriend from their teenage years on into adulthood. Negative thinking, generally seen as rather global pessimism, along with self-doubt and fears of expressing either sexual or aggressive feelings are quite characteristic as well.

Diagnosis

When seen by a psychiatrist or counselor, the individual with a dependent personality disorder frequently tries to please the interviewer, is extremely cooperative, and often has difficulty in initiating any part of the discussion, but rather welcomes questions in looking for guidance in the interaction. Regarding diagnosis, the individual with dependent personality disorder is described in the DSM-IV-TR as having "a pervasive and excessive need to be taken care of that leads to submissive and clinging behavior and fears of separation, beginning by

early adulthood and present in a variety of contexts." Regarding symptoms, the individual needs to display five or more of the following characteristics: 1) has difficulty making everyday decisions without a great deal of advice and reassurance from others; 2) needs others to assume responsibility for most areas of his or her life; 3) has difficulty in expressing disagreement with others because of a fear of losing their support or approval; 4) has difficulty initiating projects or doing things on his or her own initiative because of their lack of self-confidence; 5) goes to excessive lengths to obtain nurturance and support from others, to the point of volunteering to do things that are unpleasant; 6) feels uncomfortable or helpless when alone because of fears of being unable to care for herself; 7) urgently seeks another relationship as a source of care and support when a close relationship ends; and 8) is unrealistically preoccupied with fears of being left to take care of himself or herself.

It should be kept in mind that there are many psychiatric conditions which may show characteristics of being overly dependent upon others. It is often a prominent feature of both borderline and histrionic personalities, although the individual with a dependent personality disorder tends to have longer-term relationships and does not tend to be as overtly manipulative as the former personality styles. Dependent traits may develop in those who have various anxiety disorders, although the anxiety tends to predominate as the major symptom and problem.

Treatment and Prognosis

The treatment for dependent personality disorder generally tends to be quite successful and often requires a variety of treatment approaches. Insight oriented psychotherapy often helps the individual understand better some of the roots of her problem, and with encouragement and support from the therapist the individual frequently becomes more independent and assertive. Other types of therapy that have often been used with success include behavioral therapy, family and group therapy, as well as assertiveness training. A point of difficulty in treatment may occur when the individual begins looking at significant relationships in their life that may tend to be abusive or unhealthy. Dependent upon the progress already made in treatment, the individual may or may not be able to handle the anxiety associated with the implied need to either choose to get out of the relationship or more directly deal with the conflict and issues involved with it. This is where the therapist needs to show significant empathy with the anxiety of the patient, while also providing a good deal of support to help the patient get to the position where they can address these issues.

Medications may be helpful in dealing with specific symptoms, such as anxiety or mood disorders associated with the dependent personality, although there is no specific medication available to treat the personality disorder itself. As previously noted in other newsletters, this would generally tend to be the case with most personality disorders.

Regarding prognosis without treatment, most sources would agree that there is not a great deal known about the course of dependent personality disorder. For most individuals, their progress and success in their occupation tends to be limited, and they frequently experience significant limitations in their social interactions and relationships. They may be more prone to developing anxiety or depression than the average individual and particularly if there is the loss of a significant person in their life. These kinds of life events are often what bring the individual with a dependent personality disorder into treatment, but if you recognize yourself or a loved one in this pattern, you might suggest that they seek help before it is triggered by a crisis.



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