
MODULE 50

Dissociative, Personality, and Somatoform Disorders

Module Preview

In dissociative disorders, conscious awareness becomes separated from previous memories, thoughts, and feelings. Those afflicted with a dissociative disorder may even have two or more distinct personalities.

Personality disorders are characterized by inflexible and enduring behavior patterns that impair social functioning. The most common is the remorseless and fearless antisocial personality.

Somatoform disorders are psychological disorders in which the symptoms take a bodily form without apparent physical cause.

Module Guide

Dissociative Disorders

- ▶ Lecture: Psychogenic Versus Organic Amnesia
- ▶ Exercise: The Curious Experiences Inventory
- ▶ Videos: Module 23 of *The Brain* series, 2nd ed.: *Multiple Personality*; Video Clip 31 of *Digital Media Archive: Psychology*, 1st ed.: *Multiple Personality Disorder*

50-1. *Describe the symptoms of dissociative disorders.*

In **dissociative disorders**, a person appears to experience a sudden loss of memory or change in identity, often in response to an overwhelmingly stressful situation. A person may have no memory of his identity or family. Conscious awareness is said to *dissociate* or become separated from painful memories, thoughts, and feelings. Dissociation itself is not uncommon. On occasion, many people may have a sense of being unreal, of being separated from their body, or of watching themselves as if in a movie. Facing trauma, detachment may protect a person from being overwhelmed by anxiety.

- ▶ Lecture: The Dissociative Disorders Interview Schedule and Dissociative Identity Disorder
- ▶ Videos: Module 23 of *The Brain* series, 2nd ed.: *Multiple Personality*; Video Clip 31 of *Digital Media Archive: Psychology*, 1st ed.: *Multiple Personality Disorder*

50-2. *Define dissociative identity disorder, and discuss the controversy regarding its diagnosis.*

Dissociative identity disorder (DID) is a rare disorder in which a person exhibits two or more distinct and alternating personalities, with the original personality typically denying awareness of the

other(s). Skeptics question whether DID is a genuine disorder or an extension of our normal capacity for personality shifts. Or is it merely role-playing by fantasy-prone individuals? They find it suspicious that the disorder became so popular in the late twentieth century and that outside North America it is much less prevalent. (In Britain, it is rare, and in Japan, it is essentially nonexistent.) Some argue that the condition is either contrived by fantasy-prone, emotionally variable people or constructed out of the therapist-patient interaction. Other psychologists disagree and find support for DID as a genuine disorder in the distinct brain and body states associated with differing personalities. Even handedness sometimes switches with personality.

Personality Disorders

- ▶ Lecture: Narcissistic Personality Disorder
- ▶ Exercises: Schizotypal Personality Questionnaire; Antisocial Personality Disorder
- ▶ Feature Film: *In Cold Blood*
- ▶ Videos: Module 35 of *The Mind* series, 2nd ed.: *The Mind of the Psychopath*; Video Clip 30 of *Digital Media Archive: Psychology*, 1st ed.: *The Mind of the Psychopath*
- ▶ Instructor Video Tool Kit: *Trichotillomania: Pulling Out One's Hair*

50-3. *Contrast the three clusters of personality disorders.*

Personality disorders are psychological disorders characterized by inflexible and enduring behavior patterns that impair social functioning. One cluster expresses anxiety (e.g., *avoidant*), a second cluster expresses eccentric behaviors (e.g., *schizoid*), and a third exhibits dramatic or impulsive behaviors (e.g. *histrionic* and *narcissistic*).

50-4. *Describe the behaviors and brain activity associated with antisocial personality disorder.*

The most troubling of the personality disorders is the **antisocial personality disorder**, in which a person (usually a man) exhibits a lack of conscience for wrongdoing, even toward friends and family members. This person may be aggressive and ruthless or a clever con artist. Brain scans of murderers with this disorder have revealed reduced activity in the frontal lobes, an area of the cortex that helps control impulses. A genetic predisposition may interact with environmental influences to produce this disorder.

Somatoform Disorders

- ▶ Lecture: Factitious Disorder
- ▶ Instructor Video Tool Kit: *Beyond Perfection: Female Body Dysmorphic Disorder*

50-5. *Describe somatoform disorders, and explain how the symptoms differ from other physical symptoms.*

Somatoform disorders are psychological disorders in which the symptoms take a bodily (somatic) form without apparent physical cause. One person may have complaints ranging from dizziness to blurred vision. Another may experience severe and prolonged pain. **Conversion disorder** is a rare somatoform disorder in which anxiety is presumably converted into a physical symptom. A person experiences very specific genuine symptoms for which no physiological basis is found. These may include unexplained paralysis, blindness, or an inability to swallow. In **hypochondriasis**, a person interprets normal physical sensations as symptoms of a disease. For example, a stomach cramp or a headache may be viewed as evidence of a dreaded disease.