Paranoid Personality Disorder

Your Name

Institution

# Question1

How would you characterize your personality? Do you think your personality will be stable or do you think it will change? If the latter, how and why?

Paranoid Personality Disorder is a psychological disorder occurs mostly in early adulthood. A person who is diagnosed with a paranoid personality disorder becomes suspicious of others. With reference to this, I think paranoid personality disorder would affect my way of thinking, my feelings, and my actions. Sometimes it becomes difficult for me to trust people, I am always looking for signs of hostility and betrayal in people. In paranoid personality disorder, the patients are always restless.

How this disorder is affecting my personality? I think a patient of paranoid personality disorder is frightened in most social situations. It has also affected me in the same manner. I feel awkward in social situations. I believe that this kind of personality can change with time. There are many strategies present to deal with a paranoid personality disorder. I think person-center therapy is most effecting in the case of paranoid personality disorder. Person-centered therapy suggests that “I am the expert of myself and only I can find a solution which is best to overcome my issues” (Cepeda, 1990).

# Question 2

How are your cognitive abilities over time? Does dementia run in your family? Do you have other risk factors that might affect the course of your cognitive functioning in late life (e.g., heavy alcohol use, diabetes, etc.)?

Cognitive abilities are skills which are related to the brain of a person. Paranoid personality disorder does affect a person's perspective of the world. It has also affected my cognitive abilities, lately it has become hard for me to perform some basic tasks. It does not only affect you personally but also professionally. A person may forget the name of a person he/she works with. Due to paranoid personality disorder, a person even forgets the basic steps which are required to perform his duties in the workplace.

In addition to paranoid personality disorder, dementia also runs in my family. My grandfather and my father had memory-related problems. According to mental health care specialists, a paranoid personality disorder is caused due to family history, environment, genetics, and family life. Risk factors in paranoid personality disorder are not only subjected to early childhood, but it can also trigger some mental illness in adulthood. To cope with the feeling of mistrust and paranoia, a person might turn to drugs and alcohol abuse. And if such habits are adopted, it will further affect the cognitive abilities of a person. The person diagnosed with paranoid personality disorder develops anxiety and stress disorder due to overthinking. Hence, if the patient is later diagnosed with some chronic disease, it will further add to dis-functionalities of cognitive abilities.

# Question 3

Do you have protective factors (e.g., education, cognitive complexity, emotional stability, etc.)?

Protective factors for paranoid personality disorder depends on the individual. In the first step, a person has to accept help and treatment for its condition. This step is very difficult for a person who has a paranoid personality disorder, as it is hard for a patient to even trust a mental health professional. To overcome this issue of distrust, I had to build and seek protective factors. In my opinion, person-centered therapy is the best strategy to overcome paranoid personality disorder. So to treat paranoid personality disorder, a therapist first gains the trust of his patient, and then try to help him cope with his emotional stability and cognitive complexities (SM Southwick, 1993).

# Question 4

How do you think your mental health will change across your lifespan?

Paranoid personality disorder worsens with age. Action, behaviors, and thinking of a person which are affected due to disorder. Prolonged encouragement of such behaviors may result in continuous personality development. In some cases, mental health recovers with maturity and adoption to responsibilities. Moreover, it also depends on the type of treatment a person is getting. I think with proper education and incorporating the ability to cope with the learning of mental health issue, my condition will improve with time.

# References

Cepeda, L. (1990). Principled and instrumental nondirectiveness in person-centered and client-centered therapy. *Person-Centered Review*.

SM Southwick, R. Y. (1993). Personality disorders in treatment-seeking combat veterans with posstraumatic stress disorder. *The American Journal of Psychiatry*.