

Paranoid Personality Disorder

A pervasive distrust and suspiciousness of others such that their motives are interpreted as malevolent, beginning by early adulthood and present in a variety of contexts, as indicated by four (or more) of the following:

1. suspects, without sufficient basis, that others are exploiting, harming, or deceiving him or her.
2. is preoccupied with unjustified doubts about the loyalty or trustworthiness of friends or associates.
3. is reluctant to confide in others because of unwarranted fear that the information will be used maliciously against him or her.
4. reads hidden demeaning or threatening meanings into benign remarks or events.
5. persistently bears grudges (i.e., is unforgiving of insults, injuries, or slights).
6. perceives attacks on his or her character or reputation that are not apparent to others and is quick to react angrily or to counter-attack.
7. has recurrent suspicions, without justification, regarding fidelity of spouse or sexual partner.

Schizoid Personality Disorder

A pervasive pattern of detachment from social relationships and a restricted range of expression of emotions in interpersonal settings, beginning by early adulthood and present in a variety of contexts, as indicated by four (or more) of the following:

1. neither desires nor enjoys close relationships, including being part of a family
2. almost always chooses solitary activities
3. has little, if any, interest in having sexual experiences with another person
4. takes pleasure in few, if any, activities

5. lacks close friends or confidants other than first-degree relatives
6. appears indifferent to the praise or criticism of others
7. shows emotional coldness, detachment, or flattened affect
8. considers relationships to be more intimate than they actually are

Schizotypal Personality Disorder

A pervasive pattern of social and interpersonal deficits marked by acute discomfort with, and reduced capacity for, close relationships as well as by cognitive or perceptual distortions and eccentricities of behavior, beginning by early adulthood and present in a variety of contexts, as indicated by five (or more) of the following:

1. ideas of reference (excluding delusions of reference)
2. odd beliefs or magical thinking that influences behavior and is inconsistent with subcultural norms (e.g., superstitiousness, belief in clairvoyance, telepathy, or “sixth sense”; in children and adolescents, bizarre fantasies or preoccupations)
3. unusual perceptual experiences, including bodily illusions
4. odd thinking and speech (e.g., vague, circumstantial, metaphorical, overelaborate, or stereotyped)
5. suspiciousness or paranoid ideation
6. inappropriate or constricted affect
7. behavior or appearance that is odd, eccentric, or peculiar
8. lack of close friends or confidants other than first-degree relatives.
9. excessive social anxiety that does not diminish with familiarity and tends to be associated with paranoid fears rather than negative judgments about self.

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USING DSM-IV-TR

Health care providers often use language unfamiliar to clients and their families. Explain *ideas of reference* in such a way that clients and family members can understand its meaning in relationship to schizotypal personality disorder.