

ANFUSINA: JOURNAL OF PSYCHOLOGY

http://ejournal.radenintan.ac.id/index.php/anfusina DOI: // dx.doi.org/10.24042/ 00202471908400 Volume 7, Number 1, April 2024

Causal Dynamics of Paranoid Personality Disorder

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Article Information:

Received: 12 January 2024 Revised: 13 February 2024 Accepted: 14 March 2024

Abstract

Personality disorder is one of the chronic psychological problems because it affects many aspects of individuals. Individuals with personality disorders are usually unaware that they are suffering from psychological problems. Paranoid personality disorder is a specific type of personality disorder. The characteristic of this disorder is an overbearing suspicion of others. The exact cause of this personality disorder is unknown because there have been few studies on it. The purpose of this study is to discover and describe the causes of the subject's paranoid personality disorder. This study is qualitative and has a case study design. The subject of this study is a 29-year-old man with paranoid personality The data collection techniques employed were interviews, observations, psychological assessments, and documentation. Thematic analysis was used to examine the data. The findings revealed that traumatic events in childhood were the primary cause of the subject's personality disorder. The events involved parental violence and being a victim of bullying. The subject struggled to adjust and form social relationships with others as a result of his early life experiences. He had difficulty making friends and was bullied throughout his school years. These painful experiences with others convinced him that interacting with others was dangerous, so he continued to suspect everything the people around him did. The finding demonstrates how traumatic events from the past can cause paranoid personality disorder.

Causal Dynamics of Paranoid Personality Disorder

Abstrak

Gangguan kepribadian merupakan salah satu masalah psikologis yang kronis karena berhubungan dengan berbagai aspek dalam diri individu. Biasanya, individu yang mengalami gangguan kepribadian tidak menyadari bahwa dirinya mengalami masalah psikologis. Salah satu jenis gangguan kepribadian adalah gangguan kepribadian paranoid. Ciri khas dari gangguan ini adalah kecurigaan yang berlebihan terhadap orang lain. Belum diketahui penyebab pasti munculnya gangguan kepribadian ini karena belum banyaknya penelitian vang meneliti tentang gangguan ini. Penelitian ini bertujuan untuk mengetahui dan menggambarkan perjalanan penyebab munculnya gangguan kepribadian paranoid pada subjek. Penelitian ini merupakan penelitian kualitatif dengan desain studi kasus. Subjek dalam penelitian ini adalah satu orang laki-laki berusia 29 tahun yang mengalami gangguan kepribadian paranoid. Teknik pengumpulan data yang dilakukan dalam penelitian ini adalah wawancara, observasi, tes psikologi dan dokumentasi. Teknik analisis data yang dilakukan adalah analisis tematik . Hasil penelitian menunjukkan bahwa kejadian traumatis di masa kecil menjadi penyebab munculnya gangguan kepribadian pada subjek. Kejadian yang terjadi meliputi kekerasan dari orang tua dan menjadi korban bully. Pengalaman di early life ini membuat subjek kesulitan untuk menyesuaikan diri dan menjalin hubungan sosial dengan orang lain. Ia sulit berteman dan juga di-bully saat menempuh pendidikan. Pengalamanpengalaman yang menyakitkan saat berinteraksi dengan orang lain inilah yang membuat ia meyakini bahwa berinteraksi dengan orang lain tidak aman sehingga ia terus mencurigai apapun yang dilakukan oleh orang di sekitarnya. Hal ini menunjukkan bahwa kejadian traumatis di masa lalu dapat menjadi penyebab munculnya gangguan kepribadian paranoid.

Keywords: Etiology, Personality Disorder, Paranoid

Introduction

Personality disorders are chronic patterns of emotions and behaviors that deviate significantly from the existing habits and expectations in life, whether group or individual norms. Individuals with personality disorders tend to behave rigidly, inflexibly, and maladaptively, resulting in destructive feelings of sadness in victims (Bouthier & Mahé, 2019). People with personality disorders are much more likely to refuse psychiatric treatment and deny their symptoms than those with anxiety, depression, or obsessive-compulsive disorders. Personality disorder symptoms are aloastic or acceptable to the individual's ego. People with personality disorders do not feel anxious about their maladaptive behaviors because they

do not routinely feel suffering from what society perceives as their symptoms, so they are often considered unmotivated for treatment and unsuitable for recovery (Bernstein & Useda, 2007).

Paranoid personality disorder is a mental illness in which a person has a long-standing distrust and suspicion of others but lacks a psychotic background, such as schizophrenia (Bernstein & Useda, 2007). A high level of suspicion characterizes paranoid personality disorder. Such a person may be aggressive, and others may perceive him/her as an aggressor, forcing him/her to defend himself/herself. He acts rebellious and arrogant in order to maintain his self-esteem, frequently threatening others as a result of his hostile projections. As a result, he loses friends and gains numerous enemies (Maramis, 2009).

The prevalence of paranoid personality disorder ranges between 1.21 and 4.4% (Royle Lee, 2007). People with paranoid personality disorder are constantly suspicious of others. People with this diagnosis believe they are being mistreated and exploited by others, so they behave in mysterious ways and are constantly on the lookout for signs of deception or abuse. They are frequently violent and react angrily to what they perceive as insults. Such people are hesitant to trust others and prefer to blame and hold grudges even when they are at fault. They are extremely jealous and may question their partner's or lover's loyalty without reason (Davison, Neale & Kring, 2010).

Patients with paranoid personality disorder have unfounded suspicions about the loyalty and trustworthiness of others. They may perceive negative or threatening meanings in the circumstances. For example, they may believe that their neighbor's dog is intentionally barking in the morning to annoy them (Davison, Neale & Kring, 2010). This diagnosis differs from paranoid schizophrenia in that other symptoms of schizophrenia, such as hallucinations, are absent, and social and occupational functioning is unaffected. There is also no cognitive disorganization, which is typical of schizophrenia. This

diagnosis differs from delusional disorder in that full delusions are not present. Paranoid personality disorder is more common in males and is associated with schizotypal, borderline, and avoidant personality disorders (Morey, 1988 in Davison, Neale & Kring, 2010).

The exact cause of paranoid personality disorder remains unknown. Some behaviors influenced by certain social cultures or life circumstances may be misinterpreted as paranoid symptoms, which can be better determined through the clinical evaluation process. Members of minority groups, immigrants, political and economic refugees, or people from different ethnic backgrounds, for example, may exhibit guarded or defensive behaviors as a result of unfamiliarities, such as language barriers or a lack of knowledge of the rules in the majority society. Certain groups could be misinterpreted as paranoid.

A paranoid personality disorder can begin in isolated childhood or adolescence, poor relationships with others, social anxiety, poor school performance, hypercreativity, odd ideas and language, and a sense of entitlement. Clinically, the disorder is more common in males (Kaplan & Sadock in Wiguna, 2010). There has been little investigation into environmental factors as one of the causes of paranoid personality disorder (Johnson et al., 2000). However, the disorder's onset is most likely due to a combination of biological and psychological factors.

One longitudinal study found that traumatic childhood events, such as child abuse and neglect, contribute significantly to the development of paranoid personality disorder (Royce Lee, 2017). Johnson et al. (1999) discovered that children with a history of abuse and neglect had a significantly higher risk of developing a personality disorder, which includes paranoid disorder. Physical abuse during childhood has been linked to the later development of paranoid personality disorder. In general, research suggests that both genetic and environmental factors play an important role in the

development of the attitudes that make up a personality disorder. Genetic factors, such as a family history of mental disorders like schizophrenia and delusional disorder, increase the risk of developing paranoid personality disorder.

There is limited research on paranoid personality disorder (Lewis, 2017). Even with the same diagnosis, the causes of psychological problems can vary from person to person. As a result, the purpose of this study was to obtain an overview of the course of the causes of paranoid personality disorder in subject X.

Methods

This research employs a qualitative research method with a case study approach. The case study approach can assist researchers in obtaining a comprehensive and integrated understanding of the interrelationship of data and factors in a specific case. The special case in question concerns individuals, the role of small groups, organizations, communities, nations, and others (Punch, 1998; Poerwandari, 2013). The data-collecting techniques were clinical interviews, observation, documentation, and psychological assessments. Furthermore, this study employed the triangulation of time and technique. The subject in this study was a 29-year-old male.

Furthermore, this study employed thematic analysis as a data analysis technique. Thematic analysis allows researchers to identify "patterns" that others cannot see (Boyatzis, 1998; Poerwandari, 2013). After discovering "patterns," the researcher categorized these "patterns" using labels, definitions, or descriptions. Thematic analysis is a qualitative information processing method that converts qualitative information into qualitative data based on the researcher's needs. Thematic analysis is a coding process resulting in a list of themes, models of complex themes or indicators, qualifications related to these themes, or something in the middle or a combination of these. Effective techniques are used in research that aims to

explore qualitative data in detail in order to identify patterns in a phenomenon and explain how a phenomenon can occur through the researcher's eyes (Fereday & Muir-Cochrane, 2006 in Heriyanto, 2018).

Result and Discussion

Based on the results of data collection through observation, interviews, documentation, and psychological assessments, the results show that two themes cause the emergence of paranoid personality disorder in the subject, namely parenting and bullying, which will be explained in the following discussion:

1. Parenting

Parenting styles may be one of the causes of future psychological problems in children. How parents treat their children influences how they perceive themselves. Children's selfconfidence will increase if their parents treat them appropriately (Yusuf, Sudarman, & Syafrimen, 2020). Abusive and authoritarian parents who impose rigid rules and torturous punishments traumatize their children not only physically but psychologically. Rini's (2002) research found that traumatic emotional experiences with parents can promote the development of personality disorders in children in the future. The research findings support this claim about the subject. The subject's father put a lot of effort into his education because he was the family's first child and needed to be strong and reliable. However, the subject believed that his father's upbringing was too harsh, which made him depressed. The subject became afraid and avoided his father.

The subject frequently felt treated unfairly by his parents, particularly the father. The subject believed that his father was more affectionate to his younger brother than to him. The subject's younger brother did not receive the same harsh treatment from his father. Although the subject's father's harsh treatment decreased as

he got older, the subject continued to consider it unfair because his younger brother did not receive the same treatment as he did. In addition, the subject believed that his father paid more attention to his younger brother than to him. For example, when the subject desired something, his father put his brother's needs ahead of his own. The subject really liked the watch and asked his father to buy it for him, but his father did not want to buy it because the subject was already grown up, so his father only bought the watch for his younger brother and not the subject.

After graduating from high school, the subject lived with an uncle. The subject worked as the warehouse manager for his uncle's shop. While living with his uncle, the subject frequently received harsh treatment, particularly abusive words. His uncle frequently described the subject as stressed and crazy because he frequently told and complained to him about work and the treatment of his coworkers. The subject's uncle never believed anything the subject said. The subject's uncle believed that the subject was an insincere child who complained excessively. The subject worked for his uncle for about ten years before moving to Surabaya to find work elsewhere. The subject's younger brother took over the subject's position, and the subject believed that his uncle treated his younger brother better. This only made the subject feel more unfairly treated by everyone. Children who experience violence in childhood are more likely to develop paranoid personality disorder as adults (Royle Lee, 2007). The subject experienced an incident in which his father hit and whipped him with a belt after he made a mistake. Not only that, but the subject's father spun him around in an inverted position, with his legs on top and his head on the bottom.

2. Bullying

In addition to parental and violence by other people, interactions between children and their peers contribute to the development of paranoid personality disorder. According to Antila et al. (2017), children who have experienced bullying are more

likely to develop personality disorders than children who have not. Vaughn et al. (2010) also found a connection between childhood bullying and paranoid personality disorder in adulthood. This also occurred to the subject. Bullying by classmates began in kindergarten and continued until the subject reached high school. Even though the subject has changed schools in a different city, he still had the same experience. Bullying is common among adolescents, particularly at school (Pertiwi, 2019). The subject's bullying prevented him from getting along well with his other classmates and making him feel rejected. The subject felt that no one wanted to be close or friends with him. During school, the subject admitted that he only remembered unpleasant events. The subject recalled how his friends ostracized and mocked him. The subject never joined a group like most teenagers. The subject believed that social relationships would only hurt him. The subject also felt like no one liked him at school, so he spent more time alone. As a result, the subject was unfamiliar with interacting with large groups of people.

The described experiences caused the subject to develop negative cognitive schemes about the people around him. The subject is frequently suspicious of others. The subject interprets changes in behavior demonstrated by others as a form of dislike for him, and there was a negative incident underlying the change in behavior. Others always made the subject feel intimidated and disrespected. Despite the lack of supporting evidence, the subject continues to believe his thoughts. The subject is overly cautious of other people's behavior, despite having no bad intentions, and is suspicious of good behavior by others. The subject always believes that there is a hidden intention behind others' kindness. The subject also sees others' kindness as a form of pretense and insincerity due to the subject's sensitivity, which causes him to overthink the actions of others who have no intention of causing him harm. Views like this cause problems in the subject's social relationships with others. The subject does not have close friends and appears to form close relationships with others out of fear of being hurt by them.

The subject actually has cognitive abilities comparable to other people his age. However, the subject finds it difficult to assess his abilities. The subject wishes to succeed but does not make an effort to develop self-competence in order to achieve these objectives. The subject is capable of performing tasks well, but he is constantly feeling inferior to others. The subject claimed that his failure to meet work targets was due to sabotage by his coworkers. This is what prevents the subject from maximizing his potential because he is unable to evaluate his competence, resulting in the lowest work performance among his colleagues.

The subject feels unpopular among his coworkers. Not only are colleagues involved, but so are superiors, subordinates, and people who interact with the subject on a daily basis. These beliefs prevent the subject from forming relationships with others and working effectively in the workplace. The subject has changed jobs three times due to the same problem, but he has not realized that his discomfort at work or in getting along with others is the result of his thinking. The subject believes that he is a victim of the unpleasant treatment that others give him. However, there is no evidence to support this claim. The following is a description of the subject's journey through the causes of the emergence of his personality disorder.

The findings revealed that there were two primary causes of personality disorder in the subject: parenting and bullying. In addition to receiving violence from his parents, the subject received no support from them. Parents play an important role in the development of their children's personalities (Ardiati, 2018). The child's future is heavily reliant on his experiences with his parents (Achmad et al., 2010). When parents pay special attention to their children's physical and psychological needs, they grow into children with positive personalities and character traits.

In contrast, if parents do not care for, restrain, or even abuse their children, they will grow up to have psychological and behavioral issues. Violence against children will leave them feeling helpless (Muarifah, Wati, & Puspitasari, 2020). When parents compare their children to other siblings or children, it has an impact on their future development. This type of parental behavior will cause children to lack confidence and distrust their surroundings (Oktariani, 2021). This is what happened to the subject, as described earlier.

Not only was the subject bullied at school, but it was also caused by his parents. The subject has been dealing with this situation since kindergarten. However, when he told his parents, he received no support. This happens frequently to children. Parents misinterpret bullying in school. Parents are unaware of the long-term consequences of childhood bullying (Bili & Sugito, 2021). Not only did the abuses begin in childhood, but they continued into high school. This also exacerbates the subject's distrust of other people and his surroundings, resulting in the emergence of paranoid personality disorder. These findings are consistent with previous research indicating that bullying will cause psychological problems in victims in the future (Amelia, Suryani, Hendrawati, 2022).

Conclusion

This study focuses on one subject with paranoid personality disorder. There are still few studies that explain the dynamics of how personality disorders emerge. The research and data analysis results show that there are two major causes for the emergence of paranoid personality disorder in the subject: authoritarian and abusive parenting. When the subject made mistakes, his parents frequently resorted to violence against him. Furthermore, bullying is a contributing factor to the subject's psychological problems. From kindergarten to high school, the subject suffered from bullying. The dynamics of this experience made the subject believe that there was no one he could trust to keep him safe. He became overly suspicious of others, including new people he knew. This is a symptom of paranoid personality disorder.

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