

Analysis of Dependent Personality Disorder and Family Therapy

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Abstract: Dependent Personality Disorder (DPD) is a mental health condition characterized by an excessive need for others' approval and a strong reliance on others for emotional and psychological support. People with DPD often struggle with making everyday decisions, experience fears of abandonment, and have difficulty initiating tasks independently. Family therapy, a branch of psychotherapy, has gained increasing recognition as an effective approach for individuals with Dependent Personality Disorder. Family therapy focuses on not only the individual but the family system as a whole. This study employs a literature research method to investigate the intricate relationship between DPD and Family Therapy, including some case studies about DPD and family therapy, meanwhile analyzing the interaction between them. Ultimately, the findings strongly affirm that considering aspects such as childhood experiences, preventative measures, and the patient body of DPD, the synergy between DPD and family therapy significantly influences human beings' daily lives.

Keywords: Clinical Psychology, Family therapy, Dependent Personality Disorder, Childhood trauma

1. Introduction

The prevalence of DPD in the US is less than 1%, this number might be bigger because most of the DPD patients won't seek medical advice. There are a lot of risk factors for DPD, such as genetics, childhood trauma, having overprotective parents, or having a long-term toxic relationship, etc [1]. DPD is commonly comorbid with other mental disorders, such as depression. What's more, symptoms of DPD must shown in early childhood [2].

The goal of family therapy is to enhance the growth of each family member as well as the family as a whole. One of the most frequently used types of family therapy in this research is Structural-strategic family therapy (SSFT), which is a brief and solution-focused approach that focuses on restructuring the family's organization and communication patterns [3]. It emphasizes identifying and modifying maladaptive roles and boundaries within the family system to bring about positive change. This therapy is particularly effective for addressing issues related to power struggles, boundary problems, and family dynamics. During family therapy, the family is seen as an organized system where each member contributes to shaping behavior.

Dependent Personality Disorder symptoms, often stemming from childhood trauma, find effective treatment in family therapy. Furthermore, family therapy serves as a preventive measure against DPD development, and its efficacy is heightened by the close reliance of DPD patients on their family

members. Academic Paper Reading and analysis are used in this paper. After reading each research paper, the content of it was summarized and the data within the experiment was used to determine the subtle relationship between DPD and family therapy. This study can provide effective prevention and comprehensive support for treating DPD and addressing the root causes of trauma symptoms in children.

2. Overview of Dependent Personality Disorder

The low prevalence of DPD is attributed to its challenging diagnosis and patients' reluctance to seek medical help, emphasizing the necessity for increased awareness and outreach efforts. Some risk factors of DPD include having long-term toxic relationships, having overprotective parents, or experiencing childhood trauma. DPD patients have difficulties making daily decisions such as what to wear, without constant reassurance and advice from others [4].

For instance, Ms. L., a 71-year-old with a history of DPD, experienced emotional struggles due to the absence of caregiving responsibilities. During her psychiatric treatment, attachment bonds with fellow patients played a crucial role in her emotional well-being, with disruptions causing deep sadness and renewed suicidal thoughts, highlighting the significance of interpersonal connections in her recovery [5]. In this case, family therapy will be useful for treatment.

3. Overview of Family Therapy

Family therapy is essential in treating DPD, addressing symptom origins, providing prevention, and offering comprehensive support due to patients' common reliance on their families.

SSFT is a type of family therapy that looks at the structure of a family unit and improves the interactions between family members [6]. SSFT is beneficial for DPD as it focuses on understanding and restructuring the family dynamics. This approach helps identify and address patterns that contribute to dependency, providing a framework for promoting healthier relationships and fostering greater independence for individuals with DPD. By actively involving family members, it ensures a holistic and collaborative effort to support the individual in overcoming dependency issues.

4. Connections between DPD and Family Therapy

4.1. Collaborative essence

The intricate intersection of Dependent Personality Disorder and family therapy unfolds on multiple layers, offering insights into the nature of this complex condition. Firstly, the manifestation of DPD symptoms in early childhood, frequently linked to trauma experiences, positions family therapy as a well-suited and targeted intervention [7]. The therapeutic approach of family therapy is uniquely poised to delve into the roots of these symptoms, unraveling the dynamics and interactions within the familial context that contribute to the development of DPD. Beyond treatment, family therapy assumes a pivotal role in prevention strategies, serving as a proactive platform to identify and address potential triggers or stressors within the family environment that might exacerbate DPD symptoms.

The collaborative essence of family therapy is particularly impactful, engaging both the patient and their family members in the therapeutic process. This collaborative framework aligns seamlessly with the interconnected dynamics often associated with DPD, allowing for a holistic approach to treatment. By involving all stakeholders, family therapy creates an inclusive and supportive environment that empowers the individual to navigate and overcome the challenges posed by DPD. This multifaceted engagement underscores the versatility of family therapy as an integral component in addressing the roots, manifestations, and prevention of Dependent Personality Disorder, contributing to a comprehensive and effective therapeutic landscape.

4.2. Family-centered therapy

Family therapy is beneficial in preventing DPD due to its focus on the family dynamics and interpersonal relationships that often contribute to the development of this disorder. By addressing communication patterns, expectations, and roles within the family, therapy can identify and rectify dysfunctional patterns that may contribute to dependency issues. Moreover, family therapy provides a supportive environment for individuals to develop autonomy and resilience, reducing the likelihood of dependent behaviors and fostering healthier family dynamics. The collaborative nature of family therapy allows for early intervention and the cultivation of coping mechanisms, making it an effective tool in preventing the onset or escalation of Dependent Personality Disorder.

It is important to recognize the influence of factors like overly enthusiastic or inaccurate praise during childhood, which can worsen a person's DPD [8]. In these cases, integrating family therapy during the patient's adolescence or adulthood is particularly valuable. Such therapy can provide an essential space to reframe these early experiences, challenge the beliefs and behaviors associated with DPD, and ultimately contribute to the alleviation of this disorder.

Table 1: The Anxiety when children are praised differently [8]

	M	SD
Ability Group (n = 37)	4.49	1.15
Effect Group (n = 35)	3.43	1.14
Control Group (n = 31)	2.68	1.40
Total (n = 103)	3.58	1.42

Table 1 presents the score for the children in the aspect of anxiety. The lower score means they are less anxious. The ability group is the group in which parents praise their children's ability when they succeed in something, for instance, if their children win the soccer game, instead of saying how hard they have been practicing for the game, they will say "Woah! You are such a soccer star! Your control of the ball and your passing are incredible! None of the kids can do that like you!" While the effort group indicates the opposite way, using our soccer example, parents in the effort group will say "Woah! I'm so proud of you! Because I know you have been training really hard for this game, you win this game because of your hard work in practice!" Therefore, according to the data, the kids in the ability group are more anxious when they don't achieve success.

DPD is closely tied to anxiety, characterized by the fear of abandonment and an ongoing need for reassurance. This leads to submissive behavior and difficulty making independent decisions due to anxiety about potential failure. Treatment involves family therapy, to address both DPD symptoms and associated anxiety, as individuals with DPD may also be susceptible to other mental health issues like depression.

4.3. Structural-strategic family therapy

Family therapy, particularly SSFT, is instrumental in helping DPD patients and the whole family, able to give effective intervention and support. For instance, when parents are separated, children may be more prone to developing DPD compared to those from intact families. Parent alliance in family therapy emphasizes the vital role of parental collaboration in addressing family issues. It involves fostering unity between parents and enhancing communication and problem-solving skills

[9]. A robust parent alliance not only improves the therapeutic process but also creates a supportive family environment for growth and resilience.

Table 2: Descriptives and inferential statistics for change and change * gender interaction of the mixed factorial ANOVAs for parent alliance [10]

	Descriptive M (SD)		Change F (η^2 partial)	Change \times Gender F (η^2 partial)
	Pre-test	Post-test		
Parent Alliance	4.03 (0.54)	4.11 (0.63)	0.89 (0.02)	2.94 (0.08)

First of all, a parent alliance is a pact between parents that although they are separated, they will work together so that the sum of their parenting and care will be greater than the two, separated, parts [10]. According to this set of data, the average data of the parent alliance between males and females is 4.025, after receiving family therapy in the form of structural and strategic family therapy, the average increased to 4.105, despite the drop in parenting alliance of the male. The concept of Parental Alliance is recognized as a potential risk factor for the development of Dependent Personality Disorder. In situations where parents undergo divorce, their children may experience an increased inclination to rely on one of the parents for emotional support and nurturance. This initial dependence can evolve over time, extending to a desire for reliance on other figures in the child's life, such as teachers, friends, or other family members. This pattern often arises from a perceived deficiency of attention or emotional support given to the child, which underscores the importance of parental cooperation in creating a nurturing and stable family environment. This collaborative effort between parents is especially crucial for young children who are still in their formative years.

5. Conclusion

In conclusion, this paper concludes by emphasizing the significance of taking a comprehensive and holistic approach to addressing DPD through family therapy. It underscores that treating DPD involves more than just addressing the individual's condition; it extends to cultivating healthier family dynamics and improving interpersonal relationships. The research highlights the importance of early intervention and sustained support in helping individuals with DPD regain autonomy and pursue more fulfilling lives. The passage also suggests that as the understanding of Dependent Personality Disorder evolves and therapeutic techniques continue to improve, there is progress in providing individuals and families with essential tools to navigate the challenges associated with DPD. The ultimate goal is to contribute to better mental health outcomes and overall well-being for those affected by Dependent Personality Disorder.

Nonetheless, a critical limitation in this research lies in the absence of a direct experimental investigation into the connections between DPD and family therapy. The absence of a dedicated experiment impedes the depth of understanding regarding the efficacy of family therapy in treating or preventing DPD. Furthermore, while data were collected from experiments conducted for different purposes, these also exhibit limitations, such as insufficient or non-representative research subjects. This underscores the need for dedicated, focused studies to comprehensively elucidate the intricate relationship between DPD and family therapy, ensuring robust and reliable insights into the effectiveness of therapeutic interventions.

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