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INCREASE OF EGOCENTRICITY AS AN INDEX OF  
PSYCHOPATHOLOGY IN PERSONALITY  
DISORDERS

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To my family, human and spiritual.

*El orgullo es el peor despilfarro de la vida,  
todos lo saben; pocos lo destruyen.*

*Tu alma es luz dichosa  
donde Dios se refracta.*

F. Rielo



## **Resumen**

Este trabajo ofrece un estudio del concepto psicológico de "egocentricidad" para una mejor comprensión de las distorsiones de personalidad. Un adecuado conocimiento del mismo ayuda a clarificar cómo las decisiones éticas pueden afectar a ciertas facultades psicológicas y contribuir en mayor o menor medida a la cristalización de los trastornos de personalidad. Se trata por lo tanto de un trabajo que establece un puente entre la ética y la psicología práctica. Para este cometido se ha usado un modelo antropológico católico de la personalidad.

## **Resum**

*Aquest treball ofereix un estudi del concepte psicològic "d'egocentricitat" per una millor comprensió de les distorsions de la personalitat. Un coneixement escaient del terme ajuda a clarificar com les decisions ètiques poden afectar a certes facultats psicològiques i contribuir en major o menor mesura a la cristal·lització dels trastorns de personalitat. Es tracta per tant, d'un treball que estableix un pont entre l'ètica i la psicologia clínica. Per aquesta comesa s'ha utilitzat un model antropològic catòlic de la personalitat.*

## **Abstract**

This work presents a study of the psychological concept of "egocentricity" for a better understanding of distortions of personality. An adequate comprehension of this helps clarify how ethical decisions may affect certain psychological structures and contribute to a greater or lesser degree to the crystallisation of personality disorders. It deals therefore with establishing a bridge between ethics and clinical psychology. For this purpose, a Catholic anthropological model of personality has been used.

## **Palabras claves / Keywords**

Egocentricidad- Neurosis- Trastornos de personalidad- Vicios- Virtudes- Voluntad Egocentricity- Neurosis – Personality disorders - Vices - Virtues- Free will
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## INTRODUCTION

The separation between empirical and rational psychology of the 18th century paved the way for the increasing mutual rejection between psychology and ethics. Ethics has tended to become repressive of personal experience and subjectivity, instead of being the promoter of its development, and psychology has become an isolated science of human behaviour, based only on what can be quantified (Rielo, 2001). As Erich Fromm (1947) stated:

Psychoanalysis, in an attempt to establish psychology as a natural science, made the mistake of divorcing psychology from problems of philosophy and ethics. It ignored the fact that human personality cannot be understood unless we look at man in his totality. (p. 6)

Increasingly, psychology has dedicated its efforts to the pursuit of independence and progress, and adopted the methodology of natural science while deeming problems that could not be tested as unimportant and irrelevant. This rupture between both disciplines and the rejection of the transcendental nature of this relation has brought about the idea that personality itself is merely the product of environmental forces, the result of either biological or social conditions. It thus made an oversimplification of disease and mental health. As a consequence it has devalued human beings and, more significantly, their capacities for recovery. It has allowed them to ignore the value-laden and spiritual aspects of personal character. Until now, the standard approach to ethics in mental health has focused almost exclusively on the therapist, but little attention has been paid to how ethics relates to the patient in the process of developing or recovering from a disorder.

In this dissertation the study of the psychological concept of egocentricity as properly understood helps to clarify how ethical decisions and attitudes can undermine psychological capacities and contribute, to a greater or lesser degree, to a progressive depersonalization which can crystallize into typical personality disorders. It applies, then, to the complex interaction between ethics and psychology. The first chapter, "Introduction and theoretical considerations of egocentricity", is a study of the conceptualization of egocentricity in psychology. A distinction with similar terms such as narcissism and egocentrism will be presented.

In the second chapter, "Egocentricity: insights from neurosis theories", we will look in detail at the theory of neurosis that some authors have proposed. They were the first to emphasize or to continue emphasizing the crucial role that egocentricity plays in many psychological disorders - especially in neurosis- and thus provide a framework

to understand the proposed egocentric interpretation of neurosis. The principle authors are Alfred Adler and his disciples, Rudolf Allers, Karen Horney, Igor Caruso, Anna Terruwe and, more recently, Martin Echavarria and Paul Vitz.

In the third chapter, “Model of Analysis of Personality Disorders”, we show the limitations of the DSM model in fully understanding the richness of the personality. A Catholic/Christian model of well-being is offered for the comprehension of personality distortion and of human flourishing. The model is based on the Aristotelian understanding of cause from a fourfold perspective: efficient, material, formal and final cause, and in the Brugger (2009) and Vitz, Nordling & Titus (2015) concept of the human person derived from philosophical reasoning (including the Aristotelian-Thomistic tradition, Christian Personalism and Phenomenology) and from the sources of Christian revelation. Because of the increasing support for conceptualization of personality disorders such as attachment disorders, an incursion into the attachment theory is also made. We expound its contributions to the understanding of PD and point out some deficiencies of this model too.

In chapter four, “Analysis of the relation between Egocentricity and Personality Disorders”, we analyse the consequences of egocentricity in all domains (bodiliness, relation, volition and rational) in different personality disorders of the new DSM-5.

And finally, in the last chapter, “Complexity of Egocentricity versus simplicity of Self-giving”, we analyse the increase in egocentricity in different domains in all personality disorders and the ethical consequences of this egocentricity. To finish, we offer a brief description of what a self-giving attitude, an antagonistic attitude to any kind of egocentricity, offers as a psychotherapeutic resource.

## **OBJECTIVES**

In this dissertation we make the case that ethics and psychology can employ the concept of egocentricity to refocus personality disorders via an ethical and psychological approach. Ethics and psychology can better integrate the potential personal resources available for a flourishing character. In this thesis, we intend to present dialogue between psychology and ethical theory. The proposed grounding for this synthesis of ethics and psychology is based on a Christian model of personhood.

We shall address two main objectives in particular:

1. To study the contribution of the main theories of psychologists and psychiatrists in the development of the concept of egocentricity and its relation with the configuration of neurosis of character.
2. To study the relation of progressive egocentricity (or vices) in the development of personality disorders in any domain (rational, volition, relational and bodiliness).

We shall also address one secondary objective:

1. To study the therapeutic consequences of the self-giving attitude.



**CHAPTER ONE. THEORETICAL CONSIDERATIONS OF  
EGOCENTRICITY**





## **1.1. A brief history of egocentricity: cultural origins and disciplinary lines**

Egocentricity is as old as humanity itself, even though its conceptualization in psychology is much more recent, dating back to the beginning of the 20th century. Alfred Adler (1912) was the first to describe egocentricity as the main feature of the neurotic character. Similar concepts have later been developed in other theoretical systems such as egocentrism in cognitive theory and narcissism in psychoanalysis.

### *1.1.1. The cognitive-developmental view of egocentrism*

The term “egocentrism” has been a key concept in cognitive developmental psychology and is used to describe a particular stage in the development of social perspective. Piaget (1970) gave egocentrism a central role in his theory of intellectual development. Infancy is a time of profound egocentrism, in which the self and others are not cognitively distinguished. Egocentrism characterizes the young child’s functioning in virtually all spheres of activity. Piaget describes it in the following way:

However dependent he may be on surrounding intellectual influence, the young child assimilates them in his own way. He reduces them to his point of view and therefore distorts them without realizing it, simply because he cannot yet distinguish his point of view from that of others through failure to coordinate or “group” the points of view. Thus, both on the social and on the physical plane, he is egocentric through ignorance of his own subjectivity. (Piaget 2001, p. 176)

He describes cognitive development as a progressive “decentration”, in which the person learns to separate his/her own experience from reality and to take the self as object. Towards the end of the first year, a major decentration occurs when the child establishes object permanence, recognizing that objects have permanence in space and time independent of his/her thoughts and actions upon them (Piaget, 2001).

For Selman (1980), egocentrism is the failure to distinguish one’s own feelings from those of others. He describes five levels of development and only at level 3 (9-15 years) can the child or adolescent step back from both his/her own perspective and those of others to take a more objective, third person approach that integrates multiple perspectives.

All these authors concur in their view of egocentrism as a relatively stable state during childhood. The question thrown up by this conceptualization is how to overcome it. According to Looft (1972), the essential meaning of egocentrism is an

embeddedness in one's own point of view and it is during exchanges with other people that childish egocentrism vanishes. Dissonant information in verbal exchanges and communication conflicts make the child feel, consciously or unconsciously, that something is wrong. Therefore, both affective and intellectual disequilibrium are necessary conditions for the child's engagement in the adaptive, constructive mental activities that comprise the sources for cognitive change and development.

Feffer (1966) applies the progressive decentring interpretation to the structuring of events at different levels of cognitive maturity. He expanded Piaget's concept of decentring by applying it to the interpersonal realm:

The dovetailing of responses involved in effective social interaction demands that each participant individual modify his intended behavior in anticipation of the other's reaction to this behavior. In order to accurately anticipate this reacting, one must be able to view his intended behavior from the perspective of the other person. Modifying one's behavior in the light of this anticipation further requires that one must also view the intended action from his own perspective at the same time.

The cognitive organization of the individual capable of effective social interaction can, accordingly, be interpreted as one in which different viewpoints are considered simultaneously in relation to each other such that the distortion engendered by a given perspective or centering is equilibrated or corrected by another perspective. (pp. 415-416)

Egocentrism is, then, an inevitable developmental phenomenon and has uniform intrapsychic characteristics. It manifests itself in a fixed sequence of well-demarcated stages of developmental landmarks that imply cognitive and interpersonal changes. For Looft (1972), "the sum of adult experiences results in changes in the individual's implicit theories concerning oneself, others, and the human condition in general" (p. 80).

However, when cognitive psychologists tried to study this phenomenon in adulthood they found that the developmental explanation does not apply for this period of life since all capacities are already mature. The term "egocentrism" cannot, therefore, explain the egocentric attitudes to which all quite mature people are at times susceptible, no matter the age. Egocentricity as a stable personality attitude under ordinary circumstances cannot be explained only in terms of immaturity in cognitive and emotional capacities. As Looft (1972) puts it, egocentricity concerns the human condition in general.

### *1.1.2. Narcissism as a psychoanalytic term*

Paul Näcke, a famous criminologist, was the first author to use the term narcissism. He was inspired by the sexologist Havelock Ellis who described a perverted conduct in relation with the myth of Narcissus (Echavarría, 2010). However, Freud took this term from Näcke and popularized it in his paper “On Narcissism” (Freud, 1964). Since then, narcissism has been used with various meanings in psychoanalytic theory, and Freud himself used the term in various ways. In “energetic” terms, it was defined as a type of libido aimed toward the self. Narcissism was also described as a certain type of relationship in which a person seeks others only as extensions of him/herself or as all-powerful people who will give the narcissist what s/he feels entitled to. Narcissism was also seen as a developmental stage through which an infant passes and to which s/he could later regress under certain circumstances.

Object-relations psychoanalysts accept Hartmann’s (1950) definition of narcissism as the libidinal investment of the self and thus recognize a shift from need-gratifying object relations (referred to as narcissistic) to mature object relations based on love, respect and concern for others who are relatively complexly represented (Fairbairn, 1952).

Kohut (2001) also adhered to the concept of narcissistic libido that followed its own developmental pathway and was involved in the build-up of mental structures. Kernberg (1985) also refuted the idea of narcissism as the libidinal investment of the self, and de-emphasized the drive aspect. He focused on the early affects of pleasure and displeasure that become fixated in primitive memory as a constellation of “incorporating self components, object components and the affect state itself”. He claimed that these primitive affects become differentiated in the context of the differentiation of early object relations.

Later definitions are closer to our term egocentricity. For example, Moore (1967) defines narcissism as a “concentration of psychological interest upon the self”, whereas Bursten (1989) defines it as “an interest in (or focus on) the self”. In the next section, we examine the similarities and differences between narcissism and our term egocentricity.

## **1.2. Narcissism and egocentricity: similarities and differences**

Before entering into distinctions between narcissism and egocentricity, basic differences in the psychoanalytic approach and our approach to human development

must be explained. The psychoanalytic model presents disorders as the inevitable consequences of childhood experiences. Defence mechanisms thus act in a mechanical way to protect the individual from anxiety and loss at any cost. This postulate is reflected in claims such as that made by Bursten:

Manipulative personality is driven to manipulate primarily by his inner dynamic position-his character structure. He will seek out situations where he can manipulate and will tend to provoke conflict in goals in order to set the stage for his manipulation. (Bursten, 1972, p. 319)

From this standpoint, the conscious individual is either passively moved by “libidinal” forces or protected, though passively all the same, from the demands. Erikson (1950) pointed out that “we must become sensitive to the danger of forcing living persons into the role of marionettes of a mythical Eros, to the gain of neither therapy nor theory” (p. 64). The marionette concept reflects a rather insufficient appreciation of human freedom. The human being is conceived as both a passive witness to his/her own manifest behaviour and the victim of his/her past.

As to the fact of our intrinsic relational nature, psychoanalysts believe that we relate to others only by way of “cathexis”; that is, by attaching to another person some fixed amount of libidinous energy. The pleasure principle reigns supreme: other people simply become means to our own self-serving ends. The ego strategically utilizes others in the service of its own needs; others are never loved for their own sake.

However, according to Christian anthropology of the human being, freedom adds the capacity for self-direction and meaning to rationality and will. The human being, then, is not merely a victim of historical events. Once the individual is mature enough, actions enter the realm of “responsibility” because we are not determined to defend ourselves at any cost. To assert that humans are free is not to deny that they are also conditioned in many ways and to varying degrees, but it does imply that they are not always limited to one course of action. Our emotions, cognitions and experience shape and influence our freedom. We are not responsible for our feelings, although we can be responsible for our feelings as emotional responses to deliberate thoughts and choices for which we are responsible (Brugger, 2009). Sociological conditions, physical and psychological disorders and personal traits all impinge upon people’s freedom, but barring complete incapacitation; everyone has a range of options open to them which makes them responsible for their choices.

According to psychoanalysis (Kohut, 2009), narcissism is established in childhood and is based on instinctual components. Psychoanalysis postulated that unrealistically high standards demanded of the child and harsh criticism from parents play an important role in narcissism. The child thus internalizes these parental

attitudes, and as an adult becomes too self-demanding and very ambitious. Such people become prisoners of their aspirations, their needs and their harsh self-criticism.

The existence of an idealized parent imago and splitting are not elements of the egocentricity concept. It would imply that anyone who has not idealized the parental figure and has not used splitting would be free of this tendency. However, for many egocentric people the ideal parent imago may be insignificant or absent. Egocentricity is a generalized attitude in everybody. The lack of a responsive parental figure increases the sensation of vulnerability and the need to protect and defend ourselves, though it is not an inevitable response. There is potential for egocentricity to be reinforced or to simply vanish in every relationship.

There are some features in common with the psychoanalytic viewpoint. The crucial characteristic in both cases is the embeddedness in one's own point of view. The main characteristics of narcissistic personalities are grandiosity, extreme self-centeredness and a remarkable absence of interest in and empathy for others in spite of the fact that they are so very eager to obtain admiration and approval from other people (Kernberg, 1985). Traditionally, egocentricity has been recognized as one characteristic of narcissism. The only way of expressing the infatuation with one's self was through narcissism. We do not, however, recognize narcissism as the only manifestation of egocentricity. There is a wide pattern of expression according to traits, character and choices. Even patients without any manifestation of longing for admiration, glory, superiority or perfection may be totally ego-centred. As Bursten (1989) affirms, many different clinical manifestations reveal narcissistic personalities, not only the narcissistic personality disorder. The arrogance of the grandiose person, the embarrassment of the avoidant person, the demanding and sulking of the craving person and the seething resentments of the person with a paranoid personality result from a general narcissistic orientation. While classical pathological narcissistic subjects are egocentric, narcissism is not the only way that egocentricity can be expressed and they do not share the same origins.

### **1.3 Definition of egocentricity**

As we have seen, similar terms have common features with our term egocentricity. For the purpose of this dissertation, we will use the definition provided by Künkel (1984b) "the person thinks, the person feels and acts exclusively in the service of the preservation or elevation of his own ego" (pp. 102-103). He claimed that when consciousness is dominated by the ego-image (the idealized image that we have

created about ourselves), our behaviour-pattern and our decisions become “egocentric”; they serve the ego exclusively. This egocentricity is neither exclusively innate nor exclusively a reaction in human nature and it can be easily induced by external and internal influences. Egocentricity displays itself in different forms, with varied symptoms and at different times. Everybody lives with a general level of egocentric tension but there may be a progression in this attitude which leads to an authentic infatuation and obsession with one’s self, something tantamount to self-immersion. In such a state, the ego-image is entirely out of tune with reality. This attitude produces a vicious circle that is difficult to break out of. It is rooted in the fact that no egocentric aim can be attained again and again without considerably intensifying the means necessary to achieve it. It produces an intensification of symptoms and the person may more or less consciously resort to more drastic measures.

This self-centred attitude produces a lack of mature relationships with the consequent paralysis of the capacity to love (Fromm, 1947). We hypothesize in this dissertation that there is also a progressive increase in psychopathology of personality disorders with the increase in egocentricity.

Our term egocentricity is not exclusively explained by immaturity in cognitive and emotional capacities as the term egocentrism is. It does not imply certain childhood experiences in its origin as the term narcissism does. It shares some aspect of Bursten’s definition of narcissism, since it is an over interest in the self. However, the most challenging aspect of our definition is that not only does the social context play a role in its origin and intensification as Bursten defends, but that personal free decision may also intensify or diminish it. The problem of the origin and sources of egocentricity is not a simple one, as it may be the product of multiple and interacting sources, which include personal freedom.

Research into understanding the process of egocentricity requires a shift in perspective. We must go deeper into human anthropology. The Christian anthropology provides an excellent framework to understand the process and effects of egocentricity in all human dimensions. It will be set out in detail in chapter four.

According to Künkel (1984), egocentricity is a reaction to deflect hurt, so it is a natural consequence of fear. Objectives are thus desired exclusively in the service of the ego only with the supreme concern of the protection of one’s ego from others. This attitude of self-protection means that an individual’s personal development is based on minimum expectations of others, because the desire to make others happy is turned into a personal desire to avoid being harmed by others. The flexibility, which implies a positive self-affirmation and positive others-affirmation, is replaced, then, by

a rigidity that excludes others. The goal of this attitude is always self-protective and has tragic consequences in relationships, as it impairs the ability to give one's most intimate being and to share happiness and destiny with others. From this standpoint, as a subject attempts to deny the inescapability of communion or unity, usually for protective reasons, personhood is progressively diminished (Stratton, 2006), because a fully personal realization implies a mutual love (Von Hildebrand, 2009). Under egocentric rule, however, love is hindered and self-protection promoted. Although there may have been conditions to maintain this egocentric attitude, every relation gives the opportunity to choose freely. This is clearly explained by C. S. Lewis (1960):

Every time you make a choice you are turning the central part of you, the part of you that chooses, into something a little different from what it was before. And taking your life as a whole, with all your innumerable choices, all your life long you are slowly turning this central thing either into a creature that is in harmony with God and with other creatures and with itself or else into one that is in a state of war and hatred with God, with fellow-creatures and with itself. (p. 48)

From our perspective, a relational movement is a willed act, a free choice that accounts for self and others (Stratton, 2006). Correct relational movement may create the conditions for love in which one could "lift the mask" which otherwise covers and protects our intimate inner life. Thus, as we present in last chapter, relations offer a therapeutic opportunity to overcome egocentricity.

In this chapter, we have studied the origin of egocentricity and the supreme concern for the protection of one's ego from others. This self-protective attitude may become the guiding principle of people's existence and may draw all the psychic forces in its direction. In chronic situations, it produces a particular symptomatology which coincides with many current DSM personality disorders. In the next chapter, we will analyse how different authors have conceptualized this idea.





## **CHAPTER TWO. EGOCENTRICITY: INSIGHTS FROM NEUROSIS THEORIES**



## **2.1. Definition of classical neurosis and egocentricity**

In this second part we shall analyse the relation between egocentricity and neurosis theories. It would be very enlightening to look in detail at the theory of neurosis proposed by some authors. These psychologists were the first to place emphasis on the crucial role that egocentricity plays in certain psychological disorders, especially in neurosis, and thus provide a framework to understand the development of neurosis under egocentric rule. The main authors are Alfred Adler and his disciples Rudolf Allers and Fritz Künkel. We will also examine Karen Horney, Anna Terruwe and Igor Caruso's theories of neurosis and more recently, those of Martín Echavarría and Paul Vitz. All of them share very crucial common points. We will try to establish the essential unity of various forms of neurosis from a psychological and moral point of view. The features of experience that determine the symptomatology will be further expanded upon in the next chapter.

## **2.2. Neurosis development under egocentric rule according to Alfred Adler**

Adler was the first to describe the connection between an attitude and a clinical condition. Neurosis would thus be one of the possible results of the development of a human being under egocentric rule. It would be compensation, a constructive creation of the psyche built upon the foundation of inferiority feelings.

To compensate for these uncertainties or inferiority feelings, a guiding principle, a model or a fictitious life plan is built. This guiding principle then collects and groups together those psychic capacities of which it can make use. It only collects those faculties and memories in which results are promised for the attainment of the final goal. It brings strong relief when the person manages to escape from a period of uncertainty into the fulfilment of his/her fictitious guiding idea. With the guiding principle, Adler retrieves the Aristotelian concept of final cause, which has been abandoned by modern psychology (Echavarría, 2011).

Adler points out that the feeling of inferiority demands compensation in the sense of a maximization of one's own self. The greater the feeling of inferiority, the more imperative and stronger will be the necessity for a steady guiding principle and indeed the more distinctly it manifests itself. According to Adler (1912): "it is only when the neurotic perspective becomes effective, when the neurotic character and predispositions are fully developed and the way to the guiding goal is assured, that we recognize the individual as a neurotic" (p. 147).

The purpose of compensation is the stimulation of the individual's grandiose ideas and the utilization of it as a refuge and an excuse when forced into a decision which threatens a lowering of the ego consciousness. The greater the compensation, the greater the "anaphylactic" reaction against depreciation of one's own self is. In this weakness and helplessness the person develops manifold shortcomings which assures him/her of help and support. It becomes a psychologically secure refuge against the feeling of uncertainty.

This feeling of uncertainty forces the neurotic to a stronger attachment to fictions, guiding principles, ideals and dogmas. These guiding principles float before the normal person also but they can free themselves from the abstract and reckon to reality. (Adler, 1912, p. 18)

However, with extraordinary sensitiveness the neurotic character fastens itself to reality in order to change it according to the egoistic ideal. If the own idealized self is threatened, the neurotic symptoms come into force. This compensation, then, is manifested in symptoms and attitudes. Adler links for the first time the lack of recognition of real defeat with pride. This is a crucial and novel idea that would be developed by Karen Horney.

The guiding model has several psychological consequences:

- The reinforcement of the fiction in the neurosis causes a concentration of the attention on those points of view regarded by the neurotic as important, the result of which is a narrowing of the field of vision.
- The fiction, which serves as a final purpose, draws all the psychic forces in its direction. It organizes psychic faculties for the purpose of guaranteeing security. In consequence, human thought, feeling and volition adjust to this guiding principle.
- The guiding fiction has a simple, infantile scheme, and influences the apperception and the mechanism of memory. These are under the sway of the guiding fiction, which coincides with the effect of defensive denial. Adler gives a more accurate origin of denial, describing it not just as a "mechanism" but rather a consequence of the guiding principle over the faculty of perception.
- A constant mixture of personality traits intended to negate the sense of inferiority, such as pride, envy, greed, cruelty, courage, revengefulness, irritability, etc., which are constantly being excited through his/her craving for security.

- The neurotic person is always captured in his/her particular fiction. S/he is unable to find her/his way back to reality, unlike the normal person who utilizes it for the purpose of reaching a definite goal.

For Adler, neurosis then is not the result of a resistance that represses unacceptable desires or emotions as orthodox psychoanalysis understands it, but a kind of lack of awareness or understanding. For him, neurosis is developed from childhood, as the child develops according to a final purpose that goes beyond verbal comprehension and, as such, is not susceptible to criticism. Therefore he does not talk about an unconsciousness based on “repression” but based on lack of comprehension.

Adler’s contributions are very useful for my later analysis of clinical categories. We will examine which psychic faculties are drawn in the direction of the guiding model in the different personality disorders and how it contributes to the exacerbation of symptomatology.

### **2.3. Neurosis and egocentricity according to Rudolf Allers**

Rudolf Allers follows Adler’s theory of origin of neurotic character but he reinterprets it under an anthropological framework. The compensation of the inferiority complex diminishes the anxiety provoked by the lack of acceptance of one’s own finitude and the place that, by nature and biography, one has to occupy within natural and supernatural order. Thus, the neurotic is incapable of accepting any limitation of his/her own will of power. The suffering that this falsehood provokes is used by him/her to avoid responsibilities and obligations. Deep inside, all neurotic characters would not be aware of lack of acceptance of reality, a “lack of authenticity” or self-deception that does not allow him/her to live genuinely. The individual is, thus, trapped in an occult rebellion, of which s/he may be unaware, against the demand of reality. Allers gives a psychological and theological origin of this rebellion:

This rebellion is directed against the unchangeable facts of existence and of the rule of law in the universe, against man’s inevitable limitations as a creature, against the supremacy of nature and other fellow-men, against existing law and custom and civilization and finally against the overshadowing greatness of God, of the *Deus incomprehensibilis et absconditus*. (Allers, 1931, p. 322)

Behind this attitude underlies the vice of pride. Again, the relation between a moral attitude and a clinical condition is shown. Allers explains neurosis under a Catholic concept of the human being and, as a consequence, his/her neurosis is understood as the direct outcome of the purely human situation following the Fall and points out that the only person who is free of developing a neurotic character is the saint

because "he is the man whose life is spent in genuine devotion to the natural and supernatural obligations of life and they are the saints" (Allers, 1931, p. 326). Rebellion derived from fear breaks the love bond and provokes distrust in relationships with others and with God. The genuine act of devotion to the natural and supernatural obligations in communion with God and others is thus distorted into self-protective strategies with a refusal of communion and promotion of egocentricity.

Finally Allers explains one important consequence of this egocentric position in life regarding perception. The vision of life is severely restricted by the tendency to concentrate on himself/herself: "the neurotic is like a man gazing into a small hand-mirror which reflects his own features, but excludes the outside world." (Allers, 1931, p. 328). The main and inevitable result of this self-focus is the exclusion of the rest of the world.

## **2.4. Neurosis development according to Karen Horney**

Karen Horney wrote extensively about neurotic development. In her book "Neurosis and human growth" (1950) she describes the neurotic process as a special form of human development which involves a waste of constructive energies.

Under inner stress a person may become alienated from his real self. He will then shift the major part of his energies to the task of molding himself by a rigid system of inner dictates into a being of absolute perfection. (p. 13)

This process entails an alienation from oneself because the neurotic overrides his/her genuine feelings, wishes and thoughts. This whole process has different steps and characteristics and it goes from a self-idealization to self-contempt. To satisfy all the inner needs the neurotic, through the imagination, creates in his/her mind an idealized image of himself/herself, which is the self-idealization. This coincides with the domination of the ego-image of Künkel in egocentricity, who describes the latter as the idealized image that is created by ourselves about ourselves.

This mental idealization takes progressively more prominence in the neurotic life. The process of identification with it leads to a distortion of reality:

Eventually the individual may come to identify himself with his idealized, integrated image... the idealized image becomes an idealized self, and this idealized self becomes more real to him than his real life... this transfer of his center of gravity is an entirely inward process; there is no observable or conspicuous outward change in him. This change is in the core of his being, in his feelings about himself. (Horney 1950, p. 23)

This self-idealization creation, however, will exert a moulding influence upon the whole personality. It can infiltrate his/her emotions, thoughts, aspirations, goals, and finally all his/her conduct of life and relations to others.

The important parallel between this self-idealization and the guiding principle that Adler describes is that in both cases there is a total identification with a model that the person creates about him/herself. This model will modulate all reality and experience. If for Adler the guiding principle acts as a psychological secure refuge against the feeling of uncertainty, self-idealization grows into a more comprehensive drive, which Horney termed "the search for glory". Underlying this search for glory is a vanity objective that drives the individual towards external success. But a vengeance objective could be the underlying factor, in which case the behaviour would be more destructive because neurotic people look for a vindictive triumph. According to Horney, it is "vindictive" because it takes revenge for past humiliations.

According to Horney, there are three characteristics that are inherent to this search for glory: the inability to consider others; the inability to consider the truth of reality; and finally the important role of imagination. The person then is too wrapped up in her/his own neurosis to be able to consider others' lives seriously. Adler and Allers also accept this exclusion of the rest of the world. The compulsiveness of the neurotic person's need for indiscriminate supremacy makes him/her indifferent to truth, whether concerning himself/herself, others or reality. The imagination operates in changing the neurotic's beliefs. It functions to replace the real experience of denial defence: "The more his irrational imagination has taken over, the more likely he is to be positively horrified by anything that is real, definite, concrete or final" (Horney 1950, p. 36). The development of imagination is so extreme that s/he is averse to checking with evidence when it comes to his/her particular illusions about him/herself. S/he always tends to deny inner conflicts and refuses to see the inevitability of cause and effect in psychic matters.

Adler pointed out pride as the cause of preventing the neurotic from recognizing his/her limitations. Horney (1950) develops this idea more extensively:

With all his strenuous efforts toward perfection and with all his belief in perfection attained, the neurotic does not gain what he most desperately needs: self-confidence and self-respect... the great position to which he may rise, the fame he may acquire will render him arrogant but will not bring him inner security... but all these feelings of elation collapse easily when this support is lacking, when he incurs failure or when he is by himself.

The neurotic development weakens at the core of his being. He becomes alienated from himself and divided... Instead of solid self-confidence he gets a glittering gift of most questionable value: neurotic pride. (pp. 86-87)

Rather than being an isolated characteristic, pride moulds all mental processes: reason, emotions and willpower. An incessant effort of intellect and imagination then goes into maintaining the private fictitious world through rationalizations, justifications, and externalizations; in short, there is a constant struggle to find ways to make things appear different from what they are. Reality is also distorted and in its place there is a projection of the own inner state that becomes supreme reality. "He sees in the mirror only his thoughts about the world and himself... there is simply nothing that may not be invested with pride" (Horney, 1950, p. 93). This statement coincides with the claim by Allers that "the neurotic is like a man gazing into a small hand-mirror which reflects his own features, but excludes the outside world". As the idea of exclusion from the rest of the world reappears in the thesis of Horney about neurosis, egocentricity is thus implicitly connected to the "pride system".

Pride has the purpose of updating the idealized self. It is very often accompanied by reactions of shame and humiliation because neurotic pride rests on shaky foundations and can be knocked down by the slightest criticism or failure. What complicates matters and makes these personalities even more complex is the fact that these reactions may be blurred by several factors. Self-righteousness can block the feelings of shame and then the direct reactions to hurt pride can be automatically transformed into feelings other than shame and humiliation such as hostility. This is what Horney calls a secondary reaction; they can take psychological, behavioural or somatic manifestations. It forms the base of the complexity of these personalities:

The whole issue is far more beclouded if even these secondary reactions do not appear as such, for they in their turn may be repressed-for whatever reason. In this case they may lead or contribute certain symptomatic pictures, such as psychotic episodes, depressions, drinking, psychosomatic disorders. Or the need to sit tight on the emotions of anger and fear may become one of the factors conducive to a general flattening out of emotions. (Horney, 1950, p. 102)

Thus far we have traced a neurotic development that begins with self-idealization and evolves step by step into a transformation of values through neurotic pride. In spite of the self-idealization, there is still a conflict. There is a conflict between what the pride system demands and what the individual really is. We see here the rebellion that Allers described: "rebellion is directed against the unchangeable facts of existence



and of the rule of law in the universe, against man's inevitable limitations as a creature". The discrepancy between what the individual would like to be and what he really is provokes hatred, which according to Horney can be active and passively externalized, giving rise to different symptomatic manifestations such as relentless demands on the self, merciless self-accusations, self-contempt, self-frustrations, self-tormenting and self-destruction.

The demands on the self assume, then, a crucial position in the structure of neurosis. They are instrumental in increasing the individual's alienation from him/herself by forcing him/her into a falsification of his/her real thoughts and beliefs by engendering a diffuse dishonesty.

#### *2.4.1. Main consequences of neurotic development in human psychology*

Finally, we shall describe the consequences of the neurotic development. Prioritizing the pride system comes at a very high price and has pernicious effects on the person as a whole. It has five tragic consequences for human development: de-personalization, alienation from the self, lack of sense of direction, failure to assume responsibility and finally, lack of unity.

According to Horney, psychological honesty enables us to make decisions and take responsibility for them, which leads to integration and sound sense of wholeness, or oneness. On the contrary, the pride system allows the neurotic to find pseudo-solutions through inaccurate attempts at integration. These pseudo-solutions, however, deprive neurotic of autonomy because:

- They become a compulsive way of living.
- Instead of making an effort with regard to human relations, the neurotic insists that others should adjust to him/her.
- Instead of making his/her own decisions, s/he insists that others should be responsible for her/him.

The neurotic thus descends into the destructive, painful process of *depersonalization*. According to Horney, there is an impoverishment of the emotional life, which involves a diminished sincerity and a lack of deep feelings that may lead to an alienation from the self. The more attached to the self-idealized image the neurotic becomes, the less is his/her contact with real feelings and thoughts. In this state, the general capacity for conscious experiences is impaired. There are, for instance, many neurotics who live as if they were in a fog. It has parallelisms with the self-deception state explained by Allers. Under this artificial state, experiences do not penetrate to their feelings and their inner experience does not penetrate to awareness. Together

they lead to an alienation from the actual self. It is the remoteness of the neurotic from his/her own feelings, wishes, beliefs and energies.

Naturally, the course of life is, in part, determined by factors beyond our control. Nonetheless, this does not prevent people from having a sense of direction. We can have ideals and values which we strive to uphold and on the basis of which we make moral decisions. This sense of direction is conspicuously absent in many neurotics, whose powers of direction are weakened in direct proportions to the degree of alienation from self. These people shift plan or purpose wherever their defensive reaction takes them. An insufficient sense of direction may be hidden behind an attitude of compliance.

While the impairment of the directive powers may be hidden, there is another insufficiency that is always clearly discernible: the faculty of assuming responsibility for the self. The reactive factors in neuroses are so prevailing that the factor of choice is negligible. It is explained clearly by Horney thus (1950):

Here again, pride has taken over responsibility and hounds the person with condemnatory accusations when he fails to do the impossible. This then makes it close to impossible to assume the only responsibility that matters. This is at bottom no more but also no less than plain, simple honesty about himself and his life. (p. 169)

The neurotic puts responsibility on everybody and everything except himself/herself. The weaker his/her contact with his/her real self becomes through such evasions, the more reasons the neurotic has in fact to dread them. The shirking of responsibility for the self makes it harder for any patient to face and to overcome his/her problems. If we are sufficiently honest to recognize our feelings, to make our own decisions and to assume responsibility for them, then we have a feeling of unity on a solid base.

On the contrary, if, as the result of many factors, we lose contact with reality and do not assume any responsibility, we are no longer on firm ground from which we can try to disentangle our inner conflicts. We are at their mercy, a helpless prey to disintegrating force, and must seize upon any means available to solve them. This is what Horney calls neurotic attempts at solution. By refusing accountability, neurotics create artificial means to hold themselves together. Pride and self-hate then acquire a new self-protecting function to create and maintain a semblance of superficial order. Rigid control through willpower and reasoning is another strenuous means of attempting to bind together all the disconnected parts of responsibility. Artificial means establishes the typical "vicious-circle" of neurotics which intensify symptoms to a greater or lesser degree.

## 2.5. Contributions of Anna Terruwe

Anna Terruwe's theories are based on Aquinas' understanding of what he calls the "nature of man". Her ideas about the nature of man and his emotional life are discussed in her book "Loving and curing the neurotic. A new look at emotional illness" (Terruwe & Baars, 1972), where she describes the psyche of man in the light of philosophical anthropology. She embraced the spiritual aspect of the human person in the treatment of her patients. Her ideas included topics about man's emotional life, his intellect and free will. The discussion continues into topics of affirmation and what it means to be "authentically human".

Terruwe made important contributions to the explanations of repression and neurosis and our understanding of fear as the basis of some kind of neurosis. Repression is very similar to denial but while denial mainly occurs on the cognitive and perceptual levels, repression occurs on the emotional level. Repression for her does not have the same meaning as Freudian repression. For Freud it always has an immoral and antiaesthetics meaning for the person since the content of repression is against his/her ideal ego. Repression, then, is a rejection based on judgment against an instinctual impulse (mainly sexual impulses). She makes an original contribution since for her repression is only the impossibility of expression or display of an emotion, which does not imply necessarily a sexual content or moral evaluation. According to Terruwe, the natural tendency to order emotional life according to the guidance of reason is distorted in the neurotic. Although this subjects him/her to abnormal tensions, it is possible to redirect emotional life into normal channels.

### 2.5.1. *Repression and neurosis*

Terruwe argues that in a state of repression, reason is momentarily "suspended", which means not acting, though the repressed striving continues to exist in a state of tension. At this point the repressed emotion becomes akin to a foreign body in the mental life because it passes beyond the control of reason and willpower, but continues to exist as a tension. The person, however, no longer realizes that the tension stems from this particular object as it has disappeared from consciousness. Thus, the natural expression of the emotion is lacking and in its place appears a forced attitude:

When the person does not wish to allow certain emotions to be aroused he will be readily inclined to shut himself off from the outside world, at least in the sense that he wants to prevent certain impressions from forming... Shutting out the outside world, results in a more pronounced egocentricity. The neurotic person is already preoccupied with himself as a

result of the neurotic process, and since the natural inclination to find diversion outside himself is thwarted, his illness will be further aggravated. (Terruwe & Baars, 1972, p. 71)

Every repressive process gradually becomes more deeply rooted in the mental life and it can lead to a completely autonomic process. Awareness gradually diminishes until it practically disappears altogether. Here we have the main contribution of Terruwe, who accepts a gradual decrease in awareness and it results in a progressive egocentricity.

The distinction between different kinds of neurosis according to her is beyond the scope of this dissertation. What really interests me is that she states fear as the basis of neurosis. She describes two possible paths to repression: repression by fear and repression by energy. The first of these leads to neurotic fear. She explains in great detail the effect of fear in mental life, which is expressed in all kinds of unmotivated fear reactions for the simple reason that its only purpose is self-protection. There is, then, a complete lack of any reasonable relationship between cause and effect, because it is rooted in a very autonomous defensive reaction, which is neither reflexive nor chosen. Fear pervades all spheres of the mental life. It influences thinking, the imagination and motor activity. It interferes with the thought process, leading to doubts, which turn, into indecisiveness when there is a need to act. Fear undermines every certainty and always leads to hesitation. It also influences the external senses by making them excessively sensitive. Fear exerts a marked influence on motor activity, which may result in restlessness and agitation or in blocking and retardation depending on the individual constitution.

The explanation of the energy neurosis, on the other hand, is not so clear in Terruwe's theory because she states that repression takes place in this case not through fear, but through its opposite emotions of courage, willpower and energy. They would be, according to Horney, secondary reactions but rooted also in fear. At the same time, however, she recognizes a third category of repressive neurosis called "fear neurosis camouflaged by energy" (Terruwe & Baars, 1972, p. 108) which she acknowledges as also being based on fear. Unlike the second category, however, fear is the driving force behind the repression, which activates and keeps activating the energy. These people do not allow themselves to be consciously influenced by fear. This is, however, a repression because psychologically they are not yet capable of handling and integrating this fear in a rational manner. What happens psychologically in these cases is exactly the same as what happens in true

energy neurosis, with the significant difference that it happens in an individual with a different kind of personality.

Terruwe points to an interesting factor underlying many neurotic processes, which is the fact that some people do not allow themselves to be consciously influenced by fear. It involves the free will decision of either not wanting to know or wanting to know. Our choice is determined by free will and is called consent. This faculty has a crucial role in the development of many neurotic disorders.

Whether fear is also present at the origin of energy neurosis, albeit in a much less integrated way than in the camouflaged forms, is debatable, but what really interests us is the establishment of fear as the origin of many neuroses. Terruwe gives a very good insight into fear, either primary or secondary, as the base of neurosis. If emotion or thoughts are not linked by love that permeates and unifies reason and willpower but by fear, they cannot be integrated consciously with a deep feeling of certainty.

## **2.6. Neurosis according to Igor Caruso: ethical and metaphysical meaning**

Finally, Igor Caruso offers a theory of neurosis that includes a metaphysical vision of reality and an ethical consideration, which he specifies very openly: "the neurosis is impossible to resolve unless based on metaphysical-moral presuppositions"<sup>1</sup>. This statement comes from the refined analysis of neurotic development that he makes. Not satisfied with a psychological explanation, Caruso, in "*Psychoanalyse und Synthese der Existence*", makes a deep incursion into its ethical and spiritual dimensions. Neurosis thus has meaning on the biological, psychophysical, ethical and spiritual levels and has to be understood in all of them.

For Caruso, the neurotic comes to a crossroads at different moments of her/his life, in which s/he refuses to risk losing something by taking a decision: "The neurosis then turns itself into an apparent solution: nothing has to be decided, a bridge is always left for retreat, incompatible desires are satisfied, albeit merely symbolically"<sup>2</sup>. This reveals in the neurosis an acceptance of impotence, namely the refusal to renounce means not wanting to decide, "wanting to hold not only the one, but also the other". This neurotic ambivalence allows the person to both proceed morally and enjoy what

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<sup>1</sup> The reference belongs to a Spanish edition of the book "*Psychoanalyse und Synthese der Existence*": *En el capítulo primero hemos intentado demostrar que el problema de la neurosis es insoluble si no es a base de presuposiciones metafísico-morales.* (Caruso, 1954, p. 87)

<sup>2</sup> *La neurosis se convierte en una solución aparente: no debe decidirse, tener siempre un puente para la retirada; satisfacer deseos incompatibles, aunque sólo sea simbólicamente.* (Caruso, 1954, p. 55)

is forbidden. The neurotic can call on the most refined arrangements such as continuous excuses towards oneself, in order to carefully camouflage the true motives of his actions.

By means of the “arrangement” of the incompatible options, the neurotic creates for himself/herself “pseudo-obligations” which allow him/her to withdraw from authentic duties. S/he finds himself/herself surrounded by pseudo-obligations, which appease his/her scrupulous demands under a mandate of the duty done on his/her own terms. Depending on the circumstances, it is often more difficult to unmask the false duties of neurosis, rather than the valid duties. The neurotic is able to make great sacrifices to save his/her “neurotic arrangement”. When verifying, a false duty allows him/her to identify with the perfect image of himself/herself without having to tackle vital decisions and the renouncement they involve.

#### *2.6.1. Metaphysical meaning: pride at the origin and the absolutization of the relative*

The most important contribution that Caruso makes to the understanding of neurosis is the description of the phenomenon of the absolutization of what is relative as a mechanism for developing the neurosis. The ethical judgment that the neurotic makes through false appreciations is achieved after setting him/herself as the centre of the universe. The individual as his/her own supreme value builds a universal system for him/herself where the rules are dictated by his/her own immanent feelings. Without using the term egocentrism, Caruso sets it as the crucial point of neurotic development. According to his theory, one can absolutize the subsidiary duties that will lead to a pathologic submission, the relation with a particular person that will lead to attitudes of dependency, the search for admiration that will lead to narcissistic attitudes, guilt that will provoke depression and can even absolutize abnegation and a sense of sacrifice that will lead to frames of “angelism”, described by Charles Baudouin (1949). The last state is a form of refined narcissism, i.e. the deepest state of self-love, in which the person identifies itself with the ideal image of oneself, and a desire worthy of pursuit is taken as an acquired reality, for which everything in themselves that is relative and contrary to the ideal image is sacrificed.

For Caruso, the error remains in the absolutization of the finite of not seeing the whole picture and judging according to the perceived fragment: thus it closes itself to the totality, but with the partial it adopts a totalitarian attitude. This is also described by Allers with a very graphic sentence: “the neurotic is like a man gazing into a small hand-mirror which reflects his own features, but excludes the outside world” (1931). Under this reality, the neurotic remains hypertrophied and disassociated from others.

It therefore clashes with love, because it always puts his/her own point of view in the centre of his/her project of life, excluding others. As a consequence, the neurotic is “prevented from love”. S/he claims love for himself/herself, s/he settles in the captivating state and s/he is not ready to sacrifice himself /herself (oblatory state).

The absolutization of the proper sensitive-emotive criteria in neurosis represents a pride which, though almost always hidden, is not difficult to discover: “The pride that beats in the bottom of every hypertrophy of sensitivity can be shown in any case to be absolutization of the relative in neurosis and psychopathies.”<sup>3</sup>

The greed of the neurotic corresponds with the vicious circle produced by an egocentric attitude, which we already have explained:

It is rooted in the fact that no egocentric aim can be attained again and again without considerably intensifying the means necessary to achieve it. It produces an intensification of symptoms and the person may more or less consciously resort to more drastic measures. (Künkel, 1984, p. 109)

Caruso saw this intensification of symptoms as being produced by neurotic greed and found its foundations in absolutization. Neurosis can evolve into a totalitarian viral attitude that hinges upon an absolutization that leads the neurotic to feel a complete and specific lack of satisfaction of experiences.

Caruso frames the neurotic culpability as one of the many “shady deals” which the neurotic elaborates in order not to accept and tackle the challenges of life. In order for the neurotic not to tackle the true guilt of pride, which consists of identifying himself/herself with his/her ideal and excludes from the conscience the contents that do not harmonize with this ideal, s/he also ignores those things for which s/he does not feel responsible. However, s/he then develops feelings of pathological guilt that are characterized by his/her subjectivity and false localization.

This false localization of guilt has its origin in the lack of humility, as pride does not recognize that we are guilty, before recognizing that it considers even more comfortable the imposition of a false guilt... the false localization necessarily leads to an apparent self-accusation and in a secondary way also to aggressiveness<sup>4</sup>.

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<sup>3</sup> *La soberbia que late en el fondo de toda hipertrofia de la sensibilidad es demostrable en cualquier caso de absolutización de lo relativo en las neurosis y psicopatías.* (Caruso, 1954, p. 70)

<sup>4</sup> *La neurosis localiza falsamente la culpa por falta de humildad, pues la soberbia no concede que somos culpables, sino que considera más cómodo incluso el imponerse una falsa culpa...la falsa localización conduce necesariamente a una aparente inculpación propia y secundariamente también a la agresividad.* (Caruso, 1954, p. 65)

In this acceptance of pride, a parallelism can be seen with the contributions to neurosis by Karen Horney, who describes the activation of the pride system and neurotic symptoms. Horney does not, however, explain in depth the participation of one's own freedom and responsibility in this activation of the system of arrogance. Caruso does not make objections to using more properly moral terminology. He puts forward the lack of the virtue of humility as the origin of the false localization of guilt, and defends the contributions of metaphysics and ethics to a true understanding of neurosis. The false representations and localizations, elaborated in order not to distinguish between the legitimate and the illegitimate, the apparent and the real, the relative and the absolute, go well beyond the dominions of psychology.

In spite of all these features, Caruso finds a positive aspect in neurotic suffering and the absolutization phenomenon because it reveals a struggle to get out of the neurotic's false existence. Constantly unfaithful towards the sense of life, the neurotic, however, has the premonition of a vocation, which s/he perceives in her/his deceit. The neurotic suffers precisely for this reason: s/he suffers from the limitation, threat and degradation of being.

## **2.7. Lack of virtues and distortion of personality according to Martín F. Echavarría**

The metaphysical assumption of the bourgeois with the consequent unconditional optimism in our own psychological capacities, in which our society is immersed, has discredited our understanding and appreciation of the virtues, due to the misunderstandings that distort them. This has produced a rejection of their qualities and effects. There has been such a conceptual falsification of the virtues that their significant nucleus is in danger of asphyxia. The moral or ethical life has been falsely understood as unheroic and without risk. Thus the overcoming of challenges and difficulties is understood as a simple mechanical evolution of the vegetal type, in which the person reaches genuine maturity, without the need of difficult decisions, internal struggles or moral dilemmas that touch the very deepest. To understand the depth of the virtues in the configuration of the personality it is necessary to abandon the moral lukewarmness, in which maturity is not a sustained inauthentic effort. We need to penetrate the intimate reality of the human being where all the vital decisions are prepared.

With this intention, thanks to authors such as Martín Echavarría (2005), who base their work on Thomas Aquinas, we enter into the configuration of the personality in the context of the virtues. Echavarría declares that many neurotic disorders are



accompanied by the absence of the fundamental virtues that prop up personality. Virtue in this case is understood in Aquinas' terms: *ultimum potentiae*, the highest a person can aim at, in other words, the achievement of human possibilities in both natural and supernatural aspects. According to Aristotle (1941), virtues involve a "state of character which makes him do his own work well... (n.1106a23) and entails not only knowing and freely choosing good acts for their own sake, but also acquiring dispositions to do so with a firm and unchangeable character" (n.1105a34). They amplify the determining motives of our behaviour beyond what we conceive through our normal psychological capacities. Supernatural love, for example, is shaped the root of the behaviour of the person and exceeds the normal possibilities of psychological experiences. Every act and decision under the effect of the virtues liberates the person for still greater flourishing.

### *2.7.1. The desultory love of oneself*

Aquinas described the consequences of the "desultory love of oneself" that coincides with the egocentricity we are studying in this thesis. The Greeks called it the disorder of self-loving (*philautia*). It appears as the subjective principle in the disorder of character because what appears as a purpose (oneself) should be the beginning not the end. What Adler defines as the fictitious aim (guiding model) is seen from the standpoint of the "desultory love of oneself" as the exclusive satisfaction of oneself. This false objective begins the organization of the neurotic character as it takes from the psyche, and the self-love force manages all affective life and all intellectual capacities. This produces cognitive distortions and an immature affectivity that leads the individual to the exaggerated use of defence mechanisms. When a human's ultimate goal is nothing more than oneself, s/he is pursued by a deformation of the whole affective, cognitive, wilful and emotional nature of the person. Distortions of the character appear which for convenience unify the personality in a pathologic way, and seemingly overcome inner contradictions and conflicts. The desultory love of oneself then disintegrates the emotional core of the human being.

What interests us at this juncture is to underline some of the observations collected in the thesis of Aquinas, though they were made in very theological language and are difficult to interpret in psychological terms. Despite this, Echavarría has made the effort to bring them closer to home.

As a fundamental idea, this desultory self-loving could express itself at three different levels: at the sensorial level, and thus affecting bodily nature (somatic level); at the psychological level, in which certain faculties such as the imagination are affected; and at the fundamental level of life or excellence, which leads towards a vanity. From

a Christian standpoint, this unordered love for oneself is the basis for sin, which is achieved by “malice”, i.e. by a usual elective inner inclination, which means by the personal decision or by more or less consistent habit over time in which one imposes desultory love for oneself as the only standard. These three types of desultory self-loving/*philautia* act as a clamp on the person, limiting personal growth and deforming character. Fromm (1956) argues that this love for oneself is, rather, the opposite:

That the selfish person does not love himself too much but too little; in fact he hates himself. This lack of fondness and care for himself, which is only one expression of his lack of productiveness, leaves him empty and frustrated. (p. 60)

Echavarría studies the consequences of the so-called “capital vices”, or lack of virtue, that derive from this disordered love for oneself. Though current psychological language is devoid of ethical considerations, it would be helpful to make a little incursion into these capital vices, as we shall see how many of their effects coincide with some descriptions of present personality disorders.

### *2.7.2. Pride as the severest disorder*

It is worthwhile dwelling a moment on pride in order to see the coincidences with the descriptions made by the previously cited authors. Pride is recognized as the severest disorder, as it opposes the virtue of humility. This is described as the first of all vices because it intensifies and settles the rest and always promotes another ultimately egotistical objective. The lack of humility produces a distortion of self-knowledge, which leads to a fiction and an eagerness to be superior to others, which amounts to vainglory.

This arrogance challenges all kinds of authority or limitations, whether they are the limitations of life itself or any kind of human or divine authority. This pride is latent in many psychological currents. Indeed, even the mechanism of repression or denial plays a fundamental role in hurt pride. This is explained by the French psychoanalyst P. Assoun (1997):

It is the self-esteem of the ego that makes the repression possible. It means indeed explaining why a particular object represses a certain emotion he considers unacceptable, while he remains indifferent to another one. This supposes that an ideal has become conceited... It is the ideal ego that fulfils the role of censure, in the sense of social control<sup>5</sup>.

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<sup>5</sup> This reference belongs to the French edition of "*Psychoanalyse*" and says: *C'est l'auto-estime du moi qui rend possible le refoulement. Il s'agit en effect d, expliquer pourquoi tel sujet refoule telle motion qu'il estime inadmissible, alors qu'il reste indifférent à tel autre. Cela suppose qu "il a érigé en lui un idéal...C'est cette instance du "moi idéal" qui fait office de censure, au sens de controle social.* (p. 426)

Even Freud himself recognizes the deep-rooted attitude of stubbornness and pride in the neurotic, for example, in the Oedipus complex as a rebellion against the father. Freud, however, maintains a very fatalist position and understands this rebellion as irreversible as it is founded in the very beginning of the constitution of the psyche, which is the tendency for conflict that comes from the pulsing duality originated in "Eros and Tanatos" (Freud, 1937). Allers is the author who best associates neurosis with this rebellion: "neurosis is due to the exaggeration of the tension between the will of power and the possibility of power" (Allers, 1931, p. 321).

Stemming from pride are other vices that appear as ramifications that lead to a great diversity of character. The previously mentioned vainglory or vanity appears as the immoderate manifestation of pride. This vanity is able to stop free development, because, as Adler points out, it always makes the person think about what will capture consideration and admiration from others.

Another manifestation of pride is pusillanimity or timidity: the fearful person considers s/he is not able to do things, which in reality are within his/her capacity. This is the other side of pride, but by defect. Instead of maximizing his/her potential by searching for something that demands more of him/her, the fearful person withdraws from his/her true potential by refusing the tendency towards what is proportionate to his/her potential (Echavarría, 2005) S/he hides behind both a lack of knowledge of himself/herself and a fear of failure.

Even if the concept of vainglory or vanity is easily related to narcissism, the same does not happen with pusillanimity, which has often been erroneously identified with humility. The egocentricity underpinning vanity is very palpable as attention is exaggeratedly directed towards oneself. The same does not happen with timidity, which instead seems to encourage the shunning of attention, prestige or grandeur. Pieper (2010) hits the nail on the head when he associates timidity with egocentricity.

Indeed, the pusillanimous subject searches absolute personal security at all cost, and this orientates egocentrically his eagerness in pro of this security, but he will also fail when the achievement of goodness obliges him to stand pain<sup>6</sup>.

When, apart from desultory love to oneself, there is absence of the main virtues such as fortitude, temperance and prudence, the resulting distortion of character has some particular characteristics. Pieper explains that prudence has two aspects, a cognitive one that turns towards reality to evaluate this, and another that is resolving and

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<sup>6</sup> Taken from a Spanish edition of the book "Las virtudes fundamentales" which says: *El individuo pusilánime, mientras orienta ego-céntricamente sus afanes en pro de su absoluta seguridad personal, fracasará también con verosimilitud cuando la realización del bien le exija soportar el dolor de ser herido.* (Pieper, 2010, p. 205)

prescriptive, that turns towards loving and working. Thus, prudence promotes an adequate evaluation of reality. It helps us to accept or refuse to achieve a concrete resolving action. This virtue makes our reasoning develop to the limit, in order to distinguish both external dispositions and internal states. The fruit of this reflexion and of the act of will-power implies and develops our responsibility and compromise (Pieper, 2010). When prudence is not practised in both aspects, different deformations of the personality appear, mainly characterized by incredulity, which has different manifestations: insecurity, infidelity to values and distrust. Temperance is the virtue through which order is created in the inner being of the person and its most immediate result is “tranquillity of mind”. The lack of temperance or moderation can go as far as to throw the person into confusion and even, in the end, to the destruction of peace of mind and the development of true hate towards oneself and others. The different deformations of the personality that appear are mainly characterized by hate, which has different manifestations: indifference, aversion and, in the most extreme cases, the development of addictions and aggressiveness. Finally, fortitude, or courage, is the capacity to resist that which would oppress oneself. It has nothing in common with the absence of fear, but instead deals with the fact that a reasonable fear must often be overcome by energetic activity of the person to protect the good. The lack of fortitude is mainly characterized by despair, which is manifested in pessimism, passivity, discouragement and cowardice.

## **2.8. Selfism as idolatry in Paul C. Vitz’s theory**

Finally, Paul C. Vitz, in his book “Psychology as religion: The cult of self worship” (1994) explained the hypothesis that the humanistic model of human behaviour in recent decades unfortunately has been pervaded with this egocentric approach and that it has had a widespread appeal in our culture: “The consumer economy, combined with natural human pride, has created a psychology that is focused on the individual’s glorification of his or her own self” (p. 124).

This widespread self-worship derived from humanistic psychology leads to a painful reality, which is the breakdown of interpersonal relations. The distance and consequent alienation from others under the fundamental logic of self-actualization is what Vitz terms “existential narcissism” and, like egocentricity, it may often be chosen in adult life. This process distances people from each other, as Herbert Hendin (1975) described it in “The Age of Sensation”, a psychoanalytic exploration of several hundred college-age young people:

This culture is marked by a self-interest and egocentrism that increasingly reduces all relations to the question: What am I getting out of it?... Society's fascination with self-aggrandizement makes many young people judge all relationships in terms of winning and losing points. (p. 13)

To worship one's self (in self-realization) is simply an idolatry operating with the usual motive of unconscious egotism. Disguised self-love has been recognized as the source of idolatry. This idolatry of one's self coincides with Caruso's approach of absolutization of the finite. In this case, the egocentric person adopts a totalitarian attitude to one's self. Vitz also saw a link between disguised egocentricity and a clinical condition, in this case some forms of depression (1994):

Depression and negative thoughts about one self are often the result of aggression turned against the self, an aggression or self-hatred that occurs when one fails to meet one's own high standards for success. An enormous amount of pride lurks behind our attachment to the standards we fail to live up to. (p. 131)

Vitz's principle contribution is the Christian perspective he offers to the understanding of the bases of this egocentric trend. Regardless of whether it is fear, rebellion, social, psychological or biological circumstances combined with personal predispositions and temperament, the various ways pathological egocentricity is expressed can be understood as the vicissitudes of original sin. Egocentricity finds expressions at different stages of development and under different circumstances due to our fallen human nature (Vitz & Gartner, 1989). Our current culture, instead of offering appropriate measures to overcome this egocentric trend and promote healthy and committed relationships, promotes and reaffirms this pseudo-value that condemns human beings to isolation under the illusion of self-realization at any cost. This author, however, offers Christian identification as a way to overcome this egocentric attitude, as it does not involve channelling human energies towards the self (Vitz & Gartner, 1984):

Christian identification involves directing human energy towards God and receiving from Him a supernatural cathexis of divine love, an infusion of agape...the Holy Spirit thus allows for the expression of true altruism -agape- towards others. (p. 86)

Before following up on the relevance of a Christian understanding of egocentricity and its possible therapeutic application, it will be useful to extend the egocentric logic to personality disorders. The remaining virtues or their absence will be explained in the next chapter in order to see the coincidences with some personality disorders. To conclude here, though, we believe that authors such as Echavarría and Vitz remind

us that psychology and ethics are not as far apart as they have seemed. Their complementary nature makes consideration of these two disciplines a requirement for a deeper understanding of psychopathology. The complexity of this relation cannot be understood if we do not explore the moral and spiritual dimension of the human being.

## **CHAPTER THREE. MODEL OF ANALYSIS OF DIFFERENT PERSONALITY DISORDERS**





### **3.1 Personality disorders: definition and controversy**

Personality disorder is a construct that social and clinical scientists use in an attempt to deal with the complex phenomenon that results when the personality is not functionally optimally. According to the categorical classification based on Diagnostic and Statistical Manual of Mental Disorders-5 (DSM-5) published by the American Psychiatry Association (2013), a personality disorder (PD) is defined as an enduring pattern of inner experience and behaviour that deviates markedly from the expectations of the individual's culture, is pervasive and inflexible, has an onset in adolescence or early adulthood, is stable over time and leads to distress or impairment. As Millon and Davis (1999) suggested, this is a very controversial field, "no other area in the study of psychopathology is fraught with more controversy than the personality disorders" (p. 551).

In fact, despite many decades of research the most straightforward method of validating the theory that the different PDs represents different syndromes of dysfunctions (the syndrome perspective involves the identification of a constellation of symptoms that are thought to stem from a common cause or to indicate a disease or abnormal condition) has produced no evidence supporting the syndromal mode (Widiger, 2013). The etiology of personality disorders is multifactorial and complex, probably with multiple developmental pathways. Attempts to reduce the cause of a complex phenomenon to one level of abstraction such as trauma, biological, social, or interpersonal are likely to be fruitless. Multiple pathways can lead to the same overt outcome—for instance, a particular form of personality disorder—and no specific risk factor would be expected to be necessary or sufficient for the development of a particular outcome (Bartholomew, Kwong, & Hart, 2001). In all this process the interaction between cultural and social factors with biological influences such as constitution, temperament or even systematic neurological defects has been studied. But little or even no attention has been paid to the participation of the human free will and virtues in personality development. It offers an interdisciplinary approach which has been already been suggested by theorists of personality such as Rychlak (1973) who, in the preface of his book "Introduction to personality and psychotherapy: a theory construction approach", states: "the best schema and series of issues to unify personality theory would seem to be drawn from the history of philosophy and science". This need opens an interactive and fruitful exchange between psychology and ethics.

Charland (2004) is one of the authors who calls for moral involvement in personality disorders. He defends the thesis that Cluster B personality disorders of DSM-IV are really moral categories and not genuine medical kinds. This can be defended on the basis of the kind of treatment required for their “cure”. This is called the “argument for treatment”. Charland says that although a wide variety of treatments that are more or less effective in treating some of the personality disorders that now exist, there is still an important subset of personality disorders out of the medical loop. These disorders are antisocial, borderline, histrionic and narcissistic type. Thus, it is impossible to imagine a successful “treatment” or “cure” for those conditions that does not involve some sort of conversion or change in moral character. On this basis, it can be argued that these are fundamentally moral conditions and consequently that their treatment requires a sort of moral treatment. A full cure requires moral willingness, moral change and moral effort. According to some of the characteristics of cluster B PDs, either by explicit or implicit mention, exhibit morally objectionable and reprehensible behaviour toward others. For example, “a pervasive pattern of disregard for and violation of the rights of others” in antisocial personality; “a lack of empathy” in narcissistic PD; “excessive attention seeking” in histrionic PD; and “inappropriate, intense anger and instability in interpersonal relations” in BP (Charland, 2004). Charland does not defend the same thesis for Cluster A and C personality disorders. Definitions of these disorders do not appear to imply moral terms and notions. In fact, he says that the behaviours captured by cluster A and C are morally neutral because these people do not annoy others and they do not necessarily intend to annoy them for the sake of it. There is nothing in the diagnosis that logically implies the intention to embarrass or ignore others. Of course, cure and treatment for these conditions do require willingness and effort, but not the sort of moral willingness and effort required by the Cluster B disorders. Thus, according to Charland, one can be fully cured of obsessive-compulsive but still have an evil character and intend to perform immoral actions.

Obviously, this concept lacks higher moral standards of human wishes. From a pragmatic point of view, morally neutral can be understood as merely absence of harming others. We suggest that morality is not merely about the avoidance of wrongdoing; ethics is best viewed as a striving toward the highest ethical ideals, not just as an injunction against rule violation. From a Christian/Catholic point of view, moral standard applies to the full realization of the person, which implies a complete range of human potential. It is not enough to consider a complete range of human nature the fact of not having annoying human relationships. Full development implies

a flourishing of the virtues that allow self-donation and commitment. None of these conditions are seen in personality disorders.

In contrast with the moral versus medical approach, Zachar (2010) proposes virtue ethics to clarify the understanding of personality disorders, because under his perspective many personality disorders could be associated with traditional moral vice, namely in the five-factor model low agreeableness. As from the virtue ethics, Zachar seems to sustain the possibility of a double nature of personality disorders. The virtue ethics assumes that the person, through his/her actions, models his/her character. From here a way of being could be followed which, from the clinical evaluation, could be considered a disorder.

### **3.2. Model of analysis of personality disorders**

The problem with studying psychopathology through the fragmented lenses of various disorders and clinical syndromes is that the richness of the study of humankind is lost. The DSM model represents an approach that is necessary, but not sufficient. The diagnosis categories of DSM can be used more effectively when placed within a conceptual framework that encompasses the fullness of the human persons, including the spiritual and ethical aspect of human development. Without this perspective any system of psychotherapy lacks direction and meaning. There is no question in affirming that the DSM project remains the most rigorous and best researched diagnostic tool available to clinical psychology. The principal dissatisfaction with the DSM is that human experiences are not examined in the context of what constitutes a complete and thriving person. Insofar as a Catholic/Christian model of well-being captures more fully than the current materialist model, the range and content of human flourishing, it can serve as a more complete framework for interpreting the content of diagnostic categories as the failure to realize fully some human potentials or faculties (Scrofani & Ross, 2009).

We propose to analyse personality disorders under a Christian/Catholic model. Under this model there is no doubt that organically predisposed factors may exist. But very likely the factor that triggers the transformation of a mere predisposition into a disorder is the lack of development of personality by virtue. Virtues allow us to have self-agency and not to surrender ourselves to our emotions and corporal states. Every specific relation and situation gives us the opportunity to develop a specific virtue, which makes possible the formation of specific dispositions. Many Christian authors, such as Frank Moncher (2009), Craig Titus (2009), Phil Scrofani (2009) and

James Grice (2011) backs this model. Even on behalf of secular psychology, authors such as Erikson (1964) and Fromm (1987) have affirmed that the normal and mature personality is the virtuous personality. More recently, authors in the field of positive psychology, such as Martin Seligman (2002) have made great effort to rescue the notion of character and virtue in the study of personality. Moreover, Richardson (2012) proposes that the inclusion of virtue in the field of psychology and psychotherapy would help to overcome individualism and instrumentalism. The crucial aspect is that the development of virtues can reorder the affective relationships to desires and difficulties, establishing such a unity with one's goal that it assists discernment and judgement regarding the means to the end, even at a pre-discursive or emotional level (Titus & Moncher, 2009). So in virtue ethics, our actions over time develop the sort of character we become; neither virtues nor vices spring out of single acts. According to virtue theorists, if a person with a personality flaw seems to knowingly and voluntarily seek out activities that reinforce maladaptive behaviours, s/he will eventually have a stable disposition to perform those behaviours. This element of choice affords a degree of consent to what eventually becomes inflexible, an automatic behaviour. Under this paradigm, we propose that the lack of development of virtue distorts the personality, establishing a fragmentation of the personhood and a lack of unity with one's good goals. This lack of unity with one's good goals leads to egocentric dispositions at different levels or domains that deprives the person from the proper unfolding of her/his abilities and leads to lack of self-giving.

Before starting the analysis of different personality disorders it is important to make the distinction between classical neurosis and character neurosis that Adler (1912) first proposed and Horney (1964) developed. She stated that neurosis may occur in a person whose personality is intact or undistorted, developing as a reaction to an external situation which is filled with conflicts. For the purpose of this thesis we are not interested in this kind of neurosis because they reveal no neurotic personality but only a momentary lack of adaptation to a given difficult situation. We will focus on character neurosis because the main disturbance lies in the deformation of character. They are insidious chronic processes in which personal choices would contribute to their development. It can then involve greater or lesser parts of the personality in a greater or lesser intensity. As we will show, later deformations of character lie in all the personality disorders and therefore they could be understood as character neuroses, although symptoms may vary considerably. There is, then, a correspondence between classical character neurosis and current personality

disorders. In all of them there is an egocentric attitude which would manifest in several domains in a greater or lesser intensity.

For the analysis of any personality disorder we will follow a general schema based on the Aristotelian understanding of cause. Specifically, cause was understood from a fourfold perspective: efficient, material, formal and final. These four causes are defined as necessary for effects. Grice (2011) offers a simple example to understand these causes. The paper on which a book is printed can be considered to be composed primarily of wood fibres, which would be the material cause. The book has a particular shape or form critical to what it is, which would be the formal cause. One book might be different from other made of the same material. Efficient cause is the agent that produces the movement from potentiality to actuality resulting in the paper. In other words, it produces the sequence of steps taken through time to produce the paper (e.g., cutting down the trees that are potentially paper, chipping and pulping the wood, treating the pulp and rolling the fibres into sheets). Lastly, the final cause of the paper is the purpose for which it was intended.

Contemporary psychologists typically ignore Aristotle's four causes. They instead rely on a restricted notion of cause codified in the canons of propositional logic. They have reduced causes to only two, which would be the material (natural) and efficient-mechanical (social) cause, ignoring the role of the will and personal decisions. However, the fourfold perspective as an integrated model allows us to elucidate the structures and processes of nature and human action and provides a more complete picture of causality. In modern psychology, teleology, or final cause, is not taken seriously, at least not to the point of being considered as central to our understanding of human action. They have been implicit in various psychology theories, but these causes have not been made explicit nor played a conscious role. Final cause, in particular, provides the means for modelling purposes, which is one of humanity's more enigmatic and important powers. It is then, a person-centred approach.

### *3.2.1. Material and Formal Cause*

People are born with different temperaments based on the expression of traits or predispositions acquired in early stages of development. They may have their expression transformed as later faculties or dispositions (Millon et al., 1999). These traits would be the material cause. The way these personal traits are hierarchically combined among themselves would be the formal cause.

According to Allport (1963), there is a personality disposition of major significance termed the cardinal disposition because it gives shape to the rest of the traits and

would be like the principal actor. It is pervasive and outstanding in a life. We have also central traits or dispositions that would be the relevant number of traits that are the more characteristic of a person and then we also have secondary dispositions that would be more peripheral. They are not as often called into play as central dispositions. Allport thus implicitly makes reference to this formal cause, which would be the order of the traits among themselves. Meanwhile, material cause is the group of traits that a person has. Formal cause is determined, as we will show, by the final cause.

For the purpose of this dissertation we will describe this material and formal cause of personality in terms of multiple traits according to the Five-Factor Model. Although this model enjoys considerable empirical support compiled over decades, it is not a theory of personality, so it would be insufficient to consider it alone to understand personality. Its authors use it as descriptive labels without claiming any underlying metaphysical existence or causal power, or explanatory role to play (Miller, 2014). This model explains any behaviour based on the possession of some personality traits, but it does not make any mention of goals, plans, values or motives, that are so crucial for personality. Therefore, it cannot explain the complex acquisition of dispositions (disposition to form beliefs and desires) in which the human will is involved. Consequently, the five-factor model does not distinguish traits from tendencies or dispositions, from developed virtues and vices. Its authors consider them all as personality traits with a genetic origin (McCrae, 2013). Despite its deficiency, it is a good model to show the material cause and formal cause, the main traits and the way they are organized in every personality disorder. The group of traits for every personality would be the material cause. In this model they are the five main personality dimensions underlying the variations in an individual's personality traits, which could be identified as the material. They are shown in Table 1.1. The particular way some traits of every dimension stand out and give a particular configuration for every personality disorder would be the formal cause.

Personality pathology would be associated with inflexibility or extreme degrees of personality traits and different combinations may discriminate between them.

Table 1.1 Description of personality factors of Five Factor Model

FACTOR	DESCRIPTION
Neuroticism (also termed emotional instability, nervousness)	This refers to the chronic level of emotional adjustment and instability. High neuroticism identifies persons who are prone to psychological distress. It includes the following facets: anxiety, angry, hostility, depression, self-consciousness, impulsivity and vulnerability.
Extraversion (also termed energy, enthusiasm)	This refers to the quantity and intensity of preferred interactions, activity level, need for stimulation and capacity for joy. People who are high in extraversion tend to be sociable, active, talkative, person-oriented, optimistic, fun and affectionate. It includes the following facets: warm, gregariousness, assertiveness, activity seeking and positive emotions.
Openness to experience (also termed originality, open-mindedness)	This involves the active seeking and appreciation of experiences for their own sake. It includes the following facets: fantasy, aesthetics, feelings, actions, ideas and values.
Conscientiousness (also termed constraint, control of impulse)	This assesses the degree of organization, persistence, control and motivation in goal-directed behavior. It includes the following facets: competence, order, dutifulness, achievement, self-discipline and deliberation.
Agreeableness (also termed altruism, affection)	This is, as extraversion, an interpersonal dimension and refers to the kinds of interactions a person prefers along a continuum from compassion to antagonism. It includes the following facets: trust, straightforwardness, altruism, compliance, modesty and tender-mindedness

Every factor could be clearly disposed to the development of specific virtues, for example, moderate levels of neuroticism would be related to *temperantia* and moderate conscientiousness with prudence. Traits would thus be temperamental predispositions toward the development of virtues. Under this model, personality traits do not constrain human liberty and creativity. In fact, quite the opposite, as it gives the opportunity to develop them according their final motive of life, goals and decisions. It is thus indispensable to consider the other two causes (efficient and final) to fully understand formation of personality.

### 3.2.2. Efficient Cause

Efficient cause is the agent that allows the movements from potentiality to actuality. It is the agent that produces the caused reality with a specific aim in mind (Echavarría, 2013). To understand this cause we need to adopt a processing approach in the study of character to determine what the particular psychological processes—such as dispositions to form beliefs and desires—are in each person’s mind (Miller, 2014). It is thus indispensable to apply to decisions the person makes and the thoughts and

feelings behind these decisions. This cause implies the participation of free will in these crucial decisions because, through them, people shape their inclinations or predispositions. Each kind of matter (emotions, demands, interpersonal relationships, choices and reasons) has multiple types of directionality and consequences. Virtues and vices can be gradually developed and internalized and become firm and settled through years of formation. This approach allows us to communicate the riches of virtue ethics and psychology. The psychologist Peter Hampson (2012) proposes the concept of *habitus* as a way to resolve the puzzling gaps in psychology. This author clarifies this classical concept and the integrating role it offers in psychology:

For Aquinas *habitus* refers to the ways in which repeated acts become perfected dispositions to act for good or ill; this is how, if repeated, they become part of our second nature... *Habitus* then moves closer to actualizing (making real) the goods we value, desire, and seek until we cohere with them. The concept requires, implicitly or explicitly, an account of what constitutes the goods or goods, as actions are inextricably bound to goals. It implies that our actions become more attuned to their goals as they approach them. (p. 7)

If *habitus* underpins all repeated acts, the virtues and vices emerges through them. Consequently, both virtues and vices are *habitus* that can eventually become “natural” to us (DeYoung, 2009). In this thesis we accept the challenge raised by Hampson of initiating the not yet explored route from the *habitus* towards the formation of the character.

In this part we will analyse how some personality predispositions or traits can be structured by efficient cause as vicious and therefore may negatively dispose affectivity regarding exclusively to one’s self. Under this view, the transformation of a mere predisposition into a disorder is possibly due to the establishment of a vicious character. It is due to enduring maladaptive dispositions that vices inculcate into their sensory, affective, rational and volitional powers through repeated choices of particular kinds. Thus, personality can be structured under the inclination of different vices and, therefore, different pathological complexes can be distinguished depending of the vices they depend on (Echavarria, 2005).

According to Gabriele Taylor (2006), vices are similar in their structure in that the person’s thought and desires, while differing in content depending on the vice in question. However, a general consequence is that all of them always focus primarily on the self and its position in the world, so all of them involve an egocentric attitude although it can be more or less directed:



All the viciously proud are wholly self-centred; their view of the world is the view of themselves in the world. But such explicit self-consciousness may be more or less directly so; the I-desires it involves may or not be basic. At one extreme, explicit self-consciousness is quite patent, focusing directly on the self-image, as does Narcissus admiring his reflection in the water. At the other extreme the concentration of the self is so indirect that the distinction between implicit and explicit self-consciousness becomes blurred. In between these extremes, the self-consciousness of the proud is, to various degrees, directly or indirectly focused on the self. (loc. 1011)

They act in certain patterned ways because they alter the directions of the thoughts and introduce relevant vice-concepts into the deliberation and a failure in perception, which leads to confusion and ignorance. The point is that if a person is in the grip of one or other vices her/his general attitude to life will be so ingrained that it cannot be explained by reference to the lack of only some mental state, or the defects of some mental faculty. The cooperation of will must be behind it and thus indicates that vice is well-established (as with virtues). This establishment has tragic consequences, which are:

- The person is committed to defective modes of perceiving the world and herself/himself, which will have an impact of his/her moods and desires, which will confirm the person's relevant perspective of life. The whole framework of his/her deliberation will be ill-founded.
- It would be possible, though difficult, to change one's perspective depending of the degrees of involvement. But a kind of self-deception directs attention away from the action and the will towards the relevance moral considerations of the inner life, so the possibility of taking up a contemplative attitude towards the good will be more difficult. This attitude may be destructive of the self and prevent its flourishing.
- The last consequence is the harm they produce to those who possess them and to others. They will tend to harm others in different ways, for instance through indifference, violence or exploitation:

Focusing their view on themselves in the world they will tend not to see the needs and sufferings of others even on those occasions when they could expect to make them their concern. They are predisposed towards thoughtless cruelty and brutality. (Taylor 2006, loc. 1459)

Exploring, then, the vice-disorder relationship, can be seen to be very important because as Zachar (2010) says:

An intersectional approach to vice and disorder may more accurately reflect the complexity of our judgments of what counts as a vice and what counts as a disorder, and it may help us all to understand the ways in which culturally inflected moral norms are irreducibly part of the practice of psychiatry. (p. 108)

Therefore this approach can apply to the understanding of personality disorders, and therefore they can help clinicians and researchers to think about disorders in a less absolute and more contextualized manner.

### 3.2.3. *Final Cause*

Every personality trait has a particular end but the whole personality can only be understood according to the last cause or sense of life that organizes and hierarchies the combination of traits. Thus, it has an impact on the formal cause, the way traits are organized; it can provide a harmony between them. The whole structure of personality, thus can only be understood, based on the final cause that provides order and hierarchy in traits.

Life's ultimate goals may shape personality gradually since they reorder cognitions, affects, behaviour and relationships into an integrated whole (Fowers, 2005). Thus life goals offer a meaning and an ethical orientation and allow us to act with agency and not to surrender ourselves to our emotional and corporal states. The last goal or ideals can be periodically refined through the challenge of new circumstances of life. If the final motive of goal is objectively adequate for human flourishing, it would provide an opportunity for development. By contrast, if a fictitious plan is established, then the body, rational, volitional and interpersonal domain will suffer a progressive decline that will distort the whole personality because a fictitious plan does not remain restricted to one area but gradually can pervade the entire personality.

Thus, it can be said that well ordered acts create emotional, relational, rational and volitional dispositions which find harmony when exhibiting a twofold order: the dispositions ordered among themselves and ordered to the person's ultimate end (McInerney, 2006). In general, good *habitus* direct us swiftly, smoothly, and reliably toward certain types of action. If, on the contrary, dispositions are not ordered to the person's ultimate end, dispositions are integrated around a vice which leads to a distorted personality (integration without harmony). Philosophers describe the perfect

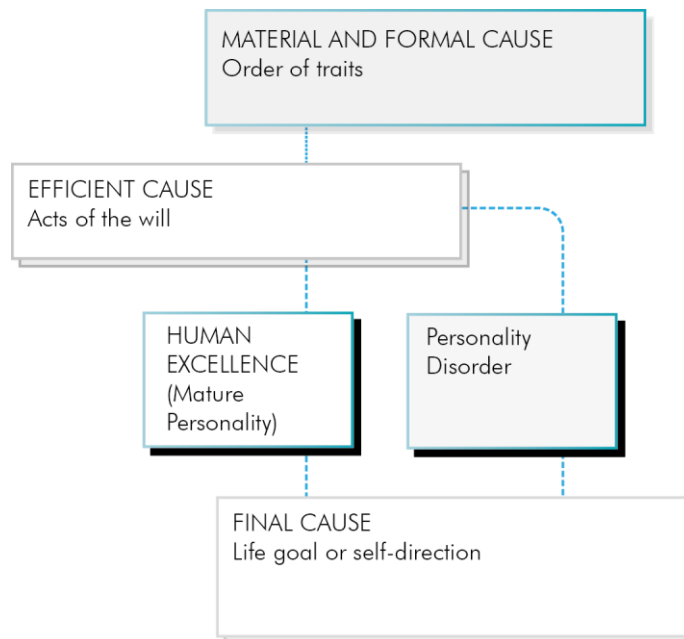
achievement of virtue as yielding internal harmony and integrity. If dispositions are not even ordered to any end, then we have a disintegrated personality.

This cause is similar to the new element of personality, “self-direction”, which section III of new DSM-5 proposes. This section includes an alternative model for personality disorders where “self-direction” is defined as: “a pursuit of coherent and meaningful short-term and life goals, utilization of constructive and prosocial internal standards of behavior; ability to self-reflect productively” (American Psychiatric Association, 2013, p. 762).

Final cause would be specially related with life goals. The need for admiration, protection, control, stability, security, adoration, forgiveness, attention and care are a kind of “licit” need, but if they are established as the final motive or goal, an egocentric attitude may draw the whole personality towards it. Under this labyrinthine complex of false reactions, the egocentric person consumes all his/her energy in an effort to secure a supply for his/her needs and consumes a lot of vitality in the maintenance of these needs. The self-centred person becomes a predator, preying on others in order to satisfy of his/her cravings and appetites for admiration, attention, security, disengaged stability and control. It leads to a self-referential attitude leading to the exhaustion of ordered creativity.

In order to adopt a processing approach in the study of personality, the particular biography of any person with his/her motives and goals would need to be known. In the theoretical description of personality disorders we can assume a specific false final cause and the establishment of specific vices according to their manifestations. The analysis should determine the particular psychological and ethical process in each person in the development of personality. Obviously, it cannot be done in a doctoral dissertation but it offers an integrated way of approaching it in clinical practice. Figure 1.1. below presents a description of the model of study personality attending the four different causes.

Fig 1.1. Model of study showing four different causes



Brugger (2009) and Vitz, Nordling & Titus (2015) proposes a conception of the human person derived from philosophical reasoning (including the Aristotelian-Thomistic tradition, Christian Personalism and Phenomenology) and from the sources of Christian revelation. According to him, a conception of the human person can be constructed around the formulation of eight anthropological domains. Five of the eight constitute premises of philosophical anthropology, namely that humans are bodily, rational, volitional, interpersonally relational and substantially one. The remaining three are premises of theological anthropology, namely that humans are created in the image of God, have fallen as a result of sin and have been redeemed by the salvific activity of God in Christ. The first four correspond directly to Aquinas' four orders. They can be referred to as ontological structures of the human person, although relational is not an ontological faculty per se, but rather an ontological quality, as well as the living structural context in which the other three are historically embedded.

In DSM, the symptoms of personality disorders may vary from person to person, but generally manifest in two or more of the following areas: cognition (how a person perceives and interprets environmental stimuli), affectivity (the range, intensity, lability and appropriateness of emotional responses exhibited by a person), interpersonal functioning and impulse control. Any of these domains can be superimposed by

Brugger's domains. Thus, we will talk about rational domain instead of cognition, bodiliness and volitional domain instead of affectivity. Interpersonal domain would not change and finally the impulse control would be included in bodiliness. We will now describe the specific domains (bodiliness, rational, volitional and relational).

#### *3.2.4. The Bodiliness Domain*

Bodiliness is the order of natural or biological world. This order is the proper subject matter of hard sciences. At the biological level, good order (or health) is principally a functional term, something that can be scientifically studied like the correct functioning of a machine. But human bodiliness is more complex because it involves not only the merely organism dimension (the physiological systems of our vegetative nature), but also includes the sensory dimension, with its complex capacities of perception and emotion. Thus, it contains the neuro-biological substrate for human life that is expressed in the sense of cognition and emotion.

At the level of embodied cognition (or sensible cognition), we have the internal and external senses, through which we engender preconscious thoughts (such as judgment of attraction or repulsion) and conscious thoughts (such memories and imaginations). Before we can form an abstract idea of anything, first we need a preliminary act of sensation.

At the level of embodied affectivity (or sensible affectivity) we also have emotions (*passio*). Emotion in the Christian philosophy of Aquinas is defined as a psychic activity at the sensory part of the person by which the person is able to move towards or away from an object of sensible interest. Emotions, then, enable people to take interest in and interact with the world around them.

The concept of health at the perceptual and emotional level is not reducible to a mechanistic explanation. A human being exists in an integral unity of body and soul (unity of material and spiritual principles) and so perception and emotion are usually informed and influenced by rationality and volition (and, in turn, exercise influence among them).

Emotions are subjected to development processes and correlate with reasoning, willing and interpersonal relationships. Particular emotions express the reasons behind themselves and can direct people towards acting in a way consistent with goals they have chosen in the past (Moncher & Titus, 2009). Therefore, it is important to read the intelligibility of emotions and to control the focus of one's emotional energy because they have intentional content and are directed toward a specific thing or state of affairs.

In human flourishing, this domain allows an accurate perception to be made of the sensible world and preconscious adjudication of what attracts and repels. Enduring emotional dispositions can be ordered in accordance with what is truly good for the human person (Scrofani & Ross, 2009).

### *3.2.5. Rationality Domain or Intellect*

Rationality empowers humans to rise above the world of merely sensory perception to the world of knowledge. The reason why humans can cognitively rise above the perception and emotions of the body is that humans are more than bodily beings. They are bodily-spiritual beings. The substance of intellect is immaterial and these acts of intellect *per se* are not simple acts of the body. They are body-embedded acts since every act of the human person is always the act of the whole person. But the specific faculty of reason is not in a material organ. This domain guarantees human freedom for rational self-direction and free choice insofar as an immaterial faculty is not determined by causative physical law.

This domain makes it possible for us to apprehend the intelligible value of various objects. Thanks to it we can bring order into our patterns of thinking. It allows the rational knowledge while bodiliness allows sensible knowledge. It includes the ability to know ourselves and moral norms.

In human flourishing, rationality allows one to know oneself and to make discerning judgments about one's environment, an accurate discursive judgment about what is true, good, real and beautiful (Scrofani & Ross, 2009).

### *3.2.6. Volitionality Domain or Will*

Practical deliberations, judgments and choices establish in the operation of the will, it is then the anthropological domain of volitionality and freedom. Rationality is a condition of freedom. Free choices require that one is able to understand desirable, deliberate opportunities, over competing alternatives and to intellectually envisage the benefits and burdens each holds. Thus, freedom adds to rationality the capacity for self-direction. Healthy volitionality means humans are not inexorably moved to their ends but rather move themselves to their proper ends.

Since healing is a form of movement, a developmental process by which some capacity of our human nature moves from disorder to greater order. Volitionality, then, is an anthropological domain that stands as a necessary condition for the possibility of personal therapeutic healing.

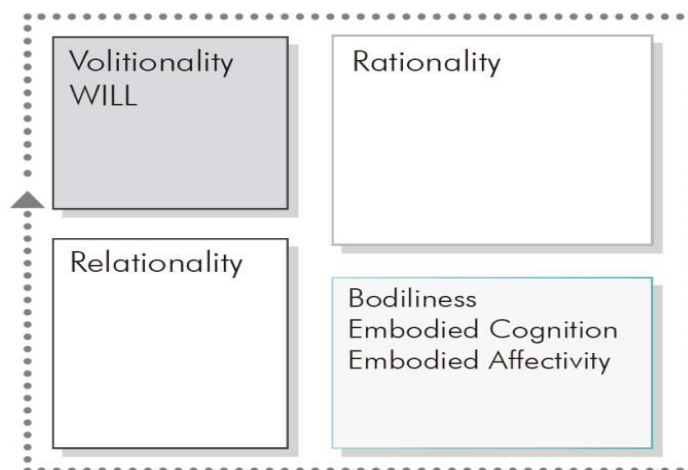
Free choice is a central reality in us by which our actions are able to enter the realm of the moral, the realm of “responsibility”; we are responsible because we are free, that is, not determined to one act. Our feelings and emotions shape and influence our freedom but they are not in themselves moral entities. Aquinas states that they constitute a seat of the moral virtues. We are not responsible for our feelings as simple movements of the sensory part of ourselves, although we can be responsible for our feelings as emotional responses to deliberate thoughts and choices for which we are responsible. Sociological conditions, physical and physiological disorders and the natural endowments and aptitudes of one’s personality all limit human beings’ freedom. But barring complete incapacitation, everyone has a range within which they are free to choose and hence for which they are responsible (Brugger, 2009). Through any free choice, humans reflexively inculcate enduring adaptive or maladaptive dispositions (virtues or vices) into their sensory, affective, rational and volitional powers through repeated choices of particular kinds. Thus, personality is subject to alterations as a result of deliberate human action because the set of enduring dispositions of mind, will and affect are shaped by our morally good or bad choices. Health or flourishing in this domain can be referred to as the capacity to pursue what is good for oneself and for others through responsible and free choices and self-determination.

### *3.2.7. Interpersonal Domain or Relationality*

Relationality involves the socio-cultural dimensions that are necessary for healthy human development and flourishing but can also be the source of some disorders and pathology. Our human faculties are in relationship. There is a dynamic self-determining reciprocity between our bodiliness, rationality and volitionality on the one hand, and our experience of and capacity for interpersonal relationships on the other. Figure 1.2. below shows the four anthropological domains that we will use for the analysis of any personality disorder.

In human flourishing relationality gives strong inclinations and need for life in society, a natural sociability expressed in acquired relationships in the family, with friends and in the larger community.

Figure 1.2.: Anthropological domains of Brugger’s and the Vitz, Nordling & Titus theory.



### 3.2.8. Substantially One

In Christian philosophy, rationality and volitionality are called spiritual faculties (or powers) of the “soul”, so they are considered superior psychic faculties. The inferior belongs to the bodiliness domain. The terms inferior and superior imply a hierarchy: the superior faculties should govern personality and the inferior faculties should have a subsidiary role. However, body sensitivity is able to exert a strong influence on the cognitive domain and modify our judgments and, secondarily, our will.

Classical philosophy proposes that the human person is a substantially unified reality of body and soul, a complete, wholly individuated body-soul-being. The human person is an inseparable psycho-physical-unity. All living operations, including acts of intellect and will, are the acts of this substantially unified being and involve the interaction of soul (psyche) and body (soma). Such shared operations involve changes to both body and soul in what we call psychosomatic interactions. This reality was clearly expressed by Pope Pius XII in his speech to the participants at the International Congress of Psychotherapy and Clinical Psychology on April 13, 1953:

The psychic dynamisms may be in the soul, in the human being. However, these are neither the soul nor the human being. They are energies, maybe, of a considerable intensity, but nature has entrusted their management to the central control point, to the spiritual soul which is gifted with intelligence and will-power, and is normally able to govern these energies. The fact that these dynamisms exercise their pressure over an activity does not



necessarily mean that they compel it. An ontological and psychic reality would be denied, ignoring the soul's role as a central point<sup>7</sup>.

Under this claim, it would be necessary to consider the human being as a psychic entity and whole in spite of the different capabilities it possesses. Any other approach would fall into pernicious reductionisms, as it would imply a subordination of the soul to a concrete psychological function. Along this line, Pope Pius XII in his speech to the participants at the XIII International Congress of Applied Psychology on 10 April, 1958, gave a definition of personality that holds the essence of this entity: "we define personality as a psychosomatic entity of the human being, in as far as it is determined and governed by the soul."<sup>8</sup> Thus, though the dominions maintain their specific nature, they remain linked to each other. The individual, as an indivisible entity and whole, constitutes a unique and universal centre of the being and of the action, an "ego" that holds of itself.

All these domains have a mutual interaction among them and cooperate in any choice and circumstance. Aquinas' theory of emotions offers an optimal framework to grasp this cooperation (or conjunction) and its importance in personality development (Roberts, 2007). The embodied affectivity can apprehend an object as suitable and then can unite with it. This union produces a certain inclination of the sensitivity in respect of that object, meaning that the more it is chosen, the more inclined we are to choose it. Appropriate desires and union towards something that is good (good being understood as something that allows the person to actualize some of his/her own potentials) implies a resonating pleasure and delight. In this process there must be a conjunction of the intellect to evaluate, the will to recognize and to consent, and the embodiment to move toward what we choose (or to move away). When one consents to one's emotion, one apprehends it intellectually as an emotion which is suitable to unite. The complexity comes when, due to mistakes of judgment and immature inclinations of affectivity, one conceives misguided motions of the will, which can lead to regrettable choices.

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<sup>7</sup> Taken from the Spanish Edition of the book "*Psicología y Psiquiatría. Textos del Magisterio Pontificio*" which says: *Estos dinamismos psicológicos pueden estar en el alma, en el hombre; sin embargo, ellos no son ni el alma ni el hombre. Son energías, tal vez, de una intensidad considerable; pero la naturaleza ha confiado su dirección al puesto central, al alma espiritual, dotada de inteligencia y de voluntad, capaz, normalmente, de gobernar estas energías. El que estos dinamismos ejerzan su presión sobre una actividad no significa necesariamente que ellos la obliguen. Se negaría una realidad ontológica y psíquica, discutiendo al alma su puesto central.* (Verdier, 2011, p. 19)

<sup>8</sup> *Definimos la personalidad como la unidad psicósomática del hombre, en cuanto determinada y gobernada por el alma.* (Verdier, 2011, p. 41)

Bad choices progressively inculcate a disordered disposition in the bodiliness structure, which emotionally over and under reacts without allowing an integrated view in the whole personality. This lack of integration at this embodied level negatively influences the human capacity to read emotions and to enact one's rational plans and desires with appropriate promptness and pleasure. It is impossible to access fully this capacity to reason responsibly and choose freely without formative attention to the emotional life (Moncher & Titus, 2009). The challenge, then, is recognizing the reasons within emotions and of integrating emotions with reasoned judgment. Training the emotions to respond to the direction of reason is a difficult task, and its achievement can be considered a virtue (McInerney, 2006).

To maintain inner order, to develop *temperantia*, it is necessary to give reasons of ourselves and to discern our inner states. Thus, it implies not only the primary power of sensible cognition (sensory apprehension) but also the secondary intellectual apprehension. It allows us to engage in higher, intellectual operations through rationality.

The conjunction of the intellect to evaluate, the will to recognize and to consent, and the embodiment to move toward what we choose (or to move away) is flexible in a virtuous person; therefore it allows us to take many different positions in the face of difficulties and problems with great focus and refinement. However, when vice is established there is a rigid and repetitive pattern in the way of responding that, as Taylor (2006) claimed involves a defective mode of perception, an ill-founded deliberation and a self-deception. These rigid patterns are very close to the concept of schemas. Beck (1990) developed a cognitive theory of personality disorders whose focus remains on the cognitive structures, central to which is the concept of schemas. According to him, they are cognitive structures that assign meaning to perception. He suggested that cognitive, affective and motivational processes are all governed by the content of schemas, which themselves constitute the basic element of personality. Dysfunctional beliefs and cognitive distortions are contained within an individual's cognitive schema. Cognitive distortions are conceptualized as systemic information processing biases applied to incoming information which serve to distort this information for the purpose of reducing a conflict between external stimuli and the internally held schematic representations the person has about the world. Young (1999) created a supplementary theoretical framework expanding on Beck's original cognitive model, in order to specifically address the need of patients with chronic personality disorders.

Thus, Young's schema theory can be usefully conceived as a cognitive-interpersonal conceptualization of personality pathology. He proposed a specific set of schemas, called early maladaptive schemas (EMS), as underlying personality pathology (Young, 1999). Table 1.2. shows the current 18-schema conceptualization, along with the schema domains to which they belong. An EMS is defined as an extremely stable and enduring interpersonal theme that develops during childhood, is elaborated throughout one's lifetime and is dysfunctional to a significant degree (Young, 1999). One of the characteristics is that EMS influence interpersonal interactions via distortions in perceiving interpersonal behaviour. Once formed, these EMS represent an established and rigid prototype of how one should interact with other people. Early maladaptive schemas, then, represent pathological prototypical patterns of interacting with other people. These EMS will be expounded in the analysis of every personality disorder.

Table 1.2: Schema Domains and Early Maladaptive Schemas

Schema Domain	Early Maladaptive Schemas
Disconnection & Rejection	-Emotional deprivation -Mistrust / abuse -Emotional inhibition -Defectiveness / shame -Social isolation / alienation
Impaired Autonomy & Performance	-Dependence / incompetence -Abandonment/ Instability -Vulnerability to harm / illness -Enmeshment / undeveloped self -Failure -Subjugation/ Invalidation
Impaired Limits	-Entitlement / grandiosity -Insufficient self-control / self-discipline
Excessive responsibility & Standards	-Self-sacrifice -Unrelenting standards/hypercriticalness
Unclassified Schemas	-Approval-seeking / recognition-seeking -Negativity / pessimism -Punitiveness

A series of studies have identified main EMS in all personality disorders. Thus, some personality disorders have been characterized in terms of their EMS. For example, Young and Flanagan (1998) outlined a schema-focused conceptualization of narcissism. Table 1.3. shows the central operating schemas for avoidant personality disorder (APD), obsessive compulsive disorder (OCS) and borderline personality

disorder (BDP) based on studies and theory of Young (2003), Beck (1990; 2001), Ball (2001), Arntz (1999), Butler (2002) and Jovev (2004).

Table 1.3. Summary of previous Research and Theory examining schema domains in BDP, APD and OCD

<b>BDP, APD and OCD</b>		
Avoidant PD	OC PD	BDP
Defectiveness/shame (DS)	Unrelenting standards (US)	Abandonment/Instability (AB)
Abandonment/Instability (AB)	Emotional inhibition (EI)	Defectiveness/shame (DS)
Subjugation of needs (SB)		Dependence/Incompetence (DI) Mistrust/abuse (MA) Vulnerability to harm (VH)

The schemas of narcissistic personality disorder (NPD) and psychopath conceptualized are shown in a different table (Table 1.4.) since a number of overlaps exist between them.

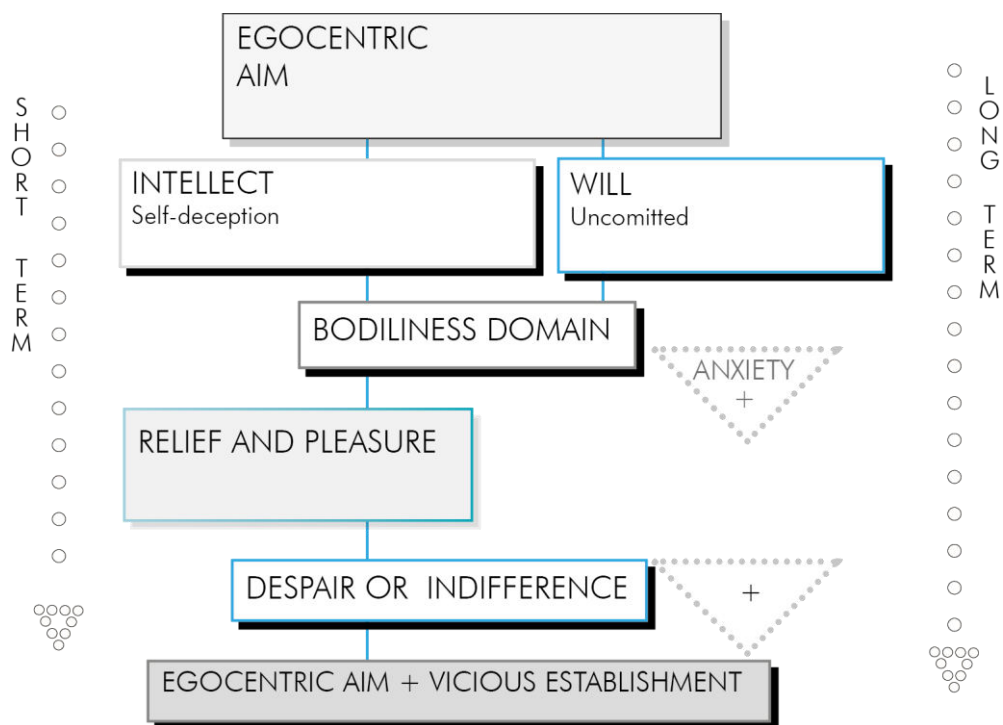
Table 1.4. Summary of previous Research and Theory examining schema domains in NPD and psychopaths.

	<b>Narcissistic PD</b>	<b>Psychopath</b>
Central Schemas	-Entitlement (E) -Emotional deprivation (ED) -Defectiveness (DF)	-Entitlement (ED) -Approval or attention seeking (AS) -Punitiveness (PN)
Secondary schemas	-Approval or attention seeking -Unrelenting standard -Subjugation -Mistrust/abuse -Punitiveness	

In conclusion, we can say that well ordered acts lead to a harmonious and integrated personality, which produces inner peace and calm. By contrast, a fictitious final goal and the establishment of a structural vice provide a distorted frame of mind and desires and an emotional impoverishment that gives rise to anxiety and ultimately despair or indifference.

The shortcuts taken by vicious establishment leads to the so-called “vicious circle”, advanced by Künkel (1984). It refers to a complex chain of events that reinforces itself through a feedback loop. Figure 1.3. shows this circle. It is rooted in the fact that no egocentric aim can be attained again and again without considerably intensifying the means necessary to achieve it, because vices itself cannot provide peace and calm. Far from making person feel invulnerable, it produces an intensification of symptoms and the person may resort to more drastic measures. In the last step of the vicious circle, the will always surrenders completely and then is trapped under a vice structure. At the end of every personality discussion we will show the specific vicious circle established in the development of any particular personality disorder in order to understand the detrimental results they may lead to.

Figure 1.3. General Pattern of Vicious Circle



### **3.3. Attachment theory and personality disorders**

Before starting with the analysis of egocentricity in different personality disorders, it is necessary to make an incursion in the attachment theory because in clinical literature there is increasing support for conceptualizing personality disorders as disorders of attachment (Fonagy, 1996; Brennan, 1998; Parker, 1999; Meyer, 2001).

First, we will present the contributions of attachment theory for the understanding of PD and after that we would like to point out some deficiencies of this model too.

Let us start with the contributions. Attachment theory concerns the nature of interpersonal experience in early childhood and its impact on specific aspects of adult functioning. According to this theory, the basis on which personality is developed is formed by the representational model or internal operative model (internal working models). There are some studies that indicate this, as they suggest that personality is formed on two dimensions: one relative to oneself and the own identity, and another one related to the others and the environment (Franz, 1985; Blatt and Blass, 1996). Although these representations can become more complex and elaborated during the process of maturing of the person, and though they are susceptible to modifications, the data achieved until now indicate that they tend to be stable in time (Fraley, 2002).

There is increasingly more evidence that indicates that the development of a secure attachment and basic confidence, as well as of the inherent positive representational models, is a relatively reliable predictor of the development of a sane personality, that the resilience is closely related to the presence of basic confidence, and therefore of secure attachment (Dwiwardani, 2014; Caldwell and Shaver, 2012).

Recent studies in the field of neurosciences and psychology of development indicate that the secure attachment in childhood establishes the bases on which the capacity of emotional self-regulation and strategies of healthy confrontation will be developed, abilities that are found altered in all the disorders of personality (Shaver, 2007). For this reason, the feelings and parental attitudes towards the child are very important in its development. These determine the formation of the prime representational models about themselves and others, which become more complex during the growth. According to Millon (2001), the development in the child of a feeling of acceptance or denial by the progenitors is the most decisive aspect of the experience of learning. As a mechanism of defence, the child tends to develop strategies of rigid and over-generalized confrontation, which will alter their perception and interpretation of the environment and, as a consequence, their relation with it. These strategies, which at

the beginning have a protector, lead to the formation of cognito-perceptive distortions and, as a consequence, to the configuration, through time and the repetition of experiences, of distorted cognitive schemas when they become generalized.

The mentalization model also helps us to understand the formation of these distortions. According to Fonagy (2004), mentalization is not just a cognitive process but includes regulation of affects and denotes the capacity to discover the subjective meaning of one's own affective state. It represents the experiential understanding of one's feelings in a way that extends beyond intellectual understanding. In this process the caregiver is crucial as a mediator. S/he reads the infant's automatic emotion expression and reacts to them with appropriate affect-modulation interactions (affect mirroring). This mediation allows the infant the first establishment of a second control structure that monitors and detects the primary-level dynamism of affective states. It allows emotional states to be cognitively accessible and can serve as the basis for action prediction. By contrast, incongruent mirroring of affect might be casually related to pathologically distorted self-representation (what is called false self). Winnicott (1965) suggested that the infant compliantly relates to the caregiver's gestures as if they were his/her own and this compliant stance lies at the root of the false self. It leads to a lack of genuine links between internal states and actions.

A lack of appropriate resonance of emotional experiences by the caregiver complicates the development of rational capacity, in the sense of linking appropriate cognitive evaluations to emotional state and behavioural conduct in the relationship context. Thus, the internal experience of a child receiving care from a caregiver remains unlabelled and chaotic, and the uncontained affect generates further dysregulation. As this image undermines self-organization, the child often needs to externalize it to achieve a coherent self-representation.

We can grasp the ethical collapse that patients who have been abused by a caregiver may suffer. They, under the attachment theory, try to maintain unity and concordance to the caregiver at all cost. The natural tendency toward the caregiver, with the establishment of a suitable union, is perverted. Dissonance is introduced among all domains (intellective, volitive, sensory and relationship). This dissonance among sensory reactions, emotional response, cognitive beliefs and adequate relationships complicates the adequate development of *temperantia* because it inculcates enduring maladaptive predispositions into their sensory, affective and rational power passively in early years. The correct recognition of own emotions by the caregiver can be brutally denied or misinterpreted. They typically provide contradictory information regarding her/his infant-directed mental attitudes. For example, sometimes s/he abuses the child, while at other times s/he seems to deny

this and even behaves in a caring fashion. This aggressive misinterpretation leads to lack own assessment and consideration during first years of life. It, as mentalization theory states, not only distorts mental representation, but also inhibits mental functioning (Fonagy, 1993).

Healthy human development is, then, a process by which one's inchoate capacities unfold at the appropriate time in the appropriate way. Several factors, as we have just shown, account for the impeding of healthy development. As Brugger states,

Distortions introduced in development at the bodily, affective, interpersonal, cognitional and behavioural domain deprive a person of the proper unfolding of their anticipated abilities. These distortions are referred to in philosophy as privations. (2009, p. 12)

The term privation signifies in particular the absence of something that precisely ought to be present. Thus, any disorder in any anthropological domain of the person (bodiliness, rationality, volitionality and relationality) that deprives one of the fulfilments one could enjoy if not for that disorder is called a privation. The attachment and mentalization models try to show the effect of dysfunctional parenting as a particular kind of privation. Some privations can lead to irreversible consequences, while others can be counteracted. Current studies have found sensitive periods where experiences have a greater impact on certain areas of brain development. During these periods the brain is most likely to strengthen important connections and eliminate not needed ones in a specific part of the brain. Thus, certain experiences at these periods exert greater influence on brain development and behaviour (Weder, 2011).

If psychological capacities undergo a more deliberative process with age, autonomic responses (stimulus-driven) such as the primary emotions over which the infant does not have any control at first can be progressively governed by higher psychological capacities. However, depending on the degree of the early privations, the conditions for adequate development of *temperantia* and prudence may be hindered.

In order to allow the grown up person to deliberate the tendencies s/he already possesses, and so that s/he could select or refuse them as ordered objectives for the final aim, and thus s/he would be able to modify his or her personality, s/he first needs a certain capacity to know himself or herself (introspection) and be aware of everything s/he intends concerning the motives that lead there to. Persistent insecurity generates mechanisms of defence and cognitive distortions, which no



doubt complicates a real and objective knowledge both of oneself and the environment.

Resuming what we have said thus far, once adult life is reached, the people who in their childhood have achieved particular cognitive schemas and affective tendencies will, with even more difficulty, be able to choose in a different way what they do. This, however, does not mean that they will have an absolute incapacity. The act of deliberation and consent may be more or less reduced, but except in extreme cases of privation, it may not be completely impeded.

So far, we have demonstrated the valuable contributions of the theory of attachment and mentalization. These models define very well the conditions that, according to the educative models and parental experiences, make people develop distorted cognitive and affective predispositions. However, it lacks sufficient arguments to explain the complexity and variety of the representations about oneself and the others through time, which many people develop in spite of certain early experiences. It cannot even capture the enormous variety of personalities. The theories of attachment and mentalization are based on a constructivist model in which the person constructs the self basically with mental representations. These representations are based on experiences of early relations. In pathologic cases, the person remains caught by these cognito-perceptive distortions and can only “reset” with other experiences of relation. The person remains, thus, almost reduced to a relational self without nature. The self is only formed as a consequence of various cognitive processes related to own identity and the identity of the others, which, in pathologic cases, end up in cognitive distortions.

Though the psychosomatic conditioners that form the basis for early experience are real, we believe that universal aspects of human nature have been much ignored in this theory. As we already mentioned, in Brugger’s (2009) and in the Vitz, Nordling & Titus (2015) Catholic/Christian model there are also three premises of theological anthropology, namely, humans are created in the image of God, have fallen as a result of sin and have been redeemed by the salvation activity of God in Christ. The human dimensions bodiliness, relationality, volitionality and rationality are not watertight compartments, separate from and inaccessible between themselves. Just the opposite, by virtue of substantial unity (the fifth domain) there is no natural (ontological) separation between them in actuality. Therefore, harm inflicted on one domain will have impact upon the others and, moreover, by virtue of their theological premises they can be directed towards good, beauty and truth.

At theological level and based on the first premise that “humans are created in the image of God”, the psychosoma, with all its faculties, is open to the spirit or tends towards spiritual things (Echavarria, 2011). By virtue of this openness all human domains are integrated in human personhood governed by the spirit, which gives direction and sense, in spite of all the psychosomatic conditions. Thus, the bodiliness domain can also participate in spiritual activity.

By virtue of the salvation activity of God in Christ, grace saves nature and elevates it to the supernatural order, making it divine, because grace does not only emanate through theological virtues (faith, hope and charity), but also through moral virtues (strength, temperance, prudence and justice). This way, grace does not remain enclosed in a “transcendental” level without affecting the mental and emotional life of people, but penetrates through all the areas of our psychology, transforming and giving a new meaning to our operations (Echavarria, 2011). This penetration opens reason and will-power towards divine contemplation and complacency, which permits the psychosomatic with all his/her conditioners to become more divinized. Consequently, previous self-understanding and previous trends of feelings can be transformed. According to Vitz (2006):

One’s relation to God or the higher spiritual levels of transcendence provides a new way to construct a coherent self or identity, connected to one past, but not controlled by it. This new self is controlled more by what we have freely chosen to move toward than by our personal past or our social present. (p. 127)

Relation to God allows the person, in spite of all these conditions, to have the capacity of conforming himself/herself freely and to be able to take a specific position in relation to an object. This act of the will has the capacity to align the bodily domain with the cognitive domain in one direction toward an objective good. We have potential to emancipate ourselves by virtue of our free personal centre in spite of the development of strategies of self-protection that do not allow us to know ourselves properly. The person who reaches adult age, and to who privations have not lead to irreversible damages, would be able to deliberate on the tendencies s/he already possesses, and would be able to accept them or refuse them as ordered objectives for the final aim, and thus would be able to modify his/her personality. One first needs a certain capacity to know oneself and to be conscious of what one is inclined to and of the motives that lead to this. If this process of deliberation is damaged at least s/he can chose to stop to consider his/her own tendencies and the conveniences of their objectives, or at least s/he could seek help.

In the last chapter we will present the therapeutic opportunities that the relation with God or the higher spiritual levels of transcendence may provide. This relation could explain the rich variety of personalities that exist. Even the best model of personality, as the FFM undoubtedly is, cannot explain how traits function in daily life, or how individuals understand themselves (McCrae & Costa, 2013) because the unquantifiable reality of the human being and his/her relation with God opens the range of decisions and possibilities. Virtues are part of our nature, and optimal conditions with his/her personal sanction allow their development.



**CHAPTER FOUR. ANALYSIS OF THE RELATION BETWEEN  
EGOCENTRICITY AND PERSONALITY DISORDERS**



## 4.1. Analysis of personality disorders

We will now analyse the consequences of egocentricity on different domains in different personality disorders that the DSM-5 classification has retained due to more significant empirical research carried out in recent years and that are clinically important from the viewpoint of their frequency in clinical practice (Skodol et al., 2011). These are the schizotypal, obsessive-compulsive, avoidant, borderline, narcissistic and antisocial personality disorders. Moreover, the influence of the five-factor theory seems to be relatively assured by the relationships of the factors of conscientiousness, extraversion, agreeableness and neuroticism respectively, with the obsessive-compulsive, avoidant, antisocial and borderline personalities (Kernberg, 2012).

The progressive distortion of character in any personality disorder manifests itself through increased cognitive distortions, immature affectivity and disordered affective embodiment. We have not included schizotypal personality disorder in the analysis because for many authors it is considered the start-stage of the schizophrenia continuum or spectrum. They share with schizophrenia patients their persistent asociality and cognitive impairment, albeit to a milder degree, both disorders presumably emerging from common spectrum-related risk factors (Siever et al., 2002). The common spectrum would place this personality disorder in another category that would not be analysed under our model. The main characteristic of any disorder is shown in table 1.5.

Before starting the analysis of each disorder, we have to make clear that this study does not imply a mere simplification of the singularity of each person. Specifically, the analysis of the final cause would be limited to each clinical category, given the general characteristics of the described personality disorder. However, for an individualized and in-depth study, one should carry it out using an idiographic method that would take into account the particular background of each person, as described by Allport (1963):

Science, it is said, deals only with broad, preferably universal laws. Thus science is a nomothetic discipline. Individuality cannot be studied by science, but only by history, art, or biography, whose methods are not nomothetic (seeking universal laws), but idiographic. (pp. 8-9)

Table 1.5. Description of main personality disorders and main associated Factors of the Five-Factor Model

Personality Disorder	Description	Five factor model
Avoidant PD	A pervasive pattern of social inhibition, feelings of inadequacy, and hypersensitivity to negative evaluation	High Neuroticism Low Extraversion
Obsessive-compulsive PD	A pervasive pattern of preoccupation with orderliness, perfectionism, and mental and interpersonal control, at the expense of flexibility, openness, and efficiency	High Conscientiousness Low Openness
Borderline PD	A pervasive pattern of instability of interpersonal relationships, self-image, affects, and control over impulses	High Neuroticism Low Agreeableness Low Deliberation
Narcissistic PD	A pervasive pattern of grandiosity (in fantasy or behavior), need for admiration, and lack of empathy	High Extraversion Low Agreeableness
Antisocial PD	A pervasive pattern of disregard for a violation of the rights of others	Low Conscientiousness Low Agreeableness Low Neuroticism (except angry hostility)

Note: Adapted from DSM-5



## 4.2 Avoidant Personality Disorder

### 4.2.1. Material and Formal Cause

We start the analysis of this personality by looking in detail at the personality traits.

Table 1.6. presents the more characteristics traits of this disorder.

Table 1.6. Avoidant Personality disorder from the Perspective of the Five-Factor Model of General Personality Structure

	Very High	High	Very Low
<b>NEUROTICISM</b> -Anxiousness -Angry hostility -Depresiveness -Self-consciousness -Impulsivity, vulnerability	Anxiety, self-consciousness, and vulnerability		
<b>AGREEABLENESS</b> -Trust -Straightforwardness -Altruism, Compliance -Modesty -Tender-mindedness -Impulsivity, vulnerability	Straightforwardness, Modesty, compliance (timorous), tender-mindedness		
<b>OPENNESS</b> -Fantasy, Aesthetics -Feelings, Actions -Ideas, Values			
<b>EXTRAVERSION</b> -Warmth, Gregariousness -Assertiveness, Activity -Excitement seeking -Positive emotions	Assertiveness (shrinking)		

The main traits belonging to neuroticism and extraversion factors are:

#### 4.2.1.1. Neuroticism

- This person is extremely nervous, anxious and tense, excessively apprehensive, prone to worry, inhibited and uncertain (anxiousness).
- S/he feels mortified, humiliated, ashamed or disgraced in the presence of others (self-consciousness).
- This person is easily overwhelmed by minor stress, responds with panic, helplessness and dismay to even minor stress (vulnerability).

#### 4.2.1.2. Extraversion

- S/he has difficulty developing or sustaining personal or intimate relationships (warmth).

- S/he has no apparent social support network due to social withdrawal. Activities and apparent pleasures are habitual, mechanical and routine; life is experienced as dull, monotonous and in a rut (excitement seeking).
- S/he is inactive and passive (activity).
- S/he is resigned and ineffectual, has little influence or authority at work and for decisions that affect his/her personal life (assertiveness).

Finally, we find one more trait that belongs to the agreeableness factor, which although is not in the extreme of the spectrum, does deserves special mention:

- S/he fails to appreciate or s/he is unable to acknowledge his or her talents, abilities, attractiveness or other positive attributes (high modesty).

This personality is very close to what Horney (1972) described as the “detached type” person who believes that if “I withdraw, nothing can hurt me”.

#### *4.2.2. Final Cause*

According to DSM-5 (American Psychiatric Association, 2013), the self direction is defined as “unrealistic standards for behaviour associated with reluctance to pursue goals, take personal risks, or engage in new activities involving interpersonal contact” (p. 765). In this kind of personality, then, the withdrawn pattern has been established as a predominant trend which constrains human liberty and creativity. We could accept that this attitude appears egocentric because it becomes rigid, indiscriminate and mutually exclusive (Horney, 1972). The more egocentric the attitude is the more static and rigid the organization of personality becomes.

If security, disengaged stability and control are the final motives, then the emotional, relational, rational and volitional dispositions will suffer a progressive degradation because beliefs, desires and acts will be more disposed to withdraw. The directionality that personal traits take under this guiding principle exacerbates the dysfunctional factors of neuroticism and extraversion in such a way that the guiding principle manifests itself in different domains.

#### *4.2.3. Efficient Cause*

In this personality this cause is easily recognized. The inordinate of fear is confined firstly to the bodily domain, without the accession of the will. However, if the process continues, this inordinate of fear reaches the will, which deliberately shuns something against the dictate of reason (Aquinas, 1947a). Thus, under the security principle, the character predispositions structure themselves as a vice. At this point the vice of fear and pusillanimity (or lack of courage, or fearfulness) get well established. If fear is

established it induces the person to escape from what s/he fears. Furthermore, fear drives away capacity to think and deliberate, “because when a man is affected by a passion, things seem to him greater or smaller than they really are...consequently owing to the want of right judgment, every passion, considered in itself, hinders the faculty of giving good counsel” (Aquinas, 1947b). This vice, then, is related to pusillanimity because it causes the person to consider that s/he is not able to do things, but which, in reality, are within his/her capacity. This is the other side of pride, but by defect. Instead of maximizing his/her potential by searching for something that demands more of him/her, the pusillanimous person withdraws from his/her true potential by refusing the tendency towards what is proportionate to his/her potential (Echavarria, 2005). S/he hides behind both a lack of knowledge of himself/herself and a fear of failure. Indeed, the pusillanimous subject searches absolute personal security at all cost, and this orientates egocentrically his/her eagerness in favour of this security, but s/he will also fail when the achievement of goodness obliges him/her to endure pain (Pieper, 2010). Pusillanimity is not only a problem of misperception, but a vice in the sense that it leads to inaction (DeYoung, 2009).

Many of the contemporary psychologists, including theorists of the five-factor model, do not claim any underlying metaphysical existence or causal power and they do not make any mention of patients’ goals or motives. Consequently, personality is described exclusively in behavioural patterns. Under this reductive analysis the misunderstanding of the pusillanimous attitude of avoidant personality can be understood. They interpret “the failure to appreciate or the inability to acknowledge his or her talents and abilities” as a high level of the modesty trait. This simple example highlights the necessity of an integrated model.

We will now present the manifestations of the vice of pusillanimity at different levels.

#### *4.2.4. Bodiliness Domain*

Patients present an anguished mood described as constant and confusing tension, sadness and anger. They overreact with anxiety, inadequacy, inferiority, shame and embarrassment to any circumstance that may not guarantee this security. S/he vacillates between desire for attention, fear of rebuff, fear of disapproval, humiliation or rejection, embarrassment and numbness of feeling and opts for those emotions that match with the dictate of security. His/her urge for security and the pseudo-attempts to get it leads to a progressive fear.

It coincides with Young’s defectiveness/shame schema: the feeling that one is defective, bad, unwanted, inferior, or invalid in important respects; or that one would be unlovable to significant others if exposed. It may involve hypersensitivity to

criticism, rejection and blame; self-consciousness, comparisons, and insecurity around others.

It coincides also with the instability schema. The person has an exaggerated fear that people one relies on most for security will not be available when he/she needs them. It involves the expectation that others will not be available to provide emotional support, strength or protection on a consistent, ongoing basis.

#### *4.2.5. Rational Domain*

The overreaction to fear hinders an integrated vision, and cognitive capacities are drawn in the direction of reassuring security. Intellectual power does not penetrate the fear: just the opposite, it surrenders to it. It produces a simple cognitive dichotomy based on rigid schemas of evaluation: the propensity to blame themselves or feel responsible for bad things that happen. This tendency makes them self-critical with unrealistically high standards of themselves and creates an alienated image of themselves as socially inept, inadequate and inferior; they feel personally unappealing, devalue self-achievements and report persistent sense of aloneness and emptiness. The introduction of irrelevant thoughts or distortions of meanings of their thoughts contribute to blunting and diffusing their internal emotions and perceptions. Thus, it may produce anxiety reduction but at the expense of cognitive clarity.

It coincides with the defectiveness/shame schema: moved by this lack of courage or pusillanimity, the person cannot keep the will from withdrawing from the good of reason on account of fear. As soon as s/he notices any kind of fear, the cognitive and volitive capacities are held rigidly to simple ideas and feelings that restrain him/her. Taylor puts the core of courage in “the contact with myself, with my own inner nature” (1992), in our current cultural framework or horizon of significance. It is this contact that helps us to overcome fear through the deep satisfaction of realizing who we are truly meant to be (McInerney, 2014). Pusillanimity, then, does not allow for a deep contact with our own inner nature.

#### *4.2.6. Volitional Domain*

The egocentric guiding principle and pusillanimity vice engender disordered capacities in the person to fight and resist attaining a goal. Thus, the person may be passive and unassertive with regard to pursuing personal goals or achieving successes, sometimes leading to aspirations or achievements below their potential. It could be expressed also in the lack of expression of their wishes and emotions. All

the predispositions oriented to attaining a good goal are underpotentiated so, when faced with personal risks, new opportunities or unanticipated stress the individual easily gives up. In the more extremes cases they give up any desire because then fear is converted into despair, the feeling that the desired good is beyond attainment.

It coincides with the subjugation of the needs schema: suppression of one's legitimate preferences, rights, need and desires. It is based on the conception that there is an excessive surrendering of control to others because one feels coerced and unrealistically afraid of the negative consequences of asserting one's rights and expressing feelings (such an anger, criticism, retaliation). It usually involves the perception that one's own desires, opinions and feeling are not valid or important to others.

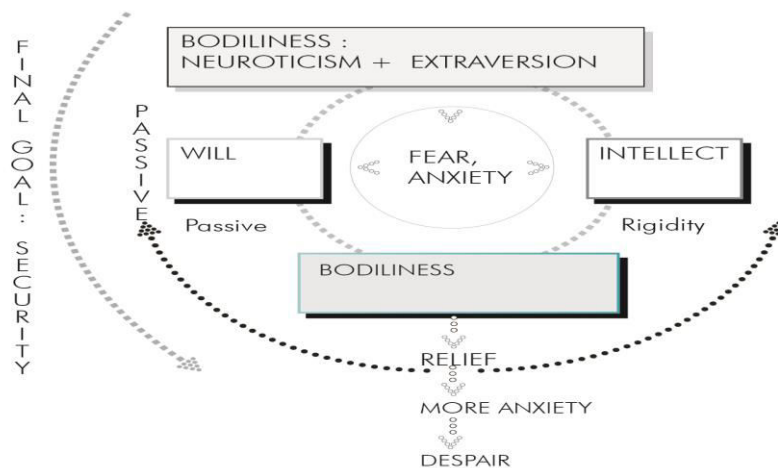
#### *4.2.7. Relational Domain*

Avoidant individuals avoid social and occupational situations due to fear of embarrassment or humiliation, and seek out situations that do not include other people. They are inhibited in establishing intimate interpersonal relationships because of their profound sense of inferiority and inadequacy. This sense justifies thus his/her isolation and rejection of others. The commitment to a relationship with the identity, security and happiness that it brings is mutated into a withdrawal pattern to guarantee security at all cost. Thus, there is an opposition to the transforming demands of love. The love demands would push him/her to change his/her way of thinking, acting and feeling, and especially to give himself/herself up for others. By contrast, egocentricity reassures the withdrawal pattern.

#### *4.2.8. Vicious Establishment*

Once pusillanimity has been established, the vicious circle becomes entrenched (showed in Figure 1.4.): the desire for security does not bring inner peace and calm; quite the contrary, it brings progressive anxiety and consequent despair. The withdrawal from appropriate objects blocks any pleasure and joy. Consequently, the person only feels the subsequent relief of avoidance behaviour, which in time is again transformed into more anxiety with the reinforcement of pathological strategies.

Figure 1.4: 1st phase of vicious circle of avoidant personality



This withdrawal pattern can take a more pathological direction as long as the sloth vice accompanies this process. The frame of mind of the slothful person determines their view of themselves as well as that of the world: “to be in a state of slothful mood is to be in a state of which the interrelated components are feelings of physical and mental inertness and a cognitive appraisal of the world as not worth engaging with” (Taylor 2006, loc. 277). Two attitudes, indolence and boredom, then establish themselves. The indolent person sees the world in terms of making demands which they think too hard to fulfil, and they will not, or think they cannot, make the requisite effort. The bored person focuses on what seems to them the lack of attraction in any possible course of action. The person in this case gives in to any effort which has consequences for their emotional life. Taylor (2006) expresses it clearly:

Even if total resignation leaves them relatively content, their frame of mind is incompatible with any truly positive feelings, such as joy or love. But beyond this, slothful cannot be said to lead a life at all, let alone a flourishing one. They are not fully agents, in the sense that they have no projects around which to organize aspects of their lives, and hence no prospects which they might aim to realize. Any busyness they might display is without roots and without branches which reach beyond itself. Nor can they respond properly to others, for personal relationships, like everything else in their world, are not thought worth much effort, and this in turn will affect adversely the attitude of others towards them. In their withdrawal, they abdicate all responsibility for themselves and their doings. (loc. 390)

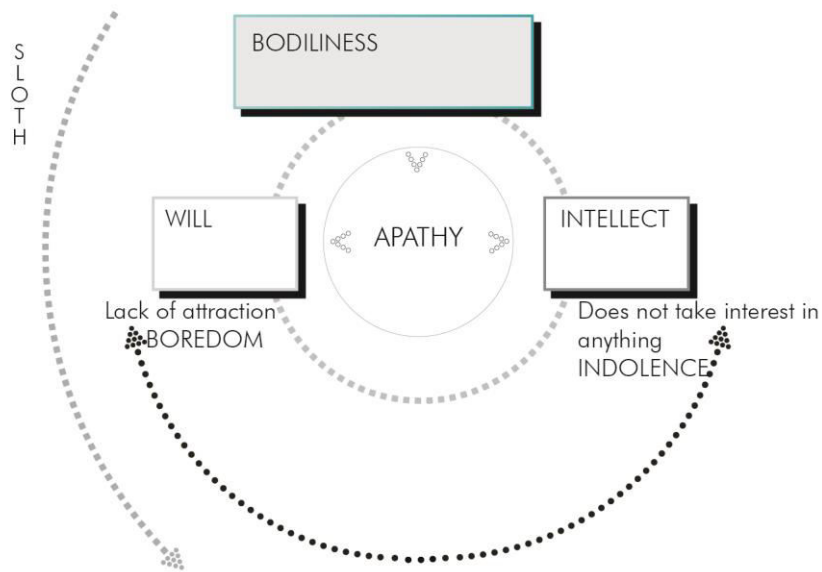
The slothful, like all the vicious, are neglectful in their attitudes towards others and so may well strike the other as being cruel or brutal. Under certain conditions they may also be said to be predisposed towards the cruelty of indifference, this being consequent upon precisely their inability to commit themselves. Taylor (2006) states it:

He assented rather in the sense that he made no attempt at all to view critically his way of life and mode of awareness, that he gave no serious thoughts to possible alternatives but indulged merely in idle imaginings which disguised rather than highlighted his attitude towards the world and himself. (loc. 378)

Sloth is, then, a paralyzing vice. When a person is completely surrounded and trapped by it, the mood of indolence, hopelessness and despair is transformed into complete apathy. Thus, the false last goal (security) draws all the sensitivity, volitive and cognitive functions in that direction without getting the desired reassurance.

This claim produces a closed vicious circle with increased anxiety that, in the more extremes cases, leads to a state of apathy, as shown in figure 1.5. The longer this process lasts, the more established apathy becomes and, consequently, these kinds of people suffer a kind of lethargiosis, which is the process of eliminating energy and drive (Wasserstein, 2005). The will at this point has totally surrendered to sloth. A kind of resistance to effort and a kind of inertia progressively pervades the entire personality, which blocks the development of his/her personality with a progressive discrepancy between potentialities and achievements.

Figure 1.5: 2nd phase of vicious circle of avoidant personality



In the end, the protective shell of isolation serves only to perpetuate their problems by narrowing her/his personal experiences, precluding the possibility of learning new ways of behaving that might bring them greater confidence or a real sense of personal worth. In the most severe cases, although they have succeeded in minimizing external dangers, they find themselves trapped in egocentricity alone with their own self-contempt. Table 1.7. summarizes the relation between main vices and schemas in this personality.



Table 1.7. Relation between vices and schemas in Avoidant personality

	PUSILLANIMITY	SLOTH	SCHEMAS
BODILINESS DOMAIN	Fear of failure Lack of contact with own feelings	Feelings of physical and mental inertness. Attitude incompatible with any truly positive feelings.	Defectiveness/ Shame
INTERPERSONAL DOMAIN		Neglect in their attitudes towards others. Inability to commit themselves.	Instability: Expectation that others do not provide emotional support, strength or protection.
COGNITIVE DOMAIN	They consider that they are not able to do things, which in reality are within his/her capacity	Cognitive appraisal of the world as not worth engaging with.  -Failure -Subjugation/ Invalidation	Defectiveness/ Shame: They think and feel they are defective, bad, unwanted, inferior or invalid in important respects. Devalues self-achievements
VOLITIONAL DOMAIN	Moved by lack of courage, the person cannot keep the will from withdrawing from the good of reason on account of fear. It leads to inaction.	They do not have projects around with which to organize aspects of their lives and hence no prospects which they might aim to realize. In their withdrawal they abdicate all responsibility.	Subjugation of needs: Suppression of legitimate preferences, rights, need and desires

### 4.3. Obsessive Compulsive Personality Disorder

#### 4.3.1. Material and Formal Cause

We start the analysis of this personality by looking in detail into the personality traits. Table 1.8. shows the more characteristics traits of this disorder. The traits deemed most prototypic stem from conscientiousness and openness factors (with the exception of anxiety).

Table 1.8. Obsessive Compulsive Personality disorder from the Perspective of the Five-Factor Model of General Personality Structure

	Very High	High	Very Low
<b>NEUROTICISM</b> -Anxiousness -Angry hostility -Depresiveness -Self-consciousness	Anxiousness		
<b>AGREEABLENESS</b> -Trust -Straightforwardness -Altruism,	Compliance -Modesty -Tender-mindedness		
<b>OPENNESS</b> -Fantasy, Aesthetics -Feelings, Actions -Ideas, Values	Feelings Actions Values		
<b>EXTRAVERSION</b> -Warmth, Gregariousness -Assertiveness, Activity	Warmth Excitement-seeking		
<b>CONSCIENTIOUSNESS</b> -Competence, order, dutifulness, achievement, self-discipline and deliberation	Competence Order Dutifulness Achievement-striving Self-discipline Deliberation		

Note. Based on data from Lynam & Widiger (2001), Samuel & Widiger (2004) and Widiger (Widiger et al., 2013)

#### 4.3.1.1. Conscientiousness

- Individuals suffering from an obsessive-compulsive personality disorder are perfectionists who emphasize or value competence to the detriment of most other activities and interest. They fail to be successful or even adequate in

tasks, assignments and responsibilities due to excessive perfectionism (competence).

- They are preoccupied with order, rules, schedules and organization and undermine leisure activities. Tasks remain uncompleted due to a rigid emphasis on proper order and organization (order).
- They rigidly adhere to rules and standards, failing to appreciate or acknowledge ethical and moral dilemmas, and place duty above all moral or ethical principles (dutifulness).
- They are excessively devoted to career, work or productivity to the detriment of other important areas of life; very often they are workaholics, sacrificing friends, family and others relationships for achievement or success (achievement-striking).
- They tend to exhibit a single-minded doggedness (perseverance) for trivial, inconsequential, impossible or even harmful tasks or goals (self-discipline).
- They are prone to ruminating and excessive pondering of all possible consequences to the points that decisions fail to be made on time, effectively or at all (deliberation).

#### *4.3.1.2. Openness*

- Feelings: OCPD patients are oblivious to their own feelings and those of others. They may seldom experience substantial or significant feelings and will appear highly constricted.
- Actions: They avoid changes to their daily routine and establish a set routine in their daily activities.
- Values: They are dogmatic and closed-minded with respect to their morals or other belief systems and are intolerant of, and reject, alternative beliefs systems.

#### *4.3.1.3. Neuroticism*

- OCPD patients are extremely nervous, anxious, and tense. They are excessively apprehensive, prone to worry, inhibited and uncertain.

#### *4.3.2. Final Cause*

According to DSM-5 (American Psychiatric Association, 2013), the self-direction of this personality is “difficulty in completion of a task and realizing goals, associated with rigid and unreasonably high and inflexible internal standards of behaviour; overly conscientious and moralistic attitudes” (p. 768). In this kind of personality, then, a pervasive pattern of perfectionism and mental and interpersonal control, at the

expense of flexibility, openness, and efficiency, is established as a predominant trend, which constrains human liberty and creativity. Individuals with this disorder attempt to maintain a sense of control through painstaking attention to rules, trivial details, procedures, lists, schedules, or form to the extent that the major point of the activity is lost. A general pattern of perfectionism hides the fear of failure, which is lived as a tragedy; they hold fast to the belief that they will be cared for, valued and loved in direct proportion to their hard work. Behind this need for control, they are very anxious about committing any kind of mistake because they conform to the expectations of others. They try to work everything out in advance, and they hate to make adaptations along the way. Thus, the fear of disapproval appears in various forms and, as in other PDs, the main factor that accounts for the fear of disapproval is the great discrepancy that exists between the façade which the neurotic shows both to the world and to himself/herself and all the hidden tendencies that lie behind that façade (Horney, 1964). A way to protect him/her against disapproval is to take refuge in perfectionism, where there is no space for uncertainty. Only upon achieving this pure perfectionism will they think that they will get all the external approval they long for.

If a sense of control is the final motive, then the emotional, relational, rational and volitional dispositions will suffer a progressive degradation since beliefs, desires and acts are more disposed to attain it. For Salzman (1985), the need for control provides an illusion of certainty and security in a threatening and uncertain world. To minimize the possibility of unanticipated misadventure, compulsiveness becomes cautiousness and meticulousness. The more egocentric the attitude is, the more static and rigid the personality organization becomes. The directionality that personal traits take under this guiding principle exacerbates the dysfunctional factors of openness, conscientiousness and neuroticism in the way it manifests itself in different domains.

#### *4.3.3. Efficient Cause*

There are several vices that underlie in this behaviour and are related to fortitude in several ways. As in the previous disorder, we find pusillanimity, in the sense that they consider they are not able to do things, which in reality are within their capacity. But in this case instead of withdrawing from their true potential, by refusing the tendency towards what is proportionate to their potential, they misdirect their potential to structured tasks where they over involve in making every detail of a project absolutely perfect. These kinds of tasks offer them the personal security they yearn at all cost.

In comparison, the effects of sloth are not seen in the obsessive disorder. In fact, quite the opposite: the effects of pertinacity, which gives them a peculiar pattern of behaviour, are evident. When reason becomes perfected in its work of disciplining and persuading the passions we can say that reason has acquired the virtue of prudence. This virtue is essentially one of bringing a person's global view of the good to bear upon a particular action. It faces us up to reality with what truly is the case, as opposed to what we simply feel. Acting prudently, then, allows us to respect the intrinsic value of each good while recognizing that one is still more important than the other. If perseverance (the disposition to persist a line of inquiry) and firmness are not based on real courage and trust in pursuing the goal of a particular virtue, they are misdirected. This misdirection is due to a lack of prudence that does not allow the establishment of the real virtues of courage. In this case, the act of deliberation is not perfected by the clear sight of truth, but by fear of failure. In their place, persistence and obstinacy appear and block any intent of global view and circumspection. The person is, then, moved by a fear of failing, which does not allow them to respect the value of any objective, task or situation. A look into the study of the vice of pertinacity by Aquinas would help us very much to understand this personality (Aquinas, 1947c):

Instead of perseverance we have the vice of pertinacity, the person then is "head-strong", or is "self-opinionated", because they abide by their opinions more than they should. It is clear that perseverance is commended for observing the mean, while pertinacity is reproved for exceeding the mean and effeminacy for falling short of it. The reason why a man is too persistent in his own opinion is that he wishes by this means to make a show of his own excellence: wherefore this is the result of vainglory as its cause. The pertinacious man exceeds by persisting inordinately in something against many difficulties: yet he takes a certain pleasure in the end, just as the brave and the persevering man.

Hence pertinacity is directly opposed to perseverance and therefore is the consequence of lack of courage. It is the moment to analyse the repercussions of these causes in different domains and the parallelism with Young's schemas.

#### *4.3.4. Bodiliness Domain*

The perfectionism and self-imposed high standards of performance cause significant dysfunction and distress in OCPD individuals. There is a general pattern of emotion inhibition because under their main goal of perfectionism, emotions provoke a sense of uncertainty and loss of control. Therefore, they opt for inhibitions of themselves which offer them a sense of control. It coincides with the emotional inhibition schema: the excessive inhibition of spontaneous action, feeling and communication—usually

to avoid disapproval by others, feelings of shame or losing control of one's impulses. They show difficulty in expressing vulnerability and place excessive emphasis on rationality while disregarding emotions. Unaware of their insensitivity to emotional nuance, it is likely that they fail to realize that the emotional lives of others are far richer than their own. Their immersion in details as being foreign to the immediacy and vividness of feeling truly alive means that most of them have no insight of the impoverishment of their lives. Instead, they sterilize and dehumanize their existence by organizing their thinking rigidly in term of conventional rules and regulations, formal schedules and social hierarchies.

#### *4.3.5. Relational Domain*

Totally wrapped up in their own perspective, they have difficulty acknowledging the viewpoints of others. The person moved by a fear of failing does not allow for the respecting of the value of others or accepting the risk of relationships. They are generally unable to sense the overall emotional tone of interpersonal situations. Because of the compulsive focus on detail in communication and the failure to adequately judge the interpersonal atmosphere, they cannot relax or be spontaneous. On the contrary: they may become so involved in making every detail of a project absolutely perfect that they neglect others.

#### *4.3.6. Rational Domain*

In this case the act of deliberation is not perfected by the clear sight of truth, but by fear of failure. The overreaction to fear to failure hinders an integrated vision, and cognitive capacities are drawn in the direction of reassuring security. Intellectual power does not penetrate the fear; just the opposite, it reacts to it. In their place persistence and obstinacy (rigidity and stubbornness) appear, which blocks any intent of global view and circumspection. Because of their focus on detail they are incapable of grasping the "big picture". They are so concerned about having things done the one "correct" way that they have trouble going along with anyone else's ideas. They seek to suffocate emotion by deconstructing experiences into little bits that are easily classified and talked about rather than felt (Millon et al, 2004):

These people seek to contain any aspect of experience in its own little compartment. They database their memories and make only intellectual associations among them. By preventing their interaction, compulsives ensure that no single facet of experience is able to catalyze any other to produce an unanticipated emotion. (p. 239)

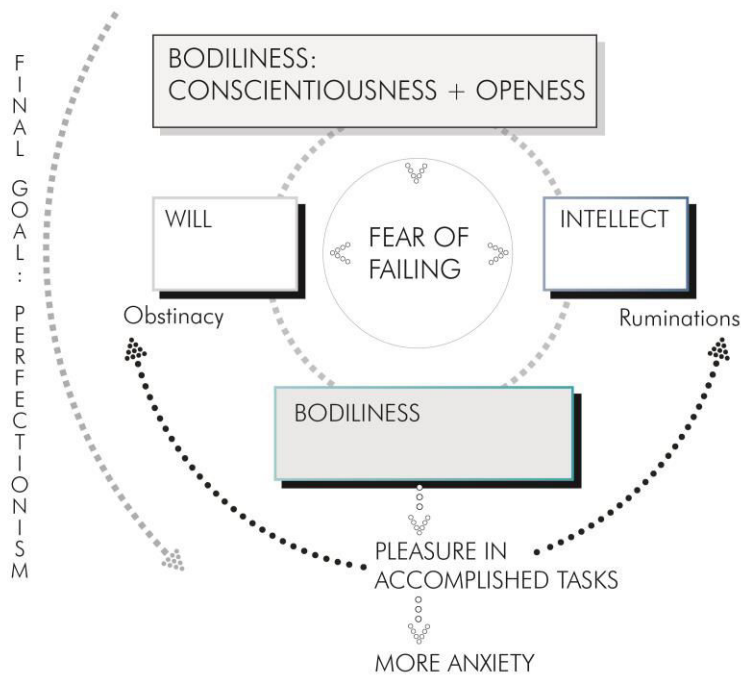
The achievement of having things done, however, provokes a kind of pleasure that in the short term offers them some relief.

#### *4.3.7. Volitional Domain*

The egocentric guiding principle makes these people obstinate about pursuing personal goals or achieving successes. In order to attain their goals, inordinate attention and effort is put into every task they must accomplish. One integral part of courage according to Aquinas is magnificence and confidence (or trust). According to Linda Zagzebsky (2014), this trust is an attitude opposed to doubt and is a stance of acceptance of one's own vulnerability. It includes, thus, accepting an emotional element of "feeling the trust". If it is not accepted a dissonance then appears within her/his psychic state that does not allow her/him to engage in high-level reflection.

S/he, then, may be plagued by doubts that are suffocated by perfectionism. They have a robust desire of self-worth as a part of their flourishing but this is completely misdirected through a rigid schema called unrelenting standards: they have an underlying belief that one must strive to meet very high internalized standards of behaviour and performance, usually to avoid criticism and shame, which typically results in them feeling pressure. They also have difficulty in slowing down and show a tendency for hyper-criticalness toward oneself and others. This process is shown in figure 1.6.

Figure 1.6: 1st phase of vices circle of OC personality



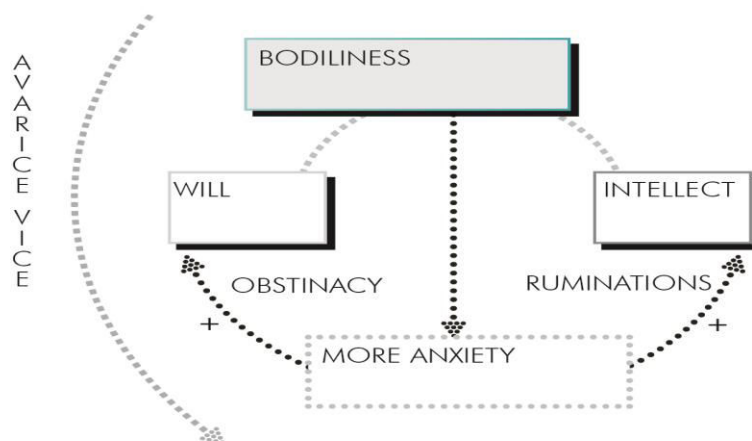
#### 4.3.8. Vicious Establishment

Greed, or avarice, can also be behind this personality and may provoke more tragic consequences as patients' minds and wills are so drawn to a subject that they cannot think about or have feelings for anything else. Figure 1.7. outlines this process. To gain a sense of control against uncertainty, patients try to do everything perfectly. An additional way to feel in control is through material goods. In this particular case, they hunger for money, possessions and power; monetary and material possessions offer them protection. Any possibility of choice of doing something is marked by an insatiable sense of control, which gives a different colouration to the resulting pattern.



It is also pertinent to point out the existence of vainglory in this lack of moderation of the movement of the mind towards excellence. However, this inflated quality is skin-deep. This greed has a very prominent effect and is a form of anxiety since the more monetary and material possessions are attained, the more needed they become (Echavarria, 2005). Greed then plays a crucial role in the vicious circle established in this personality.

Figure 1.7: 2nd phase of vicious circle of OC personality



According to Horney, it would be a pseudo-attempt in order to gain relief from uncertainties and vulnerabilities. In this disorder, pseudo-attempts take place through the repetitive need for proof and rumination. The stronger the proof, the less vulnerable s/he feels; trust, however, is still needed. Greed leads the person to be excessive in his/her pursuits in obtaining certainty, and the direction taken to gain this certainty is completely misdirected. It coincides with the vice of the compulsive's information process: "the more detail they gather, the more the facts fail to converge on a single course of action or conclusion, and the more their anxiety increases. The solution is to redouble their efforts and gather even more detail" (Millon et al. 2004, p. 246). Table 1.9. summarizes the relation between the main vices and schemas in this personality.

Table 1.9. Relation between vices and schemas in OC personality

	PUSILLANIMITY	PERTINACITY	SCHEMAS
BODILINESS DOMAIN	They hide behind both a lack of knowledge of themselves and a fear of failure.	It blocks any intent of global views about the world and oneself	Emotional inhibition: inhibition of spontaneous action, feeling and communication. Feelings of shames or losing control of impulses.
RELATIONAL DOMAIN			They avoid disapproval by others through perfectionism
RATIONAL DOMAIN		Persistence and obstinacy which blocks any intent of global view and circumspection.	Unrelenting standards Underlying belief that one must strive to meet very high internalized standards of behavior and performance
VOLITIONAL DOMAIN	Subject searches absolute personal security at all cost	They wish by this means to make a show of their own excellence	To avoid criticism and shame

## 4.4. Borderline Personality Disorder

### 4.4.1. Material and Formal Cause

The traits deemed most prototypic in borderline personality stem from neuroticism and agreeableness (with the exception of deliberation). They are shown in Table 1.10.

Table 1.10. Borderline personality disorder from the Perspective of the Five-Factor Model of General Personality Structure

	Very High	High	Very Low
<b>NEUROTICISM</b> -Anxiousness -Angry hostility -Depresiveness -Self-consciousness	-Impulsivity, vulnerability	Anxiousness Angry hostility Depressiveness Self-consciousness Impulsivity, vulnerability	Self-consciousness
<b>AGREEABLENESS</b> -Trust -Straightforwardness -Altruism,	Compliance -Modesty -Tender-mindedness		Trust Straightforwardness Compliance
<b>OPENNESS</b> -Fantasy, Aesthetics -Feelings, Actions -Ideas, Values		Fantasy	
<b>EXTRAVERSION</b> -Warmth, Gregariousness -Assertiveness, Activity	-Excitement seeking -Positive emotions		
<b>CONSCIENTIOUSNESS</b> -Competence, order, dutifulness, achievement, self-discipline and deliberation			Deliberation

Note. Based on data from Lynam & Widiger (2001), Samuel & Widiger (2004) and Widiger (Widiger et al., 2013)

#### 4.4.1.1. Neuroticism

- Anxious individuals are apprehensive, fearful, prone to worry, nervous, tense and jittery (anxiousness).
- Patients show episodes of intense and uncontrolled rage and fury, are hypersensitive and touchy, easily reacting with anger and hostility towards

anyone. They rebuke criticism, rejection, frustration or any minor events; hostility may provoke arguments, disputes and conflicts (angry hostility).

- Patients are prone to feelings of guilt, sadness, hopeless and loneliness. They are easily discouraged and often dejected (depressiveness).
- The person engages in a variety of harmful acts, including binge eating, excessive use of alcohol and drugs, excessive gambling, and exhibit suicidal tendencies or self-mutilation (impulsivity).
- Easily overwhelmed by minor stress, the patient responds with panic, helplessness and dismay to even minor stress (vulnerability).

#### *4.4.1.2. Agreeableness*

- Patients exhibit cynicism and paranoid thinking; they have an inability to trust even friends or family. They are exploitative and manipulative; they lie and their rude and inconsiderate manner alienates friends, limit social (trust).
- Patients are continually deceptive, dishonest and manipulative; they con or deceive others for personal profit, gain, or advantage. They may also engage in pathological lying (straightforwardness).
- Patients have little regard for the rights of others and are exploitative or abusive (altruism).
- They are argumentative, defiant, resistant to authority, contentious, contemptuous, belligerent and combative. They may also be bullying, intimidating and even physically aggressive (compliance).
- They are conceitful, arrogant, boastful, pretentious and pompous, and may feel entitled to special consideration (modesty).
- Patients are callous and cold-hearted, and at times even merciless and ruthless toward others (tender-mindedness).

#### *4.4.2. Final Cause*

According to the DSM-5, the self-direction of this personality is “instability in goals, aspirations, values, or career plans” (American Psychiatric Association 2013, p. 766). This particular disorder, then, is characterized by a lack of maintenance in a specific final cause. There is an inconstancy in keeping faithful to a final cause. Consequently, the only constant feature of these kinds of patients it is their inconstancy, which is manifested in different domains. In this particular case, we first will analyse the different domains in order to explain the efficient cause and to establish parallels with Young’s schemas.

#### *4.4.3. Bodiliness Domain*

The individuals are known to be unstable and especially angry. The basic dysphoric mood of this disorder is often accompanied by periods of anger, panic, or despair and is rarely relieved by periods of well-being or satisfaction. These episodes may reflect the individual's extreme reactivity to interpersonal stresses. The main characteristic is the impulsivity, which makes them highly unpredictable, switching from one state of affect and behaviour to the opposite with no understandable reason. Individuals with this disorder may at times feel that they do not exist at all. Such experiences usually occur in situations in which the individual feels a lack of a meaningful relationship, nurturing, and support. They experience intense abandonment fears and inappropriate anger even when faced with a realistic time-limited separation or when there are unavoidable changes in plans.

The abandonment/Instability schema coincides with manifestations at the bodily level: patients have an exaggerated fear that the people they rely on most for security, connection and help will suddenly abandon them forever, or leave them alone long period of times or not be available when they need them.

The inability to contain and regulate emerging moods and affects makes the person identify with her/his momentary state of mind and emotion, and are unable to gain distance from the present situation. As a result, they are torn by emerging impulses, seeking novelties and events but doing so without patience, desperately searching for immediate satisfaction or reward (Fuchs, 2007).

#### *4.4.4. Relational Domain*

According to Fonagy (2004), these people fail to develop a full understanding and to take the perspective of others. Narrative identity obviously implies the ascription of meaningful and intelligible intentions to oneself and to others. The lack of parental empathy and maltreatment impairs the reflective capacity and sense of self. As a result, the intentional state of others remains a foreign, dark and potentially hostile world, leading the patients to premature conclusions about malicious intentions of others and to a fundamental insecurity in their relationships. These individuals are prone to sudden and dramatic shifts in their view of others, who may alternately be seen as beneficent supports or as cruelly punitive. Such shifts often reflect disillusionment with a caregiver whose nurturing qualities had been idealized or whose rejection or abandonment is expected. All this process has similitude with the

mistrust/abuse schema: the expectations that others will hurt, abuse, humiliate, cheat, lie, manipulate or take advantage.

These patients, according to Fuchs (2007), are other-directed persons in the sense that they want to be acknowledged and loved; they need constant assurance that they are in emotional accord with the people around them, they no longer find their compass and their own value inside themselves. Anger and resentment follow. Unable to find comfort with others, they may become bitter and discontented.

#### *4.4.5. Rational Domain*

There may be an identity disturbance characterized by markedly and persistently unstable self-image or sense of self. At this level there is a tendency to regard and evaluate the present object or person in a one-sided and absolute manner, without any shadings or ambiguities, and separated from its context. They are unable to integrate positive and negative aspects of the self and others into coherent perceptions. Others are totally good or bad, ideal or devalued, dominant or powerless and in the temporal sequence, this results in a constant oscillation between these contradictions. The same all-or-nothing schema applies for the perception of oneself.

It has similitude with the defectiveness/shame schema: feeling that one is defective, bad, unwanted, inferior or invalid in important respects or that one would be unlovable to significant others if exposed. It may involve hypersensitivity to criticism, rejection and blame.

#### *4.4.6. Volitional Domain*

There are sudden and dramatic shifts in self-image, characterized by shifting goals, values, and vocational aspirations. There may be sudden changes in opinions and plans about career, sexual identity, values and types of friends.

These kinds of people lack the capacity to form enduring second-order volitions in the light of which present impulses could be evaluated and selected. As a result, these people are unable to draw on the experiences of the past in order to determine their own future by reflected decisions. They miss the experience of agency or authorship of their life. Consequently, they do not acquire any permanent structure, but a temporal one: they are only what they are experiencing at this moment. The present, then, may be only be experienced passively, not as the result of one's own planning and will. As a consequence, they have a sense of emptiness and boredom since their transitory presence has no depth. In order to fill the void, momentary pleasures and

thrills are sought, turning life into an unconnected series of fleeting events instead of a continuous history. Wishes and impulses flare up and vanish again, but without coalescing to form a long-term, resolved and overarching will. This is the reason why Nancy Potter (2009) in her book “Mapping the edges and the in-between” claims that borderline personality disorder can be considered as a volitional disorder. She argues that this person can act intentionally but in many areas seems not to be free to will that kind of action (as cutting oneself) in any robust sense of willing. Strong internal coercion may play a crucial role in these actions.

#### 4.4.7. *Efficient Cause*

Behind all the characteristics of borderline personality we find a fragmented character that does not find stability. They do not have enduring commitments, projects and promises through which the individual engages himself/herself and strengthens his/her capacity to remain on the path once taken. This fragmentation may be due to a lack of temperance, which is a fundamental virtue in the personality development. If humility is the base, the virtue of temperance is the structure around which the rest of virtues can flourish. According to Aquinas (1947d), temperance is a cardinal or principal virtue since it structures the moral life. In previous disorders we found that dispositions were ordered to the person’s ultimate false end that leads to distorted personalities; specifically, to a disharmonic integration. Even to order one’s life around a false goal implies a certain amount of constancy to remain on the path once taken, even if it is a false path. In this particular case there is not even integration, which leads to the most pathological disorder from the psychological point of view. According to Millon (2004), BPD is a pathology of the total integration of personality. Everything is characterized by futility, fragility and fragmentation. Dispositions cannot be ordered among themselves and they remain adrift. Intemperance then yields to the most severe lack of internal harmony and integrity.

Temperance is the virtue that moderates pleasures and desires, allowing an alignment of pleasures, desires and cognitions to a final end. It affects how one thinks about pleasures and how one desires and enjoys them, so it affects the “mode” of desire or enjoyment. *Temperantia*, according to Aquinas (1947e), has different parts depending on what kind of desire or pleasure it moderates. Continence is related with pleasures. Meekness is related with affectivity, especially anger, and allows the person to be the owner of himself/herself. Clemency moderates the punishing desire and is, thus, very connected to relationships. Modesty moderates desires of excellence (humility) and the desire of knowledge (*studiositas*). Lack of

meechness is the vice most related with this disorder and can easily give way to secondary vices related to lack of temperance, which may lead to pathological reactions.

The virtue of temperance allows us to discover reasons for or against a desire and pleasure; it is, thus, the reason embodied in the desire or pleasure. The discovery of these reasons is very much related with another virtue called prudence since it allows us to join the right concept for the right decision, which moulds the impulse or tendency. However, the intellectual domain can lose its position if it surrenders to the state of emotion, especially that of anger. Consequently, there would be a lack of a higher-level, self-observational process by which a person normally monitors on-going thoughts for coherence and accuracy. Thus, the person does not gain a reflective position beyond their present emotional state and the reflective position is subordinated to the emotional state of anger. Impulsive decisions cannot be said to be the result of deliberation; if there is, it is a very superficial deliberation that only leads to a poor conclusion. Deliberation is not set within the larger context of goals and aims for their life (Potter, 2009).

This lack of integration and subordination of reason to anger leads, then, to a very rigid way of thinking. Anger bypasses calm deliberation and leads to irrational actions. Distorted rationalizations thus take place far away from reality. Wrath cannot keep reason's judgment clear and a way to justify and gain relief from this negative emotion is to attribute blame, which gives momentary relief (Averill, 1983). The less refrained these angry tendencies are, the more inclined the body domain is to react angrily.

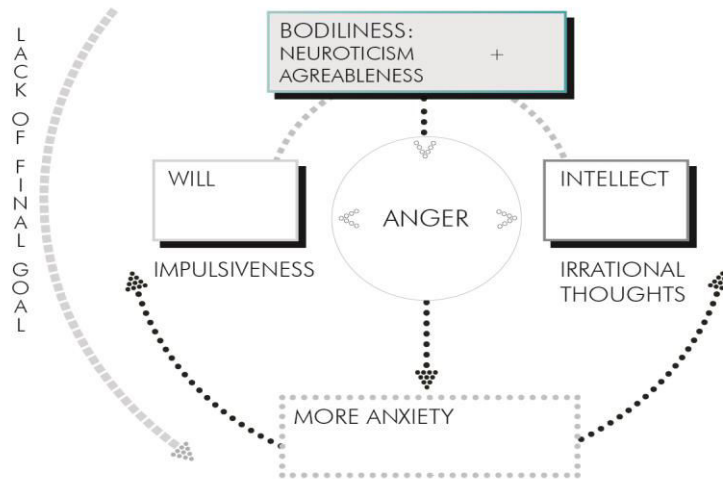
As we commented previously, the lack of temperance easily gives way to secondary vices such as impatience. The will is not sustained enough to achieve arduous aims and the mere fact of tolerating the amount of time in gaining an objective may provoke wrath, or inappropriate anger. In this particular case, anger's fighting power is directed toward protecting oneself and one's interests, to the exclusion of the claims of others. Any minor stimuli are frequent anger triggers, especially if stimuli respond to an apparent insolence of another action against oneself.

The lack of any form of temperance (meechness, continence, lust...) leads to an emotional state that is adrift. The interiorizing process of an emotion means assuming it from the rational and volitional domain. If not, patients are completely adrift, which leads them to behave unpredictably. It is only this assumption (rationalization and desideration of the bodiliness domain), which gives a sense of coherence and unity. This assumption is carried out by temperance, as it leads us to think about ourselves and decide freely, so that we may become the owner of



ourselves. This would correspond to the first grade of the vicious circle and is shown in Figure 1.8.

Figure 1.8: 1st phase of vicious circle of borderline personality



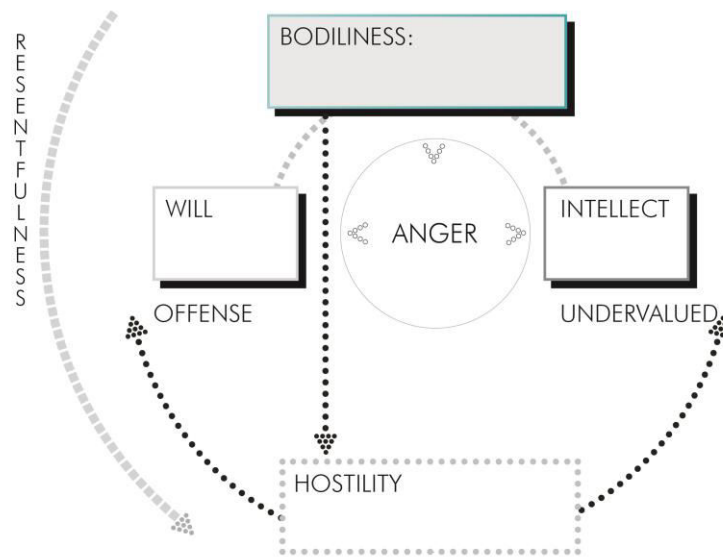
#### 4.4.8. Vicious Establishment

In order to explain the second part of the vicious circle, it is important to point out that this disorder starts with a primary disordered sensitivity, which leads to excessive anger. Different kinds of impulses foresee the judgment of reason, but once the judgment of reason is discovered, the will can either reject it or accept it. Under this decision the vices may be established. Holding on to anger too long results in it becoming a vice and makes this disorder much more complex, with negative consequences. The first consequence is based on vicious pride and results in the transformation of anger into a resentful anger. The resentful person then feels him/herself to be constantly undervalued and they refuse to accept reconciliation, fantasizing about vengeance, or passive-aggressive tactics such as spoiling

another's pleasure by being uncooperative or disdainful. Wraths lead us to demean our offender by magnifying our own importance and the gravity of the offense. This is the first mental step in rationalizing an excessive response. All anger is in danger of rationalization, and resentful anger, more than anything perhaps, can distort the truthfulness of our memory (DeYoung, 2009). Such feelings, as well as the consequent feelings of hostility towards others, can tend to grow until they become uncontrollable (Taylor, 2006).

Once resentment has taken root in his/her perspective on life, the person expects to be undervalued and tends to find his/her expectations confirmed. Therefore, the resentment will become ever more firmly established. They will thus nourish both an unsatisfactory view of themselves and, in an attempt to protect their self-esteem, a hostile one towards others, as shown in figure 1.9. Like other vices, resentment is self-frustrating: the agent's desire to be properly valued by others and consequently by themselves cannot be fulfilled through the means they adopt and they become more resentful.

Figure 1.9. 2nd phase of vicious circle of borderline personality



Secondly, once anger is established as a vice its modulation and domination by reason is a more difficult task. The internal peace of intemperance is replaced by the wrenching agonies of weak will. As Aquinas pointed out, temperance has its verification and operates exclusively in the subject, who acts, so it reverts to the person that exercises it. If not modelled by temperance, the character of pleasure may change. The person starts by getting a positive delight from indulgence, and may end by getting from this indulgence only a kind of relief from pain. In the end, pleasure can be only be circumscribed to this relief of pain (Roberts, 2007). This could explain some impulsive manifestations these people have at different levels (promiscuity, drugs, self-mutilation...), where the main objective is to relieve pain.

Table 1.11. summarizes the relation between the main vices and schemas in this personality disorder.

Table 1.11. Relation between vices and schemas in borderline personality

FACTOR	DESCRIPTION	
	RESENTMENT	SCHEMAS
BODILINESS DOMAIN	They nourish both an unsatisfactory view of themselves and, in an attempt to protect their self-esteem a hostile one towards others.	Abandonment/Instability: An exaggerated fear that people one relies on most for security, connection and help will suddenly abandon you forever, leave them alone for long periods of time or not be available when they need them.
RATIONAL DOMAIN	The resentful person then feels him/herself to be constantly undervalued and then easily it is established as a refusal to accept reconciliation, fantasizing about vengeance, or passive-aggressive tactics such as spoiling another's pleasure by being uncooperative or disdainful	Defectiveness/shame schema: feeling that one is defective, bad , unwanted, inferior or invalid in important respects or that one would be unlovable to significant others if exposed. It may involve hypersensitivity to criticism, rejection and blame.
INTERPERSONAL DOMAIN	Once resentment has taken root in his/her perspective on life, the person expects to be undervalued and tends to find his/her expectations confirmed.	Mistrust/abuse schema: The expectation that others will hurt, abuse, humiliates, cheat, lie, manipulate or take advantage.

## 4.5. Narcissistic Personality Disorder

### 4.5.1. Material and Formal Cause

The traits deemed most prototypic for narcissistic personality stem from agreeableness and extraversion factors (with the exception of angry hostility).

These traits are shown in the table below.

Table 1.12. Narcissistic Personality disorder from the Perspective of the Five-Factor Model of General Personality Structure

	Very High	High	Very Low
<b>NEUROTICISM</b> -Anxiousness -Angry hostility -Depresiveness -Self-consciousness -Impulsivity, vulnerability	Angry Hostility		Self-consciousness
<b>AGREEABLENESS</b> -Trust -Straightforwardness -Altruism, Compliance -Modesty -Tender-mindedness			Trust Straightforwardness Compliance Altruism Tender-mindedness Modesty
<b>OPENNESS</b> -Fantasy, Aesthetics -Feelings, Actions -Ideas, Values	Fantasy		
<b>EXTRAVERSION</b> -Warmth, Gregariousness -Assertiveness, Activity -Excitement seeking -Positive emotions	Assertiveness Activity Gregariousness Excitement-seeking		Warmth
<b>CONSCIENTIOUSNESS</b> -Competence, order, dutifulness, achievement, self-discipline and deliberation			

Note. Based on data from Lynam & Widiger (2001), Samuel & Widiger (2004) and Widiger (Widiger et al., 2013)

The most prototypic NPD traits are:

#### 4.5.1.1. Extraversion

- Patients with NPD are dominant, pushy, bossy, dictatorial or authoritarian (assertiveness).
- They have difficulty in developing or sustaining personal, intimate relationships (warmth).

- They are unable to tolerate being alone, exhibit an excessive need for the presence of others; they may place more emphasis on the quantity of relationships (or developing new relationships) than the depth and quality of existing relationships (gregariousness).
- They are driven, often overextended, frantic, distractible and at times burned out; they feel driven to keep busy, filling spare time with numerous and at times trivial or pointless activities and rarely taking time off to relax and do nothing (activity).
- They engage in a variety of reckless and even high dangerous activities. Their behaviour is rash, foolhardy and careless (excitement seeking).

#### *4.5.1.2. Agreeableness*

- NPD patients are suspicious of most people: they readily perceive malevolent intentions within benign, innocent remarks or behaviours. They often become involved in acrimonious arguments with friends, colleagues, associates or neighbours because of an unfounded belief or expectation that they are being mistreated, used, exploited or victimized (trust).
- They are deceptive, dishonest and manipulative. They con or deceive others for personal profit, gain or advantage: others may quickly or eventually recognize that individuals with NPD cannot be trusted; they may also engage in pathological lying (straightforwardness).
- Individuals with NPD show little to no regard for the rights of others and are exploitative or abusive (altruism).
- They are argumentative, defiant, resistant to authority, contentious, contemptuous, belligerent, combative, and obstructive: they may also be bullying, intimidating and even physically aggressive (compliance).
- They are conceitful, arrogant, boastful, pretentious, pompous, feel entitled to special considerations, treatment or recognition that are unlikely to be provided (modesty).
- They are callous and cold-hearted and, at times, even merciless and ruthless toward others.

#### *4.5.1.3. Neuroticism*

- They show episodes of intense and uncontrolled rage and fury. They are hypersensitive and touchy, easily reacting with anger and hostility towards anyone: they rebuke criticism, rejection, frustration or the minor events; hostility may provoke arguments, disputes and conflicts (angry hostility).

#### *4.5.2. Final Cause*

Before analysing this disorder, it is important to explain two main variants of this disorder, which are the compensatory and elitist variants (Millon et al., 2004). Compensatory narcissists have suffered “wounds” in early life, they develop, then, an illusion of superiority. Life thus becomes a search to fulfil aspirations of status, recognition, and prestige. Like avoidant personalities, they are exceedingly sensitive to the reactions of others. Unlike avoidant personalities, however, they seek to conceal their deep sense of deficiency from others and from themselves by creating a façade of superiority. Though they often have a degree of insight into their functioning, they nevertheless indulge themselves in grandiose fantasies of personal glory and achievement.

Like the compensating variant, the elitist construct also a false façade, but one that amplifies an already superior self-image, not one that compensates for deep feelings of inferiority. There is a fear, not of being inadequate, but of being ordinary. When carried to the logical extreme, such individuals fancy themselves as demigods who stand as a race apart from ordinary human beings, competing against one another for victory on the world stage with only a handful of worthy competitors. Many other narcissistic personalities recognize such disparities in themselves, but elitists are absolute in their belief of their grandeur. Rather than backing off, withdrawing, or feeling shamed when responded to with indifference, elitists accelerate their efforts all the more, acting increasingly and somewhat erratically to exhibit deeds and awards worthy of high esteem (Millon et al., 2004).

No matter what kind of narcissism they have, in this kind of personality the final aim is to get admiration through power, possession and prestige. It coincides with the self-direction of DSM-5 (American Psychiatric Association, 2013): “goal-setting based on gaining approval from others; personal standards unreasonably high in order to see oneself as exceptional, or too low based on a sense of entitlement; often unaware of own motivations” (p. 767).

#### *4.5.3. Efficient Cause*

When admiration through power and control is the final goal, the vice of pride, which is an excessive valuation of the self, establish themselves as predominant dispositions. Although pride has cognitive effects, it is primarily a matter of desire and is, thus, rooted in the will, not in the intellect. This is the reason why this kind of personality is one of the most difficult to change or mould. There is, therefore, a more profound degradation from the beginning than in previous disorders since it affects

primarily the will. This kind of person is able to take positions and fight for the purposes s/he wants to achieve. However, these purposes are distorted by an egocentric obsession with the self so they do not take a stand for the common good but only for their own glorification.

Courage resides in the bodily domain and follows the will and intellect. It should not, therefore, be excessive (as in obsessive compulsive personality) or withdrawn (as in avoidant personality) in an individual's capacities. In narcissistic personalities, courage is not virtuous but an imperfect disposition since the courage to stay firm is not moderated by temperance and prudence but is directed towards excellence. If we do not analyse this personality carefully, we could easily misunderstand the real meaning of courage as happens, for example, in positive psychology where it can be defined as "the strengths reflect the open-eyed exercise of will toward the worthy ends that are not certain of attainment. To qualify as courage, such acts must be done in the face of strong adversity" (Seligman, 2002, loc. 2542). Seligman defines this strength as an exercise of the will toward worthy ends; he does not, however, define what "worthy ends" are. Under this definition, any kind of effort could be considered as courage. No comments about the interior purposes and aims of the person are described. On the contrary, the description is based exclusively on external behaviour.

The contribution of strength to various fulfilments that constitute a good life, for oneself and for others (Peterson & Seligman, 2004) is also criticized by Fowers (2005), who states: "this criterion sounds promising, but these authors have very little to say about what fulfilment or the good life consist in" (p. 10). As a consequence, it offers a naive and superficial vision that does not allow us to understand the deformation that the exercise of the will can undergo under egocentric rule. Therefore, if a courageous person is misdirected by excess through ambition and pride, the result is a presumptuous person: s/he, then, is in excess as going beyond the proportion of his/her own powers (Aquinas, 1947f).

There are three primary manifestations of pride that are easily recognized in these personalities: vanity, conceit and arrogance. While pride relates more to ourselves, vanity relates to what we would have others think of us (Boyd, 2014). The dominant feature of a vain person is her/his absorbing concern with her/his appearance and the effect s/he has on others. The self-value depends, then, on the acclamation of others. These people therefore develop a stringent need to impress others, to be admired and respected. The craving for prestige produces hostility that takes the form of a desire to humiliate others. This need may allow them make extraordinary efforts that can be misconstrued as perseverance and courage.



The vain offer their appearance as a means of seducing others into thinking well of them, which in turn, is a means of seducing themselves. Such an attitude is not of a person who is secure in her/his self-esteem. They are insecure in their self-evaluation and, to compensate, look for a shallow substitute which cannot provide what they need, and cannot allay their anxiety. On the contrary, s/he seeks to find her/his own value in the judgment of others.

Vanity is easily recognized in the body, interpersonal and volitive domains. Young and Flanagan (1998) have outlined a schema-focussed conceptualisation of narcissism. Based on clinical observations and experience in dealing with narcissistic individuals, they propose that the central operating schemas in narcissistic personality disorder are entitlement, emotional deprivation, and defectiveness. In the next section, we outline the parallelism of these schemas with vice structures.

#### *4.5.4. Bodiliness Domain*

Egocentricity under the vice of pride manifests itself in the bodiliness domain as an impoverishment of emotional life since these people disregard any feelings which forsake their narcissism. Therefore, sensitivity underreacts to certain feelings and sensations without any possibility of penetrating, discerning and appreciating “the vulnerable feelings” such as tenderness, pity or warmth.

The union with any goodness that involves and assumptions of feelings of vulnerability are rejected by narcissists, which leads to a feeling of emptiness or coldness. This manifests itself in a general air of nonchalance, imperturbable and feigned tranquillity or an unimpressionable or buoyantly optimism, except when narcissistic confidence is shaken, at which time either rage, shame or emptiness is briefly displayed. They do not accept the underlying feelings of defectiveness.

Compensatory variants are exceedingly sensitive to the reactions of others, noting every critical judgment and feeling slighted by every sign of disapproval. Although they may not show it outwardly, criticism may leave them feeling humiliated, degraded, hollow, and empty. They may react with disdain, rage, or defiant counterattack. It coincides with the defectiveness schema: the feeling that one is defective, bad, inferior or invalid in important respects, or that one would be unlovable to significant others if exposed.

#### *4.5.5. Rational Domain*

Since none of their evaluations are genuine, their self-assessment is based on a created self-image. In the case of the compensatory narcissist, an illusion of superiority is developed as a compensation. They thus seek to conceal their deep sense of deficiency from others and from themselves by creating a façade of superiority. It coincides with entitlement schema: the self-aggrandizer mode is overcompensation for the patient's feelings of emotional deprivation and defectiveness. When patients are in this mode, they behave in entitled, competitive, grandiose, abusive, or status-seeking ways. The elitist narcissist also constructs a false façade, but one that amplifies an already superior self-image, not one that compensates for deep feelings of inferiority. They are absolute in their belief of their grandeur. As Horowitz (1975) explains, the narcissistic personality slides around the meaning of events:

The loss of a good and coherent self-feeling, if it occurs, is associated with intensely experienced emotions such as shame and depression, plus an anguished sense of helplessness and disorientation. To prevent this state, the narcissistic personality slides around the meaning of events in order to place the self in a better light. Those qualities which are undesirable are excluded from the self by denial of their existence, disavowal of related attitudes, externalization and negation of recent self-expressions. (p. 171)

Both refuse to face themselves. This is the reason why Taylor claims they exhibit the deadliest of all the vices (Taylor, 2006). As they focus obsessively on the self, they deny reality and build up an admirable self-image: they believe themselves to be meritorious, special and unique, deserving of great admiration and acting in a grandiose or self-assured manner, often without commensurate achievements. They have a sense of high self-worth, despite being seen by others as egoistic, inconsiderate and arrogant.

#### *4.5.6. Relational Domain*

A narcissistic person has a warped sense of her/his own excellence and as a result cuts herself/himself off from others. They alienate others by refusing to acknowledge the good that comes from others (Boyd, 2014), so there is an underestimation of the contributions of other people and they become means to their ends. This often takes the form of a need for constant attention and admiration and an unreasonable expectation of especially favourable treatment. This sense of entitlement, combined with a lack of sensitivity to the wants and needs of others, may result in the conscious

or unwitting exploitation of others. These individuals may be oblivious to the hurt their remarks may inflict. When recognized, the needs, desires, or feelings of others are likely to be viewed disparagingly as signs of weakness or vulnerability.

S/he expects special favours without assuming reciprocal responsibilities; s/he shamelessly takes others for granted and uses them to enhance his/herself and to indulge desires. Interpersonal relations are typically impaired due to problems derived from entitlement, the need for admiration, and the relative disregard for the sensitivities of others.

Another manifestation of this personality is the arrogance, which seems completely self-referential. The arrogant show no interest in others at all, they need them for neither flattery nor compassion. They are indifferent to admiration and approval from others. Rather, they see themselves as entitled to a privileged place and think of themselves as operating in a value-system which is superior to that of others. However, according to Taylor (2006), they do not have access to values at all as they have no access to any form of objectivity, no criteria for discriminating between preferences and evaluations:

He lives in a world apart, seeing himself as special and the centre of the universe, and so the sole arbiter on what is to be accepted as worthwhile. But without any point of reference beyond himself his evaluations collapse into preferences. (loc. 1040)

Having no shared value-structure, the proud can neither know others nor be known by them, since self-knowledge depends at least on taking other's reactions to one's self and one's own reactions to others seriously, which they do not do and thus means that any self-development is impossible. In their isolation and self-absorption, the proud cannot learn or benefit from their learning. Their position is a wholly static one. This is the fatal consequence in relationships of the desire-structure of the proud.

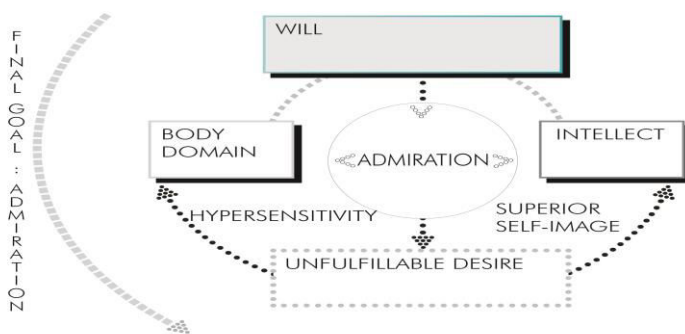
#### *4.5.7. Volitional Domain*

The more arrogant features this personality exhibits, the more contradictory their aims and desires. The arrogant feel superior and self-sufficient in their position, and see themselves as perfect. Their crucial desires, then, are to have this position confirmed and maintained. But this itself reveals a paradox: to desire a state or thing is to want something one at presents lacks. Desiring something itself expresses a lack of that thing and is, thus, an indication of the degree of dependence, implying a

lack of self-sufficiency. The notion of desireless is a person who is not engaged with the world at all and, thus, a person who has lost that which gives him/her substantial identity. Thus, the arrogant are akin to the wholly slothful, who could not be regarded as agents at all. The arrogant, it would appear, wish to be godlike.

The arrogant of this type are involved in a continuum of unfulfillable desires, as shown in figure 1.10. In order to survive and to break out the circle of desires, they need supplies from an external source in the form of recognition and confirmation of himself/herself. However, only someone they regard as equal can provide this. In their view, however, there is no equal.

Figure 1.10: 1st phase of vicious circle of narcissistic personality



#### 4.5.8. Vicious Establishment

Finally, the vice of greed, or ambition, can be added to the list of NPD characteristics. Greed is not restricted merely to money, food and drink, or sex, but also includes admiration and recognition. It may have been the thought that the vicious are all ruthless in their greed, which was in Aquinas's mind when he offered his definition of a capital sin as "adopting immoral means in order to achieve a passionately desired". The greedier they become, the more ruthless they will tend to be in the pursuance of their goal. It is from this point of view that any vice may be said to be predisposed towards harmful treatment of others; they will tend to react violently against anyone

who attempts to interfere with his/her chosen course. The route to survival is thus barred and destruction is inherent in the position of the arrogant/proud.

This process of destruction can take on different coping styles, which range from self-assertion recognition to excessive and status-seeking manipulation and finally to exploitation where aggression and hostility dominance represent extreme coping styles (Young et al., 2003). Narcissism presents in many forms. Not all patients show such extreme coping styles. There is a “spectrum of narcissism” from relatively benign to malignant. At one extreme, patients are sociopathic; at the other extreme; they are self-absorbed but capable of empathy and warmth with some people (Kernberg, 1985).

The most common position is that of recognition and status-seeking, which is a strong desire to obtain admiration from others. They place an exaggerated importance on the outward signs of success. It is the case of compensatory and elitist variants. If this admiration is not obtained they may choose more pathological ways of obtaining it, which may involve hostility and aggression or dominance and exploitation, as shown in figure 1.11. Dominance and excessive self-assertion is the tendency to bully others in order to maintain control over situations. They behave as tyrants. They often attempt to tower over others physically or psychologically in order to intimidate them. The coping style of manipulation and exploitation is the tendency to use others for one’s own gratification. At the extreme, patients who adopt this coping style are ruthless. They will do anything to get what they want, whatever the cost to others. They have little empathy and view other people as objects to use for their own satisfaction rather than as individuals in their own right. When individuals with narcissistic personality disorder use aggression and hostility, they lash out in anger when others fail to meet their needs or challenge one of their goals. Feeling threatened, they attack. In the extreme, there is violence toward others. At this point we have an unprincipled narcissistic, which is closer to a psychopath, which will be described in next section.

Figure 1.11: 2nd phase of vicious circle of narcissistic personality

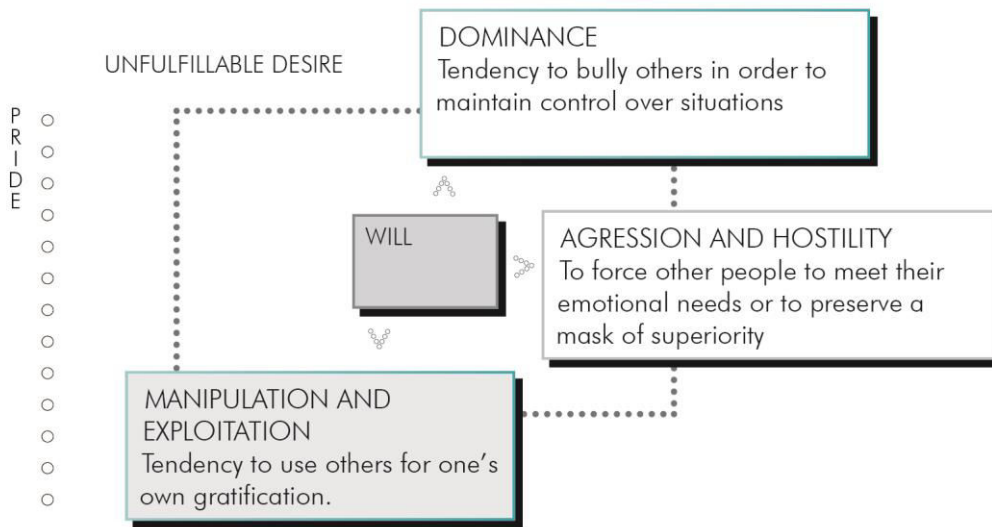


Table 1.13. summarizes the relation between the main vices and schemas in this personality.

Table 1.13. Relation between vices and schemas in narcissistic personality

	VANITY	AMBITIOUS	SCHEMAS
BODILINESS DOMAIN	These people discount any feelings which forsake their narcissism	They nourish both an unsatisfactory view of themselves and, in an attempt to protect their self-esteem a hostile one towards others.	<b>Emotional deprivation:</b> Expectations that one's desire for a normal degree of emotional support and connection will not be adequately met by others. <b>Defectiveness:</b> the feeling that one is defective, inferior or that one would be unlovable to significant others if exposed. It involves hypersensitivity to criticism, rejection and blame. <b>Aggression and Hostility:</b> they lash out in anger when others fail to meet their needs or challenge one of their goals.
INTERPERSONAL DOMAIN	The spotting in inferiority in others is a crude way to attempt to shine.  They use their appearance as a means of seducing others into thinking well of them, which in turn is a means of seducing themselves	The desire for possession usually takes the form of a tendency to deprive others.	<b>Entitlement schema</b> leads to self-centeredness, lack of concern for other people's needs and rights, and sense of "specialness". <b>Dominance and Excessive Self-Assertion</b> is the tendency to bully others in order to maintain control over situations. They can behave like tyrants. <b>Coping style of Manipulation and Exploitation</b> the use of others for one's own gratification. At the extreme, patients are ruthless
COGNITIVE DOMAIN	They deny reality and build up an admirable self-image.		<b>Entitlement:</b> The Self-Aggrandizer mode is overcompensation for the patient's feelings of emotional deprivation and defectiveness.
AFFECTIVE DOMAIN	An absorbing concern with their appearance and the effect they have on others. The self-value depends on the acclamation of others.	A striving for possessions as a protection from fear of impoverishment.	<b>Recognition- and Status-Seeking</b> is a strong desire to obtain admiration from others They almost always do this to cope with underlying feelings of defectiveness

## 4.6. Psychopathic Personality Disorder

### 4.6.1. Material and Formal Cause

As Table 1.14. shows, the traits deemed most prototypic stem, as in narcissistic personality disorder, from agreeableness, extraversion factors and neuroticism. The difference with narcissism comes mainly from the conscientiousness factor since in psychopaths dutifulness, self-discipline and deliberation of the conscientiousness factor are extremely low.

Table 1.14. Psychopathic Personality from the Perspective of the Five-Factor Model of General Personality Structure

	Very High	High	Very Low
<b>NEUROTICISM</b> -Anxiousness -Angry hostility -Depressiveness -Self-consciousness	-Impulsivity, vulnerability		Angry Hostility, Impulsivity
<b>AGREEABLENESS</b> -Trust -Straightforwardness -Altruism,	Compliance -Modesty -Tender-mindedness		Anxiousness, self-consciousness, vulnerability
<b>OPENNESS</b> -Fantasy, Aesthetics -Feelings, Actions -Ideas, Values	Trust Straightforwardness Compliance Altruism Tender-mindedness Modesty		
<b>EXTRAVERSION</b> -Warmth, Gregariousness -Assertiveness, Activity	Actions		
<b>CONSCIENTIOUSNESS</b> -Competence, order, dutifulness, achievement, self-discipline and deliberation	Assertiveness Activity Excitement-seeking		Low Warmth
			Dutifulness Self-discipline Deliberation

Note. Based on data from Lynam & Widiger (2001), Samuel & Widiger (2004) and Widiger (Widiger et al., 2013)

#### 4.6.1.1. Neuroticism

- PPD patients show episodes of intense and uncontrolled rage and fury, are hypersensitive and touchy, easily reacting with anger and hostility towards anyone. They rebuke criticism, rejections, frustrations or the minor events; hostility may provoke arguments, disputes and conflicts (angry hostility).
- They have difficulty in controlling mood and are prone to emotional outbursts. Feeling towards other intense and unstable (impulsiveness).



- Patients lack significant or appropriate feelings of anxiety or apprehension; they fail to expect, anticipate or appreciate normal, obvious or readily apparent dangers, risks, threats or consequences (anxiousness).
- They are indifferent to opinions or reactions of others; they often commit social blunders, insults and indiscriminations; they lack feelings of shame, even for socially egregious acts; and they appear to be glib and superficial (self-consciousness).
- Patients feel unrealistically invulnerable or invincible to danger; they fail to recognize own limitations; they also fail to take appropriate precautions or obtain necessary support or assistance; and they fail to recognize or appreciate signs of illness, failure or loss (vulnerability).

#### *4.6.1.2. Agreeableness and extraversion*

These factors are equal to those seen in narcissistic personality disorder with the exception of gregariousness, which is not a high trait in psychopathy. Finally, a low rating in certain conscientiousness traits is noted:

- They are undependable, unreliable and at times unethical (dutifulness).
- They are negligent at work; excessively hedonistic and self-indulgent (self-discipline).
- They are hasty and careless in their decision-making, which has harmful to dire consequences; they fail to consider consequences and costs, even for important decisions (deliberation).

In this section we will use the term psychopath instead of antisocial personality disorder since antisocial personality disorder represents a single aspect of the theoretically more inclusive psychopathy construct. It is well accepted that the seminal conceptualization of psychopathy was provided by Cleckley in the "Mask of Insanity" (1976). In this context, he elaborated upon 16 characteristics which he thought typified the prototypical psychopathic person. As is evident from Table 1.15., Cleckley conceptualized the prototypical psychopath in terms of personality characteristics and not only behavioural indicators of antisociality. He warned against simply characterizing psychopaths as criminals and equating psychopathy with delinquency and antisocial behaviour. He made numerous references to the fact that outward appearance is not necessarily consistent with the degree of actual pathology present in the individual psychopath. Cleckley observed that psychopaths are able to maintain a façade of normality. This outward appearance may take many forms, including "successful" business or professional careers.

Table 1.15. Personality Characteristics of the Psychopath according to Cleckley

<b>Characteristics</b>	
1	Superficial charm and good intelligence
2	Absence of delusions and other signs of irrational thinking
3	Absence of nervousness or psychoneurotic manifestations
4	Unreliability
5	Untruthfulness and insincerity
6	Lack of remorse or shame
7	Inadequately motivated antisocial behavior
8	Poor judgment and failure to learn by experience
9	Pathologic egocentricity and incapacity for love
10	General poverty in major affective reactions
11	Specific loss of insight
12	Unresponsiveness in general interpersonal relations
13	Fantastic and uninviting behavior with drink
14	Suicide rarely carried out
15	Sex life impersonal, trivial, or poorly integrated
16	Failure to follow any life plan

As we have show in personality traits in psychopaths, narcissistic and borderline personality disorders share a large amount of diagnostic overlap. This overlap has lead authors such as Meloy (1988) to state that the psychopathic personality

represents one subtype of narcissistic personality disorders, albeit an extreme and dangerous variant. Kernberg (1985) agrees with this approach but established a clear difference between psychopathy and narcissism. For instance, psychopaths are stated as having a total incapacity for remorse, loyalty and concern for others. Furthermore, psychopaths are stated as exhibiting incapacity to see a moral dimension in others and lack temporal awareness and ability to set future goals, whereas narcissists do not generally present with these deficits.

Narcissistic personality would be closer to the reputation-defending antisocial variant described by Millon (2004). They are motivated by the desire to defend and extend a reputation of bravery and toughness. Antisocial acts are designed to ensure that others notice them and accord them the respect that they deserve. As such, they are perpetually on guard against the possibility of belittlement. Under this perspective we analyse this disorder but, as Meloy stated, it leads to an extreme and dangerous variant when the vice of cruelty is established, at this extreme coincides with the malevolent antisocial variant described by Millon.

An attempt has been made to explain this disorder from different theories but there does not appear to be a single etiological mechanism. Some theories suggest that psychopathy is rooted in deficient fear conditioning (Hare, 1982). Others have focused on empathic responding as a core deficit of psychopathy. Blair (1999) has argued that psychopathic emotional processing deficits are best explained by the violence inhibition mechanism model. No specific deficit, then, has been found that underlies psychopathy; there is no specific trait indicator that can fully subsume a series of complex thoughts and actions across settings. Although autonomic hypoarousal may be a more straightforward indicator of propensity for negative affect, tasks assessing response modulation and emotion recognition (behavioural and emotional recognition tasks) require a more complex series of processes than autonomic (innate) functioning. Most deficit measures represent single instances of behaviour situated in a specific time and place (Widiger et al., 2013) and few articles have been published demonstrating the reliability and validity of most behavioural tasks. Therefore, the intent to fully understand the complexity of this disorder from the behavioural task model is completely deficient and leaves most questions unanswered. It is necessary to analyse the anthropological dimensions with a broader model of human nature that goes beyond autonomic functioning. Only by understanding the need for final goals and the means to get them can we grasp the core of this personality. Only by understanding the lack of hope in any final goal can we elucidate its devastating consequences.

The description of the different domains will be based on Hare's book (1993) *Without conscience*, since it expounds the main features of psychopathy.

#### 4.6.2. Final Cause

According to DSM-5 (American Psychiatric Association, 2013), its self-direction is "goal setting based on personal gratification; absence of pro-social internal standards, associated with failure to conform to lawful or culturally normative ethical behaviour" (p. 764). "The psychopath is like an infant, absorbed in his own need, vehemently demanding satiation" wrote the psychologist William McCord (1964, p. 9). This statement allows us to define the final aim of this personality as the own satisfaction, a desire to possess and dominate, which is manifested in different grades. The particularity of this craving for satisfaction is that psychopaths are ready to exploit others in order to meet their emotional needs or to preserve a mask of superiority. In this particular case the capacity to exploit, deceit or humiliate others is a triumph of his/her superiority (Horney, 1972). This "triumph" could be understood when we analyse the efficient cause of this disorder.

#### 4.6.3. Efficient Cause

Pieper's (2010) sentence "Love and fear mutually condition each other. When nothing is loved, nothing is feared and if order of love transmuted, the order of fear is perverted also"<sup>9</sup> can be taken as the starting point of the complexity of this disorder where we find a compendium of extreme manifestations of vices, because in this disorder the most perverted order of love takes place. Aquinas states it thus: "It is therefore evident that fearlessness is a vice, whether it results from lack of love, pride of soul, or dullness of understanding: yet the latter is excused from sin if it be invincible" (Aquinas, 1947g).

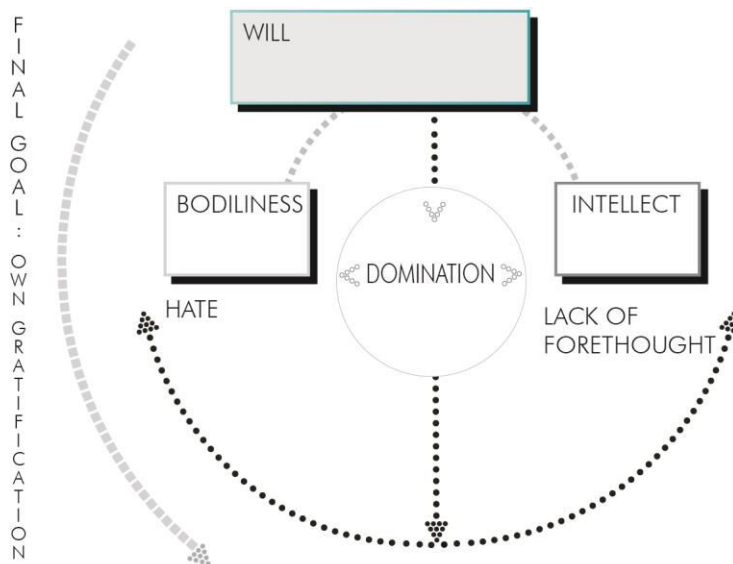
In Horney's descriptions of character disorders she states that in the grip of hopelessness, a person may give vent to destructive behaviour (Horney, 1972). She made a fine analysis in the comprehension of destructive attitude. It could be conceptualized, then, as a process where the person has lost any possibility of change or purpose. Any pretence of love, fairness, interest and competence has vanished. The huge gap between the idealized image and the real self created a feeling of failure, an object to contempt. When no space is left for hope it is, then, an

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<sup>9</sup> *Porque el temor y el amor se condicionan mutuamente: cuando nada se ama, nada se teme; y si se trastorna el orden del amor, se pervierte asimismo el orden del temor. (Pieper, 2010, p. 189)*

entry of negative emotions that easily end up in emotional states and vices. If love is the movement of the soul to obtain something good, and the hope of getting something good has been lost in this personality, then space to hate is one possibility. Hate establishes as the main emotional state and it would be manifested in this particular disorder with aggression due to the main disposition traits of angry hostility and impulsiveness. There is a breaking point in the development of this personality because there is a more or less explicit assent in abandoning any possibility of changing for the better. The person, then, is governed by their emotional states that incorporate progressive and destructive thoughts, feelings and perceptions. Figure 1.12. shows this first incorporation.

Figure1.12: 1st phase of vicious circle of psychpaths



The establishment of these vices can explain some of the manifestations:

#### *4.6.4. Bodiliness Domain*

Psychopaths suffer a kind of emotional poverty that limits the range and depth of their feelings. While at times they appear cold and unemotional, they are prone to dramatic, shallow, and short-lived displays of feeling. Sometimes they claim to experience strong emotions but are unable to describe the subtleties of various affective states. They consider tender emotions as a sign of weakness. Some clinicians have commented that the emotions of psychopaths are as shallow as to be little more than proto-emotions: primitive responses to immediate need (Hare, 1993). The impulsive acts often result from the aim that plays a central role in most of the psychopath's behaviour: to achieve immediate satisfaction, pleasure or relief.

Besides being impulsive psychopaths are highly reactive to perceived insults or slights. The inhibitory controls are weak, and the slightest provocation is sufficient to overcome them. They take offense easily and become angry and aggressive over trivialities. (Hare, 1993, p. 701)

Decisions are made on the spur of the moment, without forethought, and without consideration for the consequences to self or others.

#### *4.6.5. Rational Domain*

Psychopaths have a narcissistic and grossly inflated view of their self-worth and importance, a truly astounding egocentricity and sense of entitlement, and see themselves as the center of the universe, as superior beings who are justified in living according to their own rules. (Hare, 1993, p. 464)

They show a stunning lack of concern for the devastating effects their actions have on others. Often they are completely forthright about the matter, calmly stating that they have no sense of guilt, are not sorry for the pain and destruction they have caused and there is no reason for them to be concerned. Their lack of remorse or guilt is associated with a remarkable ability to rationalize their behavior and to shrug off personal responsibility for actions that cause shock and disappointment to family, friends, associates and others who have played by the rules. Usually they have handy excuses for their behavior and in some cases they deny that it happens at all.

#### *4.6.6. Volitional Domain*

Psychopaths often come across as arrogant, shameless braggarts, self-assured, opinionated and domineering. They love to have the power and control over others and seem unable to believe that other people have valid opinions different from theirs. They appear charismatic or “electrifying” to some people (Hare, 1993, p. 477). They think that their abilities will enable them to become anything they want to be. Nothing, in their view, could be more presumptuous than the attempt by others to narrow it and thereby to threaten their uniquely superior position.

#### *4.6.7. Relational Domain*

Psychopaths display a general lack of empathy. They are indifferent to the rights and suffering of family members and strangers alike. If they do maintain ties with their spouses and children it is only because they see family members as possessions. Lying, deceiving and manipulation are natural talents for psychopaths. With their powerful imagination in gear and focused, psychopaths appear amazingly unfazed by the possibility of being found out. Much of the lying seems to have no motivation other than what Paul Ekman refers to as a “duping delight”. They seem proud of their ability to lie (Hare, 1993, p. 569).

They may show considerable cognitive understanding of mental states but without being in touch with the affective core of these experiences (Fuchs, 2007), so they just get into the skin of others in a purely intellectual sense. The feelings of other people are of no concern to psychopaths. They view people as little more than objects to be used for their own gratification. The vulnerable and weak are favourite targets. These individuals may also be irresponsible and exploitative in their sexual relationships.

Their constant pursuance of unfulfillable and inward-directed desires alienates them from their surroundings and, depending on the specific nature of their perspective on the world, distances them from others. It was particularly the arrogantly proud who assumed and desired such a distance (Taylor, 2006).

#### *4.6.8. Vicious Establishment*

We are in the position now to analyse the secondary vices that come from hopelessness and which are shown in Graphic 1.13. It will make it easier to fully grasp the domain manifestations. Even if one decides to abandon any possibility of changing for the better, one cannot avoid being impressed by the goodness and beauty of others since goodness and beauty are inscribed in our nature. The

conviction that s/he cannot change his/her life for the better and the testimony of beauty and goodness of others provokes sadness and is the entry of a capital vice such as envy. According to Perrine (2014), envy is the result of a perception of inferiority. As an envious person experiencing unpleasant emotions and feelings regarding his/her own self-worth, s/he will attempt to remove that perception of inferiority, so that s/he no longer judges the envied person to be superior to her/himself. By doing so, the envious person will no longer be envious and return to measure the self-worth of her/himself.

There are two ways of reclaiming this position. One is for the envier to increase her/his position so that s/he surpasses that of envied. This way is more frequent in the reputation-defending variant (narcissistic characteristic). As Millon (2004) says, “whenever their status or ability is slighted, they may erupt with ferocious intensity, posturing and threatening until their rivals back down” (p. 160). The second way is to reduce or remove superiority of the other in some way, and includes violence, as it is more proper of “pure” psychopaths. Both are connected with envy and resentment and the desire for revenge since the person feels deprived of the good that others seem to possess. Millon (2004) states it thus:

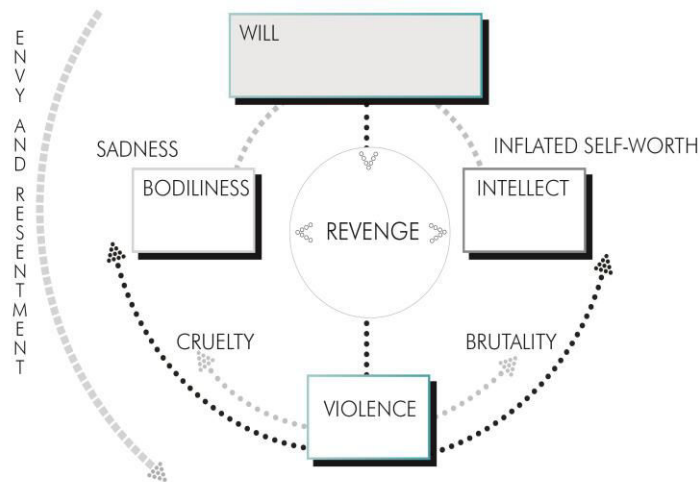
Jealous of those who have received the bounty of a good life, they are driven by a envious desire for retribution to take what destiny has refused them. Whether through deceit or destruction, their goal is compensation for the emptiness of life, rationalized by the assertion that they alone can restore the imbalance fated to them. (p. 158)

Instead of accepting it from humility, this desire is disposed as vindictive desire. This connection is well explained by Perrine (2014):

So envy is being disposed to will against the good of the other- the envious person would like to see the other person robbed, dispossessed, stripped, humiliated or hurt- but it also involves beings disposed to feel contrary to one’s true (even if unperceived) good. It thus detracts from the common good in two ways. It can also count against the common good in further ways as it can easily lead to other related vices such as malice, cruelty, vindictiveness and Schadenfreude (pleasure in the pain of another). So it should be obvious by now how the fundamental attitude of the envious is directly opposed to love. (p. 233)



Figure 1.13: 2nd phase of vicious circle of psychopaths



The common flaw of all vices, according to Aquinas, is that they interfere with the right order of reason and passion, and lead to blindness of the mind, lack of moderation and lack of judgment. Harm to others shares the same basic framework. Cruelty or brutality then appear as secondary vices and could explain many of their manifestations. As in other vices, they are wholly self-centred:

Focusing their view on themselves in the world they will tend not to see the needs and sufferings of others even on those occasions when they could reasonably be expected to make them their concern. They are predisposed towards thoughtless cruelty and brutality. (Taylor, 2006, loc. 1444)

The envious and resentful need their self-image to be enhanced and consequently both may predispose towards brutality and cruelty. In this extreme a belligerent,

rancorous, brutal, vengeful and vindictive style of psychopath charged with hateful and destructive defiance emerges.

Depending on the range of impulsivity and deliberation, we could find more cruel or brutal reactions:

- In the kind of reactive aggression we find more common brutality: “The brutal appear to react precisely to some crippling damages they perceive as having been done to them” (Taylor, 2006, loc. 1445). The arising of the perceptions of this sort is likely to be indiscriminate in the selection of the object, so the brutal may not see their victim as the one responsible for the damage done to them, but as representative of those who are a proper object for revenge. It shows the scant thinking behind this behaviour: it is like a self-defence reaction which makes them blind and more chancy and arbitrary. Victims, then, appear victims only accidentally because the brutal person has no interest in the individual person beyond perceiving in the potential victim those qualities which make them an obstacle, in one way or another, to their own well-being. Brutality seems more related with the reactive or defensive aggression, and is associated with angry reactivity, emotional dysregulation and inattention. It is linked to hostile attribution biases and deficits on problem-solving strategies. They may reflect low thresholds for emotional responding to threats or provocations.
- However, in other kinds of aggression, the proactive one has been found to be positively related to positive outcome expectations and self-efficacy. It has not been linked to elevated levels of skin conductance and angry non-verbal responses during stress. It has been related to callous unemotional traits (absence of guilt, constricted display of emotion). These people are less reactive and less sensitive to cues of punishment when a reward-oriented response set is primed. They are physiologically underreactive in the sympathetic nervous system (Vitaro, Brendgen, & Barker, 2006). In this subtype cruel actions are more frequently found. The cruel intend to harm the other for purposes of their own by producing certain negative reactions in him/her. There is a wish to impress on their victims their own superior position. They want to make their power felt, and inflicting suffering, or the fear of suffering, appears to them a promising means toward this end. Here we do not find the lack of goal-focused actions of brutality; on the contrary, there is a deep deliberation. It coincides with a subtype of psychopaths that have high rates in consciousness and are successful in their pursuits (Widiger et al., 2013).

The state of mind of the cruel is extremely focused since they are concerned with their victim's feeling and responses. The brutal, however are not. Rather, they are uncaring and totally indifferent towards the other's fate. But whatever the means they adopted in pursuit of their aim, to achieve it they have to have some perception of the other's consciousness, or they would not be able to assess his/her reactions. Even if they intend to cause damage in a brutal manner or not, both are interested in the other's reaction to that damage. But cruelty may be more or less subtle, sophisticated and discriminating in a way that brutality may not. The difference in the attitudes of the brutal and the cruel is reflected in the properties required to become a victim. The victim of brutality need only be available and destroyable. More is necessary for the victim of cruelty: not only has s/he to be capable of suffering, s/he should, for best effect, also be capable of remembering such suffering, and of formulating fearful expectations. Particular attempts at cruelty may therefore be more or less effective, depending on the potential victim's reaction to the particular treatment chosen. The cruel regard the other as something to be manipulated into a position of dependence through suffering and fear, thus destroying the victim's reasonable expectation of exercising a degree of control over his/her actions. Playing around with expectations is indeed among the tactics the cruel may employ (Taylor, 2006).

Only under the framework of envy and revenge can the lack of empathy and remorse be understood since any destructive action is in the service of revenge and with this belief his/her victims deserve the treatment they receive. Emotions under this final goal can be distorted to the extreme or not show the proper agreement sensitivity proportional to it, as there has been a profound break of unity. Here, pride blinds the person to the hating and destructive aspects of his/her behaviour and prevents him/her from taking responsibility for the hate (Solomon, 2006). On the other hand, the other's suffering itself is part of the desired reversal of their respective positions. His/her greatest pleasure, then, lies in taking control of others. More straightforwardly, wishing to see the other suffer may also be a desire for revenge, for the pleasure of paying back those seen as in some way responsible for one's own misery. That would be an expression of resentment, an emotion naturally felt by the envious (Taylor, 2006).

Aggression, though not of only openly hostile, is characteristic also of the lustful. The lustful are plainly brutal in their attitude and treatment of others for, like the brutal, they do not see them as individuals at all, and are indifferent to any emotions and hopes they may arouse. In the case of cruelty, there are more sophisticated in their plans and to achieve their aim some manipulation of the other may be required, but this again would be incidental and part of the plan to humiliate.

All previous vices (pride, lust, cruelty etc.), as we have mentioned in previous chapters, are different aspects of the intemperance. It can be said, then, of the proud, the envious, the resentful, and the lustful that the desire-structure of their relevant vice is such that, in various ways, they are predisposed towards aggressive behaviour that is harmful to others (Taylor, 2006). But regardless of their success, psychopaths never feel that they have been compensated for life's impoverishment, it is part of the vicious circle. Table 1.16. summarizes the relation between the main vices and schemas in this personality.

Table 1.16. Relation between vices and schemas in psychopathy

<b>INTEMPERANCE</b>			
	<b>RESENTFULNESS/ENVY</b>	<b>CRUELTY</b>	<b>FEATURES</b>
<b>BODILINESS DOMAIN</b>	They experience unpleasant emotions and feelings regarding their own self-worth.		They take offense easily and become angry and aggressive over trivialities.
<b>INTERPERSONAL DOMAIN</b>	They reduce or remove superiority of the other in some way, including through the violence.	The cruel tries to harm the other for purposes of their own by producing certain negative reactions.	They are unable to get into the skin of others except in a purely intellectual sense. Any destructive action is in the service of revenge and with this belief his/her victims deserve the treatment they receive.
<b>COGNITIVE DOMAIN</b>		The state of mind of cruel is extremely focused, because they are concerned with their victim 's feeling and responses.	Grossly inflated view of their self-worth and importance.
<b>AFFECTIVE DOMAIN</b>	Person feels deprived of the good that others seem to possess. Instead of accepting it with humility this desire is disposed of as a vindictive desire.	There is a wish to impress on their victims their own superior position.	They love to have power and control over others and seem unable to believe that other people have valid opinions different from themselves.

In this chapter we have described the relations of vices or “egocentric attitudes”, with the main personality disorders. Obviously, it does not mean that they take form in the “pure description” because few individuals exist as the incarnation of an abstract psychological ideal. Instead, most people combine aspects of two or more personality styles, though some combinations are more common than others.

It has been intent to offer a framework to rescue part of human responsibility in the personality development. Understanding the complex interaction among human dimensions and the crucial role of the final goal may offer new therapeutic possibilities where the patient plays the main role.

**CHAPTER FIVE. COMPLEXITY OF EGOCENTRICITY  
VERSUS SIMPLICITY OF SELF-GIVING**



## 5.1. Relation of egocentricity and vicious pattern

According to virtue theorists, it has been shown that if a person with a personality flaw seems to knowingly and voluntarily seek out activities that reinforce maladaptive behaviours, s/he eventually will have a stable disposition to perform those behaviours. This element of choice affords a degree of consent to what will eventually become inflexible, rigid and automatic behaviours.

Under this paradigm, we proposed in the previous chapter that the lack of virtue development distorts the personality, establishing a fragmentation of the personhood and lack of unity with one's good goals. When these egocentric dispositions acquire a stable structure, vices are established. As we mentioned in the previous chapter, Taylor states that the vicious are similar in their structure in that the person's thoughts and desires, while having a different content depending on the vice in question. On the other hand, Künkel (1984) defined egocentricity as an attitude in which "the person thinks, the person feels and acts exclusively in the service of the preservation or elevation of his own ego".

At this point it can be assured that vicious attitudes are egocentric in themselves. We propose that egocentricity and vices are two different ways of addressing the same attitude. One addresses it from an ethical perspective (vices), and the other from a psychological perspective (egocentricity), but both of them lead to the same consequences.

There are degrees of vices involvement that would make more or less difficult to change one's perspective as they imply a more egocentric position. Vices such as greed and vanity focus directly on the self and are easier to recognize. Confusion arises with other kinds of vices such as fear, pusillanimity, obstinacy or lust, which have a blurred manifestation because they focus indirectly on the self.

We have already explained that, according to Taylor (2006), vices act in certain patterned ways with specific consequences. However, what is really significant are the considerable similitudes these vices have with the consequences of the fictitious guiding model outlined by Adler. These are:

1. Vices alter the directions of thoughts and introduce relevant vice-concepts into the deliberation. According to Adler, human thoughts adjust to the fictitious guiding principle.

2. Under vices, the person is committed to defective modes of perceiving the world and herself/himself. The fictitious guiding model has a simple schema and influences also the faculty of perception.
3. Under vices, a kind of self-deception directs attention away from the action and will towards the relevant moral considerations of the inner life. In the Adler model, the neurotic causes a concentration of the attention on those points of view regarded by him/her as important, narrowing the field of reality.
4. The last consequence is related to relationships as the vicious suffer a degradation in relations since they focus their view in themselves. According to Adler, through the fictitious guiding model the person makes a constructive creation of the psyche based on egocentric needs.

## **5.2. Progressive increase in egocentricity at different domains in personality disorders**

In the previous chapter, personality disorder development was described under the four-causes model. In this chapter, we will describe the progression in egocentricity in any particular domain to verify the increasing distortions of different personality disorders. It will be based on the manifestation of egocentricity in different domains according to Künkel.

### *5.2.1. Bodiliness Domain*

As was shown under the egocentric attitude, there is an impoverishment of the emotional life, since the person denies any kind of emotion and over identifies with others. The function of egocentricity at this level is to cover people for fears associated with self-in-unity, and is thus a consequence of mistrust.

Now, following this premise we will analyse the progressive impoverishment of the emotional life across all personality disorders. This impoverishment entails, in the long term, a disharmony of the main emotions of pleasure, sorrow, and fear. This disharmony ranges from an inadequate response to a good or bad object in two different ways:

- A hyper or hypo-reactivity to a particular object; in other words, an inadequate response in quantity (*disharmony of proportion*).
- An inadequate response in quality to a particular object (*disharmony of correspondence or lack of alignment*).



In any personality disorder egocentricity has different manifestations, which are:

- The avoidant personality feels a predominant emotion of fear. If fear is not directed by courage, but by an egocentric attitude, it takes place in an inordinate manner and drives away the capacity to think and deliberate. The result, then, is a state of confusion and emotional irresolution that leads to a general state of numbness (Millon et al., 2004). At this level the person cannot distinguish between the object which activates fears and s/he are inclined to indiscriminately escape from what s/he fears. Fear, then, may pervade all personality and could be manifested at different levels, especially at the interpersonal level (fear of disapproval or rejection). The attention, then, is fixed on avoiding any kind of fear without any thought of overcoming it. This is, then, the entrance and maintenance of anxiety. Thus, in this particular disorder there is a hyper-reactivity of fear, which is an inadequate response in quantity (*disharmony of proportion*).
- The obsessive compulsive personality has a similar pattern in the body domain but is characterized by an emotional inhibition, which is a general emotional hypo-reaction. These kinds of people fear feeling emotions because of the uncertainty these provoke; inhibition, on the contrary offers them a sense of control. In this particular case, instead of withdrawing from any effort, they self-impose their own high standards which guarantee some kind of emotional constraint because of the predictability of self-imposed tasks. Fear, then, is limited to the fear of failure. In this particular disorder there would also be a hyper-reactivity of fear and hypo-reactivity of the rest of the emotions, and is, then, an inadequate response in quantity (*disharmony of proportion*).
- The borderline personality exhibits an anger temperament, so patients easily react with anger and hostility towards anyone. The main characteristic of this disorder is the inability to regulate and contain emerging affects, especially anger, so they identify with her/his state of mind and emotion, unable to gain distance from the present situation. Both kinds of emotional disharmony can be observed as there could be a hyper-reactivity and an inadequate response of anger to neutral objects. This response and hyper-reactivity implies a *disharmony of proportion and a disharmony of correspondence* of the

affective response at the moment that this anger is a consequence of personal dissatisfaction without any relation to the value of the object.

- Narcissistic personality and psychopaths discount any feeling which forsake their narcissism. Thus they hypo-react to “vulnerable feelings” such as humiliation, sorrow and fear, acting in the opposite way that these feelings move them towards. Instead of cooperation with sensitivity to increase the goodness of certain action, they end up choosing not to be affected by these emotions. As a consequence, they show a completely different mood manifested by a general air of imperturbable and feigned tranquillity that has little to do with real peace and calm. To understand this emotional impoverishment, the secondary reactions described by Horney are very useful. It consists of the transformation of the feelings of shame or humiliation into hostility. It is a pride reaction and is based on the state of shame that these vulnerable feelings produce. The reasons behind emotions are distorted and, consequently, emotions do not allow them to act in a way consistent with good goals. Here again, a *disharmony of correspondence* takes place.

To sum up, we can conclude that the avoidant personality succumbs just to fear and shame and avoids it. The obsessive personality denies them, creating “pseudo-obligations” which allow him/her to withdraw from these feelings. The borderline personality transforms them into anger. Narcissistic and psychopaths transform them into hostility against others, especially in psychopathic personality. In the latter, the transformation takes such intensity that some authors consider they have shallow emotions that are no more than “proto-emotions”.

Before finishing this section, it is important to consider the distortion of pleasure that all these disorders may entail, reaching maximum expression in psychopathy. In all of them, pleasure does not take place appropriately because it is not the response in some objectivable good. All patients, then, suffer an inadequate response of pleasure (*disharmony of correspondence*):

- In the avoidant personality, pleasure is linked to relief from avoiding effort or challenges, although it could imply a particular good.
- In the obsessive personality, it entails a relief from avoiding any emotional uncertainty.

- In the borderline personality, despair can lead to different pathological ways of relief, including self-mutilation where pleasure again is not linked to the good obtained but to the relief of pain.
- Narcissists find pleasure in every situation which involves an excessive valuation of the self, including humiliation of others.
- Psychopaths can even feel pleasure through inflicting damage to others.

As we showed previously in narcissists and psychopaths, only under the structure of envy and revenge can these reactions be fully understood because anger and sadness only achieve pleasure under a self-vindication aptitude. This is the more extreme case where a disharmony of correspondence takes place.

We can see the process of alienation from oneself, as explained by Horney, that suffers all these personality disorders. It involves a diminished sincerity and lack of deep feelings. In all these disorders there is, then, an impoverishment of emotional life. It is a fact that emotions are not assumed. Rather, the opposite occurs in which these people either succumb to emotions or deny them. Ignoring the reasons behind these emotions and denying any good object to protect or discover, people, then, can only adopt self-protective strategies to defend themselves (Stratton, 2006). It leads to very autonomous defensive reactions which are progressively less reflexive and chosen (Terruwe & Baars, 1972).

According to Joan Paul II, in normal development we can claim that “the person discovers in the body the anticipatory sign, the expression and the promise of the gift of the self, in conformity with the wise plan of the creator” (John Paul II, 1993). Hence, the body speaks a language, a language of anticipatory signs, providing parameters within which we live the moral life. The body is integral to us, and its language contributes to those decisions. However the language of the body in personality disorders is blocked and distorted by the egocentricity attitude, which does not allow patients to interpret adequately the anticipatory signs but to reject or misinterpret them. This is the basis for the progressive disintegration of human domains.

The lower extreme, then, would be the avoidant and obsessive disorders, where a predominant disharmony of proportion is found. In the higher extreme, we would find the psychopathy personality disorder.

It is not possible to really grasp the egocentric deformation of body domain if we do not show deformation at different levels because, as Brugger pointed out, there is a connection between all of them. It is the moment, then, to analyse the other domains.

### 5.2.2. Rational Domain

As was shown, egocentricity in the cognitive domain manifests itself as rigid schemas of life which are not open to corrections and modification through experience. From the vice approach, they alter the directions of thoughts and introduce relevant vice-concepts into the deliberation process. Unable to orient thoughts logically, they may at times become lost in person subjectivity. Allport (1963) himself said: “some people are chronically unable to change their sets when objective conditions demand it; others, by contrast, are flexible”. He even connected cognitive flexibility with self-confidence:

Let us sum up what the evidence shows. A person who is insecure, self-distrustful, who feels threatened by life or otherwise inadequate, tends to have a congruent cognitive style which is rigid, field-bound, concrete, acquiescent. By contrast, the more active, able, secure, relaxed individual is able to perceive and think in channels that are flexible and on the whole better adapted to the objective demands of the situation he finds himself in. (p. 270)

As we have shown in previous chapters, in any personality disorder a progressive cognitive inflexibility develops and ends up configuring a particular Young schema. We can see this parallelism between cognitive inflexibility and schemas for any personality disorder:

- Avoidant personality: cognitive capacities are drawn in the direction of reassuring security. The defective/shame schema predominates and could be considered a vice-concept regarding the patients themselves and their capacities.
- Obsessive personality: Rigidity and stubbornness block any intent to form a global view and circumspection. The introduction of the vice-concept is about his/her narrow own view of personal freedom as compared to self-discipline. It is very similar to the unrelenting standards schema. by which they have a belief that one must strive to meet very high internalized standards of behaviour and performance.
- Borderline personality: a tendency to regard and evaluate the present object or person in a one-sided and absolute manner without any nuance or ambiguities. It leads to an all-or-nothing schema.

- Narcissists: they deny any reality that confronts with their admirable self-image, so they are cognitively expansive with a tendency to self-glorification fantasies. It coincides with the entitlement schema.
- Psychopaths: in this case, they do not only have an admirable self-image but they also show a remarkable ability to rationalize their behaviour and shrug off personal responsibility. It coincides with the entitlement schema.

### 5.2.3. Relational Domain

Under the egocentric attitude, there is an exclusion of the rest of the world which ranges from isolation to the destruction of others. However, authentic encounters imply a surrender to others because relations demand self-disclosures (Stratton, 2006). Mature people are capable of tough and tender love or anything in between because the self and communion may exist in perfect complementarity. Thus, it is possible to set limits with others without usurping other's freedom of choice. However, egocentricity does not leave space for complementarity; on the contrary, it only allows self-protection, which implies the exclusion of others. To fully understand the progression of this "exclusion of others" that appears in personality disorders, it is very useful to refer to the strategies described by Stratton (2006). He defines basic coverings, which are four off-centre strategies that can be related to a specific personality disorder. The function of these off-centre strategies is to protect the self that feels vulnerable, as we present thus:

- Avoidant personality: individuals with an avoidant personality feel safest when the self is concealed and hidden from others in relations. Relational conflicts are avoided at all cost (passive self-separation). Sometimes they can just follow others and relinquish their own agenda. The protective self-denial strategy becomes a means of security. It leads to a passive and indifferent attitude, which does not allow them to have intimate relationships since it maintains them at a safe distance from all emotional involvement. The commitment in a relationship is mutated in a withdrawal pattern to guarantee security at all cost. Their love of comfort does not allow them to consider others.
- Obsessive personality: they emphasize task ahead of relationships. They pursue their own protective agenda through these tasks and others must participate with them or get out of the way: it is a controlling self-protective

strategy. This agenda makes it impossible for them to enter in a deep and committed relationship.

- Borderline personality will persuade and even manipulate others into following them: aggressive self-dispersion strategy. This strategy can take more drastic means, as occurs in narcissists and psychopaths. In the former, the craving for prestige produces hostility that takes the form of humiliating others. In the latter, the aggressive strategy not only humiliates others, but at the more extreme, leads to brutality and cruelty.

The commonality of all these off-centre strategies is that they create conditions for the self to be protected without regard for, and usually at the expense of, others. One tragic consequence of this position is the lack of intimacy in relationships. This intimacy is not a cognitive knowledge based on abstraction but “an intuitive knowledge based on experience, on union with the other” (Vitz, 2006, p. 124). The memory of these real experiences is fundamental for the development of self-confidence. Self-protective strategies, on the contrary, produce a sense of pseudo-intimacy because of the short-term sense of control it brings, but it leads the person to isolation and despair. Lack of encounter with other contributes to such insecurity.

#### *5.2.4. Volitional Domain*

Egocentricity at this level leads to a passive or dominant attitude with severe impairment for self-giving. As we showed in the efficient cause, all these disorders, along with the will, take a particular stance in one or other direction and can show more severe manifestations. An incorrect direction of the will under egocentric attitude is the first step toward vicious establishment with the consequent degradation of personality, which is expressed in a particular inward position, thus:

- Avoidant personality: This personality allows the individual to take an inward position to avoid any kind of risk or insecurity: it keeps her/him safe, but also isolated. Only the egocentric security principle moves them. If they acquiesce to this principle to its extreme consequences, the slothful vice ends up establishing itself and the whole personality conforms. S/he is then endowed with a null range of effectiveness, and his/her will degrades progressively such that they are no longer capable of taking a stand. These people are then incapable of deep fervour or strong self-dedication.

- Obsessive personality: In these particular cases, individuals do not withdraw their potentialities. Rather, they over-exceed their will to the fulfilment of their duties. For this type of person, duty is primarily defined in terms of tangible, outward and specific obligations. They tend to overemphasize such obligations and underestimate others that are less susceptible to a statutory formulation. They develop a kind of interior rigidity in which they stay entrenched, neglecting others' higher demands. Subordinating themselves to a definitive set of obligations, they become unable to see the duties in question of the hierarchy of values in general according to their true proportions.

They take, then, an inward position to maintain the self-imposed constraints. This is a condition in which a dogmatic obstinacy and persistence become established. This personality is described by Von Hildebrand (1990a), especially the mental trick they make up to keep a "clean" conscience. Under obstinacy, they never relax and may experience this self-discipline as a manifestation of an extraordinary will power and therefore as a sure sign of freedom. Since they never relax, they form the conviction that they always maintain themselves on a level above the situation, that they make no concession to their nature. They therefore believe themselves to be eminently free. This conviction contributes to the maintenance of the vicious circle. The personal reward is the preservation of their conscience intact. An element of egocentricity is perceptible, which is their firm intent to safeguard only their own peace of mind with a lack of eagerness for values as such an enthusiasm for the beautiful and the good in themselves and in others. This awareness of obligations does not arise from a true appreciation of values and others; it is rooted in a general disposition to the cramped and constrained states of mind, which makes it impossible for them to enter into a deep and committed relationship.

- Borderline personality: In previous chapter, we showed that the constant feature of these kinds of patients is their inconstancy. They lack the experience of agency or authorship of their life and, as a consequence, do not acquire any permanent structure in their personality but only a temporal structure according to the circumstances. This inconstancy is due to their submersion into states of anger after the subjective evaluation of the pain inflicted. The great force required to repel the injury ensures great vehemence and impetuosity in the movement of anger, which does not leave space for any rational consideration. If these people do not find space to

deliberate on the reason behind these anger reactions, it could easily lead to rancour and vengeance. Life, then, is lived passively, and not as the result of their planning and will. In this personality, a total fragmentation of personhood takes place because there is a lack of unity with goals. The intensity of the emotional states is not directed by rational analysis; just the opposite, in situations that require them to take sides rationally, they remain confined to impulses. Here, we have a disintegrated personality, which is the most severe case from the psychological point of view.

- Narcissistic personality: Patients with this personality take a primary, active and inward position to maintain their own excellence. This inward acquiescence is assumed in the volitional domain. As we have shown, it can be conditioned by feelings of inferiority (compensate variant), which leads to the formation of an admirable self-image. It can either be taken based on an amplification of an already established self-image. In the latter case, pride acts primarily as a matter of desire with few conditions. Courage in both cases is not withdrawn as in the avoidant personality or over-exceeded as in the obsessive personality but misdirected by a primary egocentric attitude, which may lead to arrogance and conceit.
  
- Psychopathic personality: As we have already seen, the most perverted order of love takes place in this disorder since patients have lost any possibility of changing or purpose and they only get satisfaction through having power and control over others. A vindictive desire governs this personality, which may lead to cruelty and brutality as a way of showing their superior position. There is a gradual ethical perversion which reaches a maximum in the case of cruelty, where there is a deep deliberation of actions and consequences. It leads to a harm the other for purposes of their own by producing certain negative reactions in their victims. There is a wish to impress on their victims their own superior position. They show an active attitude to make their power felt, and inflicting suffering, or the fear of suffering, appears to them a promising means toward this end.



## 5.4. Ethical Consequences of egocentricity

According to the previous description, it can be stated that disordered self-love or egocentricity can primarily be expressed in three different domains: the bodiliness domain (sensorial level), the relational and rational domain, and at the fundamental level of life, which is the volitional domain. Egocentricity can also be expressed secondarily in all domains by virtue of their substantial unity.

Thus, a personality disorder can start mainly with a *primary disordered sensitivity* (bodiliness domain), which, for example, could lead to an excessive anxiety or anger reactions, as is the case in avoidant, obsessive and borderline personalities. This primary disordered sensitivity can have a secondary effect on other domains such as the rational domain. Consequently, emotions (embodied affectivity) are at drift and not integrated under a superior order. Under these circumstances, rational judgments are darkened by emotions and cannot judge what is more convenient.

Once the rational judgment has been altered, it is easy to recognize how a primary disordered sensitivity may drag or pull the will towards a fictitious plan. Thus, the more disordered the sensitivity of a person who reaches adulthood is, the more difficult s/he is able to deliberate concerning the tendencies s/he already possesses. From the psychological perspective, these personalities would be the most severe. This, however, does not eliminate the ethical contribution, as the patient's responsibility participates to a greater or lesser degree. If the process of deliberation is partially damaged, the patient can at least choose to stop to consider their own tendencies and the conveniences of their objectives or at least seek help.

To maintain inner order, it is important to develop temperance: it is necessary to give reasons of ourselves and discern our inner states. This involves not only the primary power of sensory apprehension but also the secondary intellectual apprehension. It allows us to engage in higher intellectual operations. It explains the difficulty of developing temperance in the borderline personality, where severe privations in the body and relational domain take place. In other words, privation dispositions in the bodiliness domain may then subordinate the cognitive and volitive domains. Errors of judgments are a consequence of this incorrect subordination and may lead to a disordered consent of the will. The more severe privations are established at the body and relational domain, the less option the will has to consent properly.

However, other personality disorders can start not as a primary disordered sensitivity, although this can be also affected, but at the volitional level, as a *primary disordered will*. Secondly, it drags the rest of the domains. In this case the process of deliberation is altered less; the person is, thus, more responsible. From an ethical point of view, it would be the most severe disorder. However, as we showed in chapter three, bad choices progressively inculcate a disordered disposition in the bodiliness structure without allowing for an integrated view of the whole personality. This lack of integration at this embodied level progressively alters the human capacity to read emotions and to enact rational plans and desires with appropriate promptness and pleasure. Thus, the more choices patients take in wrong direction, the less capacity they have to deliberate. This explains the pathological degradation that some personalities can suffer in all domains.

Regardless of whether the personality disorder is a result of a *primary disordered sensitivity* or a *primary disordered will*, both have ethical consequences which aggravate the disorder. It is based on Taylor's relation of vicious and moral sensitivity (2006): "a kind of self-deception directs attention away from the action and the will towards the relevant moral considerations of the inner life, so the possibility of taking a contemplative attitude towards the good will be more difficult." There is, then, a progressive limitation of the appreciation of the intrinsic goodness and beauty of any object. It is related to the phenomenon of absolutization described by Caruso since, through absolutization, one puts oneself at the centre of universe, which leads to false appreciations and false ethical judgements, since the person builds a universal system where the rules are dictated only by his/her own feelings and needs. The need for supremacy makes him/her indifferent to truth, whether concerning himself/herself or others. This lack of appreciation does not allow them to conform themselves according to a proper end, but according to an egocentric end. Von Hildebrand (1952) explains very accurately how pride contaminates all intrinsically good dispositions and robs every virtue of its value before God; in the attempt at enthroning oneself in place of the trust of others, the person cuts himself/herself off from the world of values. A kind of value-blindness, then, progressively develops under this egocentric attitude:

The more a value implies consequences in conflict with our pride and concupiscence, the more we find a human tendency to bar even the knowledge of these values. Our perception of moral values therefore is hindered more than any other value perception by the wrong direction of our will. (Von Hildebrand, 1952, p. 213)

Immersion in egocentricity, which seeks satisfaction and security of the ego alone, does not allow for an attitude of responsiveness that enables a person to fully understand a value or to take joy in the value itself. On the contrary, it promotes a progressive value-blindness which will promote a more egocentric attitude. At this point we can appreciate the influence of psychology in moral decisions and vice versa. Psychological disorders may contribute to ethical decisions that do not benefit human flourishing. Indeed, these ethical decisions, when not in accordance with an objective good, can contribute to a progressive distortion of the personhood. Every single case would need an in-depth analysis in order to fully understand this complex process. To negate this relation would only lead to a superficial approach to human wealth and disorder. This approach, however, allows a deeper knowledge to be gained, where not only limitations are taken into account but also all possibilities that are rooted in every domain and, ultimately, in our divine nature. The last section of this chapter is an introduction to the therapeutic options that the contrary attitude of egocentricity, that is, self-giving, may offer.

## **5.5. Therapeutic consequences of self-giving**

In the last section of this dissertation, we do not intend to put forward a therapeutic system, but we do wish to highlight the opportunities that a self-giving attitude may offer in overcoming egocentricity.

As we have shown in previous chapters, it can be accepted now that all described personality disorders have a centripetal tendency which tries to attract all reality to the egocentric individual, which, as a consequence, breaks relationships and distorts personality. All reality, then, is shaped according to the egocentric attitude. As we have shown, this has dramatic consequences since this blocks authentic relations and encounters with others because, under an egocentric attitude, every response is motivated by the merely subjective satisfaction (such as envy, arrogance, pride...).

This implies, then, a gesture towards an object but directed towards its appropriation, though not towards its communication and compenetration. Patients, thus, do not enter a real relation. Others are tools for the purpose of self-satisfaction.

If trapped in their own egocentricity with the subjectively satisfying effect, there is no possibility for the patient to conforming to that which is objectively important, to something greater than themselves; on the contrary there is only imprisonment in their self-centredness (Von Hildebrand, 1952).

The therapeutic challenge, then, is to open this self-centredness and conform to the important and valuable objects. Human beings become genuinely human and entirely themselves only when, rising in devotion to a task in service to a cause or out of love for another person, they go beyond and forget themselves (Frankl, 2004). This capacity to transcend oneself, which is conforming to something greater for its own sake, is one of man's deepest characteristics and is based on the theological (or transcendent) anthropological premise that "humans are created to the image of God". Under egocentricity, the attitude has the character of self-affirmation. By contrast, under this capacity of transcending oneself, our attitude has the basic feature of self-donation or self-giving. The conformation to something really and objectively valuable (a person, a job...) involves a certain donation; it is, then, an antagonism to any kind of egocentricity.

Over the last few years, many authors have proposed the psychology of virtues and character strength, which focus attention not only on psychological function, but also its correlation with moral and spiritual values. Titus (2009) states that psychological health always ultimately requires the development of certain dispositions from within limited human capacities and dispositions. Thus, they are pathways through which a personality develops and mental health is promoted. Cardinal virtues play a crucial role in the therapeutic process because of their functions: temperance (*temperantia*) manages the emotions of attraction and repulsion, and supports natural inclinations. Prudence involves an inclination to know the truth and manifold dispositions that need development. Justice allows all good human dispositions in their social aspects whilst courage (*fortitude*) expresses emotional intelligence such as initiative-taking and generosity.

If vices are related to egocentricity, Potter (2009, p. 125) explains that the virtues can overcome it: "virtues help us overcome obstacles to living a consistently good life and guard against the tendency to get too caught up in a self-centred world-view with its attendant motives and inclinations". In the psychotherapeutic process there is a precondition and basic presupposition to change ourselves, and takes the form of the cultivation of the virtue of humility. According to Von Hildebrand (1990a):

on the degree of our humility depends the measure in which we shall achieve freedom to participate in God's life (loc. 2304). It is closely connected with that holy freedom in which we acquire the proper perspective in relation to our own person, regarding ourselves no longer with our own eyes, but in the light of God. (loc. 2557)

The correct perspective is, therefore, the first step to recognize our internal state, even though it implies recognizing psychic pain. Pride produces a distortion of the knowledge about oneself, which leads to a fiction and an eagerness to project on others, and brings about a defensive attitude. This traps us in our own vision, far from the light of God. Humility, however, allows us to assume our reality without trying to defend ourselves. This kind of self-surrender is not an isolated or individual attitude, but a profound communicative relation in which we enter into God's wisdom and charity. Under His vision we start to perceive signs of possible resolution and we appreciate feelings of hope. It is the acceptance of God's love in our real and concrete life.

Once we are able to assume and embrace our psychic and moral state with its limitations and all kind of privations, the real transformation is possible. This is the reason why humility is recognized as the precondition for change. In secular psychotherapies, however, they do not refer to this state of inner acceptance as humility; they make implicit reference to it. For instance, radical acceptance is an essential component in dialectical behavioural therapy and it entails accepting experiences, beliefs and perceptions without offering judgments or believing that things should be different from what they are (Dimeff & Linehan, 2001).

After patients assume and embrace their own limitations they have to prepare to manage certain emotions and impulses, to take initiatives, to choose among different options. Every action will offer an opportunity for the development of cardinal virtues. At the same time, virtuous actions will have a strengthening impact in their inner order. However, it is necessary to display some level of competency in the virtues across our emotions, relationships, reasoning and will in order to move away from egocentricity. This competency could be developed in a therapeutic relationship. Although most personality disorders suffer psychologically from a restriction in their ability to choose freely, psychotherapy would offer the development of dispositions that would help to discern good and to choose effectively. According to Titus (2009) in this process:

The volitional factor is manifested in the intuitive and discursive motivational capacities that human beings need in order to intend, consent and to choose the good, which constitute human freedom and flourishing, especially the good of self-giving, which constitutes the natural virtue of love. (p. 61)

The gift of the self, then, is diametrically opposed to egocentricity and entails psychological and ethical transformation as actions are chosen for reasons that

transcend self-protections. In the act of self-giving, divine grace re-establishes a Christ-like order in the person, implying a divine gift in which human participation is vital. His grace is the common root for two distinct but simultaneous effects: “the enlightenment of the mind and the enkindling of the affections” (Titus, 2002, p. 270).

To this double action we add a progressing intention of union with the Divine, which converts this union in an ever incrementing and strengthening possibility. By contrast, egocentricity is the attitude of closing up against divine action or others. This closing is subsidiary to different degrees, and leads to a progressive state of immersion in oneself. The person remains conditioned by their own experience of limitation against which they have given in to, blocking the positive response to divine action.

Self-giving, then, in opposition to egocentricity, re-contextualizes and potentiates all human domains:

- If egocentricity causes an impoverishment of emotional life, self-giving develops a soft, flexible and eminently deep emotional accompanied of pleasure in practicing virtue.
- Egocentricity provokes rigid schemas of life which are not open to corrections and modification through experience. However, false cognitions are dispelled in self-giving because it helps discernment and judgment about oneself and others.
- If egocentricity entails defensive relationships, self-giving allows genuine intimacy.
- And finally, if egocentricity entails passive or dominant attitudes, self-giving entails a respectful attitude towards others and towards life since intrinsic values are perceived correctly.

Human faculties, commitment to others and true happiness are, then, potentiated by self-giving. Self-giving offers, therefore, a psychotherapeutic resource to personality flourishing because it allows the patient to re-contextualize reasons and reorder affective relations and desires according to an objective good.

## CONCLUSIONS

Current scientific psychology does not capture fully the inner capacity of the human being in the process of configuration of his/her personality. The realm of responsibility in this process has been discounted, denied or ignored. Consequently, an unrealistic human being moved passively by his/her biology or by external influences does not have space for participation in his/her personality development. In spite of this reality, during the last century there has been an attempt to rescue human responsibility in the process of configuration of the own personality. One fruit of this attempt has been the introduction of the concept “egocentricity” in the psychology discussion. This was an attempt to give an answer, from a psychological perspective, to one of the possible directions that a person can take in the configuration of their personality. In this case, it was a negative and depersonalizing direction.

Piaget located this tendency in childhood “egocentrism”, described as the tendency to reduce reality to the child’s own point of view. Obviously, it was determined by cognitive and affective immaturity but could not explain the same attitude in adults. It was not until the contributions of the psychologist Alfred Adler, that psychology started to open up to ethics. He implicitly opened a closed debate about the influence and interaction of ethics and psychology, especially in neurosis character development. Along the same line, Karen Horney interpreted neurosis as a personality development connected with the “pride system”. Anna Terruwe highlighted the importance of fear in all this process. Rudolf Allers tried to go further by reinterpreting the neurotic development under a Catholic framework, and Igor Caruso explicitly claimed metaphysical-moral presuppositions to resolve neurosis development.

In this long itinerary of the incipient reencounter of psychology with ethics, a current psychologist, Martin Echavarría, makes a crucial contribution in the comprehension of personality disorders based on virtues study of Thomas Aquinas. He pointed out the absence of main virtues in many neurotic disorders and at the same time the presence of main vices in personality disorders, especially the vice of pride. Finally, Paul Vitz writes about the influence of egocentricity in the current humanistic model in psychology, since it has been pervaded with an egocentric (cult of the self) approach.

The first objective of this dissertation—to study the contribution of the main theories of psychologists and psychiatrists in the development of the egocentricity concept

and its relation with the configuration of neurosis—was accomplished, thus, in the first part of this dissertation (chapters one and two).

With this psychological background and under the ethics of virtue, we proposed a new approach in the study and comprehension of the main DSM-5 personality disorders. If egocentricity was applied previously by several authors for an understanding of neurosis, it would be useful to extend the egocentric rationale to the study of personality disorders and therapeutic resources. For this purpose, it was necessary to consider a model of the human personality that could capture the full range and content of human flourishing. A Catholic model derived from philosophical reasoning (including the Aristotelian-Thomistic tradition, Christian Personalism and Phenomenology) and from the sources of Christian revelation, was the basis of the approach. The definition of personality proposed by Pope Pio XII was crucial in understanding the important role of personal decisions in configuration of personality. The concept of cause was taken from the Aristotelian understanding of cause and it allowed us to consider the participation of free will in the crucial process of personality development. This analysis was facilitated by the new section III of the DSM-5, which includes an alternative model for personality disorders where “self-direction” is considered a crucial element of personality function. It is similar to the “final cause” of our model and allows the comparison to be made.

An intersectional approach to vice and disorder was taken for the analysis of every personality disorder. Vices are very similar in their structure and when comparing them with egocentricity we find many convergences. All vicious individuals have an egocentric character since they all focus primarily on the self and their position in the world. It could be admitted, then, that vices and egocentricity are two different ways of addressing the same attitude.

This similitude allowed us to analyse how egocentricity increased progressively in any personality disorders and how it coincided with the establishment of particular vices. The detailed study revealed an impressive coincidence between vices and egocentricity that calls for a mutual collaboration between psychology and ethics.

In the analysis of all personality disorders, an increase in egocentricity was shown. The avoidant personality was in the lower extreme and the psychopathic personality is at the higher extreme. In this disordered process, two kinds of inadequate emotional responses were described and they could offer a parameter of severity in personality disorders. They were the disharmony of proportion and disharmony of correspondence in the emotional domain.



The second question of this dissertation—concerning a possible progressive egocentricity (or vices) in the development of personality disorders—was answered, thus, in the second part (chapters three, four and five).

In the analysis of the contribution of the volitional domain, we found that the development of personality disorders can start mainly with a primary disordered sensitivity or with a primary disordered will. This distinction helps us to classify them from the ethical point of view. The second group (primary disordered will) would be morally more severe because the process of deliberation is less altered. It can be said, therefore, that the person is more responsible. However, a complex interaction, based on the fact that bad choices inculcate progressively a disordered disposition in the bodiliness domain without allowing an integrated view in the whole personality, occurs in the development of personality disorders. This complexity calls for an interdisciplinary approach of psychology and ethics with a theological foundation to really grasp the development of personality and the psychotherapeutic resources.

The last part of the dissertation gave a brief overview of the therapeutic effects of self-giving as an opposite attitude to egocentricity. The theological tradition of the Catholic Church offers, through the virtue of self-giving, a new therapeutic approach.

What advantages might the integration of Catholic anthropology into psychology offer? In this dissertation we have made the case that we can employ to the concepts of virtue and vice to clarify the pathological process and the recovery route. It offers a new perspective and a deeper understanding that avoid simplistic and negative conclusions that reduce humans to our biological bases or to our psychosocial tendencies. And more importantly, it offers space for the consideration of divine participation through grace in personality moulding.

Theological level offers new recovery routes because the activity of God in Christ through grace elevates nature and penetrates thorough all domains (rational, volitive and bodiliness). The relation to God or the higher spiritual level of transcendence may provide a reason to go beyond human limitations thorough the cultivation of certain virtues, especially humility and self-giving.

It is beyond the scope of this dissertation to study the transforming effect of the grace in personality moulding once personality disorders are established: my intention is simply to open this pathway for future researches.

Finally, we hope that the reflections of this dissertation on egocentricity help to establish a common vocabulary of dialogue between ethics and psychology and, more importantly, to offer important knowledge in the understanding of the complexity of personality distortion and the route of recovery. It would allow us to offer preventive, therapeutic and educational interventions needed to develop a positive moral attitude in order to move away from distortion and towards the flourishing of character.

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