

Personality Disorders with Dr. Greg Lester
Outline: February 1, 2023

- I. **Borderline Personality Disorder: Today's Most Powerful and Effective Treatment and Management**
 - A. Understanding Borderline Personality Disorder: Evolution and Current Conclusions
 1. Original Concept
 2. Adolph Stern's Revision
 3. Schmidberg's Breakthrough Understanding
 4. DSM Controversy
 5. Current Theories
 - a. Linehan's DBT
 - b. Fonagy's MBT
 - c. Kernberg's TFP
 - d. Dawson's QP
 - B. Current Diagnosis
 1. Similarity to Other Personality Disorders
 2. Uniqueness of DSM Criteria and Threshold
 3. Most Reliable Indicator
 - C. The Core Clinical Feature that Makes Borderline Unique
 - D. The Element Responsible for the Failure of Traditional Mental Health Intervention Models
 - "Nonresponsibility"
 - E. The Key to Successful Intervention
 - Interruption of the "Nonresponsibility"
 - F. Managing vs. Treating Borderline Personality Disorder
 1. The Goals of "Management"
 2. The Goals of "Treatment"
 3. How to Decide Whether to Use Management or Treatment
 - G. Management
 1. De-Mental-Health-izing
 2. The Empty Context
 3. Facilitating Specificity
 4. SET
 - H. Treatment Techniques
 - Frame, Connections, Observations, Problem-Solving
- II. **How to Help Someone Deal with a Personality Disordered Person**

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- A. What to Keep in Mind When Helping Someone Deal with a Personality Disordered Person
 - 1. The Issue of “Pattern”
 - 2. The Issue of “Enduring” and “Pervasive”
 - 3. The “Genuineness” of Their Experience and Behavior
 - 4. Common Mistaken Ideas about “Why” They are the Way They Are
 - 5. Genetics

- B. Understanding What the Personality Disorder Does to the Person You’re Helping
 - 1. Perpetuates Problems and Creates New Ones
 - 2. Fails to Solve Problems
 - 3. Creates Negative Reciprocity
 - 4. Excessive Internal Arousal
 - 5. Coercive and Punishing Responses
 - 6. Misbehaviors

- C. How to Help, Step 1: Explaining
 - 1. Nonpejorative Explaining
 - 2. The Issue of “Excess” and “Deficiency”
 - 3. Emphasis on “Lack of Observing Ego”

- D. How to Help, Step 2: Identifying
 - 1. “Hooks”
 - 2. Vulnerabilities
 - 3. Pervious Failed Attempts

- E. How to Help, Step 3: Teaching
 - 1. Unwitting Inflammation
 - 2. Intermittent Reinforcement
 - 3. Interrupts
 - 4. Negative Reciprocity
 - 5. SET for Confrontation
 - 6. Motive vs. Methods
 - 7. Pattern vs. Person
 - 8. Problem Solving
 - 9. Internal Arousal
 - 10. Grieving
 - 11. Living Without

III. Managing Personality Disorders in Non-Psychiatric Settings

- A. Clarity of What You're Up Against
 - 1. Genetics
 - 2. Patterns
 - 3. Insufficiency of Resources for Living
 - 4. Excess and Deficiencies
 - 5. Dramas
 - 6. Problem-Solving Deficits

- B. Understanding the Difference Between "Management" and "Treatment"
 - 1. The Goals of Treatment, and What is Necessary to Perform It
 - 2. The Goals of Management

- C. The Three Keys to Managing Personality Disorders in Non-Psychiatric Setting
 - 1. The Issue of Internal Arousal
 - 2. The Issue of Drama Sidetracks
 - 3. The Issue of Problem-Solving

- D. Techniques for Managing Personality Disorders in Non-Psychiatric Settings
 - 1. Reframing/Talking Into Listening
 - 2. Getting Them to Handle Other People Appropriately (Person Reframing)
 - 3. Referencing Fear
 - 4. Running Out of Steam
 - 5. Pattern Interrupts
 - 6. SET for Confrontation vs. Combativeness
 - 7. Avoiding Triggers
 - 8. Making the Covert Overt
 - 9. Behavioral vs. Conceptual Language
 - 10. The Trap of Reasons
 - 11. "It Shouldn't Be"
 - 12. Problem-Solving