Phone 503-823-0823 Fax 503-823-0289 Planning and Support Division

Portland Police Bureau's Crisis Intervention Team

www.portlandpolicebureau.com

July/August 2004

Upcoming Refresher Courses

In the next few months, Chief Foxworth wants to explore offering refresher classes for CIT officers to stay up-to-date with the latest information. Once the schedule is confirmed, the date, times and locations will be shared with CIT officers and the precincts.

The classes would be held during the regular work week. If you are interested in attending a refresher class or have ideas on topics to be discussed, please contact Officer Paul Ware at 503-988-6413 or email through GroupWise. Any future in service training will be determined at a later date.

Newsletter Feedback

Over the past few years readers have seen articles on outstanding CIT work, policy and legislative changes, CIT statistics, types of mental illness, procedural updates and reviews, and much more. We are looking for new and fresh ideas for the newsletter and it's important to know what interests you.

What do you want to see in the upcoming issues of the CIT newsletter? This newsletter should be a resource, keeping CIT officers informed and connected.

Would you like to see:

- articles on skill development
- training opportunity listings
- case studies good work CIT officers are doing in the field
- information about CIT partners
- articles detailing available resources
- CIT officer profiles
- anything else you would like to add

If you have ideas for future articles or have an interest in submitting an article, please contact, by email or phone, Officer Paul Ware (503-988-6413)

or Kelly Ball (503-823-0286), both can be found in the GroupWise email address book.

Personality Disorders

The following article is a summary from a workshop titled "Introduction to Personality Disorders", which was presented by Robert Spencer to the Baltimore County Police Department:

Introduction to Personality Disorders

Personality and personality disorders develop due to many factors. Influences include biological factors, childhood experiences, and how the person copes with his or her environment.

Some personality disorders are more severe than others are. Similarly, some personality disorders are more treatable than others. Long term psychotherapy (talk therapy) is generally the treatment of choice.

Often, the treatments offered to individuals with personality disorders are resisted by the individual. Before entering therapy, these individuals had spent years developing their personality styles. Facing the prospect of permanent personality change, for this individual, can often seem strange or even terrifying. For this reason, treatment appointments are "forgotten," medications are "lost," and the suggestions from the therapists are dismissed.

Types of Personality Disorders

Avoidant Personality Disorder

These individuals tend to be shy and fear rejection; they may view themselves as inadequate. Most are only comfortable with a small circle of people, often consisting mostly of first-degree relatives.

Schizoid Personality Disorder

Most of these individuals are interpersonally detached. They display a restricted range of emotional expression. Most will choose to do solitary activities in their free time.

Dependant Personality Disorder

They may cling to people whom they hope will care for them. Many feel unable to care for themselves without constant support from others. They often portray themselves as inept in order to obtain support from others.

Histrionic Personality Disorder

Many have an unrelenting need to be the center of attention. They tend to make use of excessive emotional displays and outrageous style of dress to attract attention. These individuals are often overly sexually provocative and seductive. Emotions expressed by people with histrionic personality disorder are often times shallow and subject to rapid change.

Passive-Aggressive Personality Disorder

Many are perpetually malcontented, argumentative and irritable. These individuals express envy incessantly, complain of personal misfortune, and feel unappreciated. Attempts they make to feel better usually include passive-aggressive maneuvers and other covert (sneaky) tactics.

Borderline Personality Disorder

This disorder can be conceptualized as extreme versions of the Histrionic, Dependant, and/or Passive-Aggressive personal disorders. They are on-guard against abandonment from close relation (whether the abandonment is real or simply Unstable sense of identity, chronic imagined). sense of emptiness, and bursts of extreme rage are common. These individuals may resort to extreme and manipulative behaviors during stress. behaviors include suicide attempts, tantrums, self-mutilating, and paranoid thinking. Rapidly shifting moods and frequent suicidal behaviors are common to this disorder.

Antisocial Personality Disorder

Childhood history of rule breaking, violating the rights of others, theft, or aggression is required for the diagnosis. Some of these individuals are sadistic but many are accurately described as being manipulative, selfish, and impulsive. They have frequent contacts with law enforcement.

Narcissistic Personality Disorder

These individuals often have a sense of entitlement, self-importance, and arrogance. Many have trouble empathizing with others. They often expect recognition for their greatness even though they have not earned it through true ability or accomplishments.

Obsessive Compulsive Personality Disorder

These individuals tend to be perfectionist, dogmatic, and stubborn. Most are overly concerned with details and rules. Excessive devotion to work is common.

Paranoid Personality Disorder

This disorder can be conceptualized as an extreme personality variant of Antisocial, Narcissistic, and/or Obsessive-Compulsive personality disorders.

They are perpetually on guard against being taken advantage of, humiliated, or duped. As a defensive maneuver they tend to act in a gruff, aloof manner and avoid confiding in others for fear of disloyalty. These individuals tend to bear grudges. They may frequently come to the attention of law enforcement.

Next issue in September

Please contact Ofc. Paul Ware (503-988-6413) or the Planning and Support Division (503-823-0283) with suggestions for articles. The CIT newsletter is published six times per year by the Planning and Support Division, Portland Police Bureau Chief Derrick Foxworth and Mayor Vera Katz. Address is 1111 SW 2nd Ave., Room 1552, Portland, Oregon, 97204. FAX 503-823-0289. Web address: www.portlandpolicebureau.com.