

A Study on the Social Dis Functioning of Avoidance Personality Trait in Early Adult in Pathanamthitta District Kerela

Dr. M. Punitha¹, Ms. Chinnu Varughese²

¹Professor & Head, PG & Research Department of Social Work,
Hindusthan College of Arts & Science, Coimbatore, Tamil Nadu, India

²II MSW Student, PG & Research Department of Social Work,
Hindusthan College of Arts & Science, Coimbatore, Tamil Nadu, India

ABSTRACT

Avoidant personality trait [AVPD] is a relatively common disorder that is associated with the significant distress, impairment, and disability. It is a chronic disorder at early age of onset with lifelong impact. Yet it is under recognized and poorly studied. Little is known regarding the most effective treatment. The impetus for research in to this condition has waxed and waned, possibly due to concerns regarding its distinctiveness from other disorders, especially social anxiety disorder[SAD], schizoid personality disorder, and dependent personality disorders. The prevailing paradigm subscribes to the “severity continuum hypothesis”, in which AVPD is viewed essentially as a severe variant of SAD. However, areas of discontinuity have been described, and there is support for retaining AVPD as a distinct diagnostic category.

KEYWORDS: Avoidant Personality, Early Adult

INTRODUCTION

Avoidant personality disorder is characterized by feelings of severe social inhibition, inadequacy, and sensitivity to negative criticism and rejection. Yet the known symptoms involve more than simply being shy or socially awkward. Avoidant personality disorder causes significant problems that affect the ability to interact with others and maintain relationships in day-to-day normal life. A person who has an avoidant personality disorder is aware of being uncomfortable in social situations and often feels socially inept. Despite this self-awareness, comments by others about the shyness or nervousness in social settings may be like criticism or rejection. This is especially true if teased, even in a good natured way, about the avoidance of social situations. The occurrence of loneliness seen in adolescents as their desire to feel socially accepted and to belong becomes particularly intense during this developmental period. Loneliness is itself an

important stressor and a salient aspect of the life course tenet of linked lives because how youth perceive the quality of their relationships, that is, how their lives are linked to others, can have far reaching consequences for their mental and physical well-being.

DEFINITION

Avoidant personality:

A disorder characterized by social discomfort and avoidance of interpersonal contact. Someone who has an avoidant personality disorder avoids intimate and social contact with others. According to the DSM-5, avoidant personality disorder must be differentiated from similar personality disorders such as dependent, paranoid, schizoid, and schizotypal. But these can also occur together; this is particularly likely for AVPD and dependent personality disorder. Thus, if criteria for more than one personality disorder are met, all can be diagnosed.

How to cite this paper: Dr. M. Punitha | Ms. Chinnu Varughese "A Study on the Social Dis Functioning of Avoidance Personality Trait in Early Adult in Pathanamthitta District Kerela" Published in International Journal of Trend in Scientific Research and Development (ijtsrd), ISSN: 2456-6470, Volume-6 | Issue-4, June 2022, pp.1069-1072, URL: www.ijtsrd.com/papers/ijtsrd50276.pdf



IJTSRD50276

URL:

Copyright © 2022 by author(s) and International Journal of Trend in Scientific Research and Development Journal. This is an Open Access article distributed under the terms of the Creative Commons Attribution License (CC BY 4.0) (<http://creativecommons.org/licenses/by/4.0>)



Early adult:

The life stage is called early adult which defines individuals between the ages of 20yrs and 35yrs, who are typically vibrant, active and healthy, and are focused on friendship, romance, child bearing and careers.

REVIEW OF LITERATURE

- 1. Digman, (1990):** The Five Factor Model (FFM) of personality was derived in factor analyses of trait terms recorded in English language dictionaries. The FFM has received wide support as a consensual personality structure at the highest order of generality.
- 2. Watson, Clark, & Harkness, (1994):** The robustness of this structure has been confirmed in diverse populations, using peer ratings as well as self-report data, and it has been replicated in many languages, The five traits, often referred to as the Big Five, are Neuroticism, Extraversion, Conscientiousness, Agreeableness, and Openness.
- 3. Jylha and Isometsa (2006):** investigated the relationship of the personality dimensions of neuroticism and extraversion to the symptoms of depression and anxiety in the general population.

Finds of the study:

S. No	PERSONAL VARIABLES	FREQUENCY	RESPONDENTS	PERCENTAGE (%)
1.	Age(yrs)	17-21	50	100
2.	Gender	Male Female	25 25	50 50
3.	Designation	Student Workers	30 20	80 20
4.	Age (yrs)of respondents	17-19 19-21	35 15	70 30

Demographic profile of the respondents

From the result of the study the researcher understood that 70% respondents belonged to the age group 17-19 years category and 30% of respondents are 19-21years category. 50% of the respondents are male and 50% of respondents are female. 80% of the respondents are students and 20% of the respondents are workers.

Distributions of the respondents by have good relationship with family members

S. No	Have good relationship with family members	Respondents	Percentage%
1.	YES	38	76%
2.	NO	12	24%
	TOTAL	50	100%

INFERENCE:

Above the table shows 76% of respondents have good relationship with family members and 24% of the respondents do not have good relationship with family members.

Distribution of the respondents by based on the bad habits.

S. No	Have bad habits	Respondents	Percentage%
1.	YES	29	58%
2.	NO	21	42%
	TOTAL	50	100%

INFERENCE:

Above the table shows 58% of the respondents have bad habits and 42% of the respondents have no bad habits.

METHODOLOGY OF THE STUDY**Objectives of the Study:**

- To study the demographic profile of the respondents.
- To study the character and attitude of the respondents.
- To study academic performance level of the respondents.
- To study family relationship of the respondents.

Research design:

The researcher followed descriptive research design for the study.

Universe of the study:

The universe of the present study is contact from Pathanamthitta district. The researcher collected the data of respondents from the agency in Pathanamthitta.

Sampling:

The researcher took the sampling of 50 respondents who had Avoidant Personality trait. Non probability sampling purposive method was used.

Distribution of the respondents by based on the time that spends.

S. No	Spending time	Respondents	Percentage%
1.	Family	26	52%
2.	Friends	24	48%
	Total	50	100

INFERENCE:

Above the table shows 52% of the respondents spent most of their time with family and 48% of the respondent spent their time with friends.

Distribution of the respondents by the ever have a thought of dropping out of the studies.

S. No	Thought of dropping out studies	Respondents	Percentage%
1.	Yes	35	70%
2.	No	15	30%
	Total	50	100

INFERENCE:

Above the table shows 70% of the respondents have thought of dropping out of the studies and 30% of the respondents do not have the thought of dropping out of the studies.

SUGGESTIONS

1. To give awareness to the respondents family about the avoidance trait.
2. The family and the society want to support the respondents to move on.
3. To give responsibility to the respondents.
4. Provide them more care and security.
5. To make them aware them of we feeling.
6. To make them feel the importance of love.
7. Make them focus on reducing negative thought patterns.
8. To build social skills.
9. Make them to overcome poor self esteem.
10. Make them learn to communicate to what they are feeling and why.

CONCLUSION

The evidence reviewed above both our own work and related research supports four key conclusions about youth personality. First, youth and adult traits are similar in important ways (e.g., in their hierarchical organization and cumulative continuity). These similarities show that youth and adult traits have much in common, such that many concepts from the personality literature can be extended to childhood and adolescence. Second, youth and adult traits also differ in important ways (e.g., in their foundational level and mean-level age trends). These differences show that youth traits are not merely child-sized versions of adult traits; in addition to the aspects that they share with adult traits, youth traits also have distinctive aspects that should be studied from a developmental perspective third, youth personality traits matter. They concurrently and prospectively predict a variety of important biological, social, and health outcomes. Finally, much work remains to be done. Recent studies have only begun to demonstrate the potential of youth personality research. Future

work will particularly benefit from collaboration across personality, developmental, clinical, social, and other areas of psychology. We encourage and look forward to it.

Reference

- [1] Cramer V, Torgersen S, Kringlen E. Personality disorders and quality of life. A population study. *Compr Psychiatry*. 2006; 47(3): 178-84.
- [2] Ullrich S, Farrington DP, Coid JW. Dimensions of DSM-IV personality disorders and life-success. *J Pers Disord*. 2007; 21(6): 657-63.
- [3] Olsson I, Dahl AA. Avoidant personality problems their association with somatic and mental health, lifestyle, and social network. A community-based study. *Compr Psychiatry*. 2012; 53(6): 813-21.
- [4] Crawford TN, Cohen P, Johnson JG, Kasen S, First MB, Gordon K et al. Self-reported personality disorder in the children in the community sample: convergent and prospective validity in late adolescence and adulthood. *J Pers Disord*. 2005; 19(1): 30-52.
- [5] Grant BF, Hasin DS, Stinson FS, Dawson DA, Chou SP, Ruan WJ et al. Prevalence, correlates, and disability of personality disorders in the United States: results from the national epidemiologic survey on alcohol and related conditions. *J Clin Psychiatry*. 2004; 65(7): 948-58.
- [6] Torgersen S. The nature (and nurture) of personality disorders. *Scand J Psychol*. 2009; 50(6): 624-32.
- [7] Zimmerman M, Rothschild L, Chelminski I. The prevalence of DSM-IV personality

- disorders in psychiatric outpatients. *Am J Psychiatry*. 2005; 162(10): 1911-8.
- [8] American Psychiatric Association. *Diagnostic and statistical manual of mental disorders*. 5 ed. Washington, DC: Author; 2013.
- [9] Cox BJ, Pagura J, Stein MB, Sareen J. The relationship between generalized social phobia and avoidant personality disorder in a national mental health survey. *Depress Anxiety*. 2009; 26(4): 354-62.
- [10] Hofmann SG, Newman MG, Ehlers A, Roth WT. Psychophysiological differences between subgroups of social phobia. *J Abnorm Psychol*. 1995; 104(1): 224-31.
- [11] Herbert JD, Hope DA, Bellack AS. Validity of the distinction between generalized social phobia and avoidant personality disorder. *J Abnorm Psychol*. 1992; 101(2): 332-9.
- [12] Friborg O, Martinussen M, Kaiser S, Overgard KT, Rosenvinge JH. Comorbidity of personality disorders in anxiety disorders: a meta-analysis of 30 years of research. *J Affect Disord*. 2013; 145(2): 143-55.
- [13] Alden LE, Lapsa JM, Taylor CT, Ryder AG. Avoidant personality disorder: current status and future directions. *J Pers Disord*. 2002; 16(1): 1-29.
- [14] Bogels SM, Alden L, Beidel DC, Clark LA, Pine DS, Stein MB et al. Social anxiety disorder: questions and answers for the DSM-V. *Depress Anxiety*. 2010; 27(2): 168-89.
- [15] Reich J. Chapter 2 - Avoidant Personality Disorder and its Relationship to Social Anxiety Disorder. In: Hofmann SG, DiBartolo PM, editors. *Social Anxiety (Third Edition)*. San Diego: Academic Press; 2014. p. 27-44.

