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Awareness of the Selected Teachers in Bohol and Siquijor Philippines on the Different Personality Disorders

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Abstract: Personality disorders are group of mental health conditions in which a person has a long-term pattern of behaviors, rigid, unhealthy pattern of thinking, emotions, and thoughts that is very different from his or her culture's expectations. This study determined and compared the awareness on the different personality disorders of the chosen teachers in schools of Bohol and Siquijor Philippines. This was conducted last February 2014 and employed a descriptive research design with 27 teachers as respondents. A questionnaire was used in paper-and-pencil instruments in which respondent completes. Results were analyzed and compared using Kruskal-Wallis One-way Analysis of Variance was employed and compared further with Kolmogorov-Smirnov Two Sample Test among groups, and the significance level was set at $p < 0.05$. The results showed, on the awareness of the different personality disorders that 44% for narcissistic personality disorder, 41% for paranoid personality disorder, 33% for obsessive-compulsive personality disorder, 30% for schizoid personality disorder, 30% for schizotypal personality disorder, 30% for avoidant personality disorder, 26% for histrionic personality disorder, and 19% for antisocial personality disorder. Further, no significant differences ($p > 0.984$) among personality disorders.

Keywords: Awareness, Personality disorders, Psychology, Schools and Teachers

1. INTRODUCTION

A person with a personality disorder has trouble perceiving and relating to situations and to people and interfere and cause trouble perceiving and relating with the person's ability to function effectively in relationships, and especially work settings. This causes significant problems and limitations in relationships, social encounters, work and school (A.D.A.M. Medical Encyclopedia, 2012; MayoClinic.org, 2014).

Up-to-date the causes of personality disorders are still unknown. According to studies, genetics and environmental factors are the main contributors to this condition. Some experts believe that events occurring in early childhood exert a powerful influence upon behavior later in life. There are many formally identified disorders. Mental health professionals categorize these disorders into the following clusters: Cluster A with odd or eccentric behavior include the Schizoid personality disorder, Paranoid personality disorder, and Schizotypal personality disorder; Cluster B with dramatic, emotional or erratic behavior include the Antisocial personality disorder, Borderline personality disorder, Histrionic personality disorder, and Narcissistic personality disorder; and Cluster C with anxious fearful behavior which include the following Avoidant personality disorder, Dependent personality disorder, and

Obsessive-compulsive personality disorder (Tulio, 2008 and A.D.A.M. Medical Encyclopedia, 2012). Personality disorders are rigid and pervasive in many situations. This is due in large part to the fact that such behavior may be ego-syntonic and with this to be appropriate by that individual can result in maladaptive coping skills, and lead to personal problems that induce extreme anxiety, distress or depression (Kernberg, 1984).

This study aimed to determine the awareness on the different personality disorders of the chosen teacher in schools of Bohol and Siquijor Philippines. Specifically: it determines and compares the awareness on the different personality disorders based on their age-group and on field of expertise.

The significance of knowing the awareness of the personality disorders among the selected teachers is very important as it would offer an early detection of the problem and with an early possibility of intervention. Untreated, personality disorders can cause significant problems in someone's life that may get worse without treatment.

The result of the study is not conclusive since it did not employ clinical diagnosis and assisted by an expert on the field of psychiatry.

2. MATERIALS AND METHODS

2.1 Research Design and Locale of the Study

This study employed a descriptive research design. Survey and questionnaire type method in gathering data were employed. The participants (teachers) answered the questionnaires administered to them. It was written clearly and easy to comprehend. This study was conducted in chosen schools in Bohol and Siquijor Philippines last February 2014.

Bohol is a first income class island province of the Philippines located in the Central Visayas region, consisting of the island itself and 75 minor surrounding islands. Its capital is Tagbilaran City. With a land area of 4,117.26 square kilometres (1,589.68 sq mi) and a coastline, 261 kilometres (162 mi) long (PSGC Interactive, 2013). While Siquijor is third smallest and island province in the country Philippines located in the Central Visayas region. Its capital is the municipality also named Siquijor. On the northwest of Siquijor are Cebu and Negros, to the northeast is Bohol and to the south, across the Bohol Sea, is the island of Mindanao (NSO, 2010, and PSGC Interactive, 2013).

2.4 Instrumentation and Data Collection

A questionnaire was used in paper-and-pencil instruments in which the respondent completes

with an open-ended questions and written clearly and easy to comprehend the items. The list of questions and description were adapted for Trochim, 2006; Jackson, 2009; and Hale, (n.d.) (Trochim, 2006; Jackson, 2009; and Hale, 2012).

2.5 Data Analysis

In determining the perceived awareness among respondents, a percentage computation was employed. For comparison Kruskal-Wallis One-way Analysis of Variance was employed and compared, further with Kolmogorov-Smirnov Two Sample Test was used among groups. The significance level was set at $p < 0.05$.

3. RESULTS, DISCUSSION AND CONCLUSION

The results showed Fig 1.1 among the teacher in chosen schools in Bohol and Siquijor Philippines on their awareness on the different personality disorders, 44% for narcissistic personality disorder, 41% for paranoid personality disorder, 33% for obsessive-compulsive personality disorder, 30% for schizoid personality disorder, 30% for schizotypal personality disorder, 30% for avoidant paranoid personality disorder, 26% for hitorionic personality disorder, and 19% for antisocial personality disorder. Further, no significant differences ($p = 0.984$) among personality disorders.

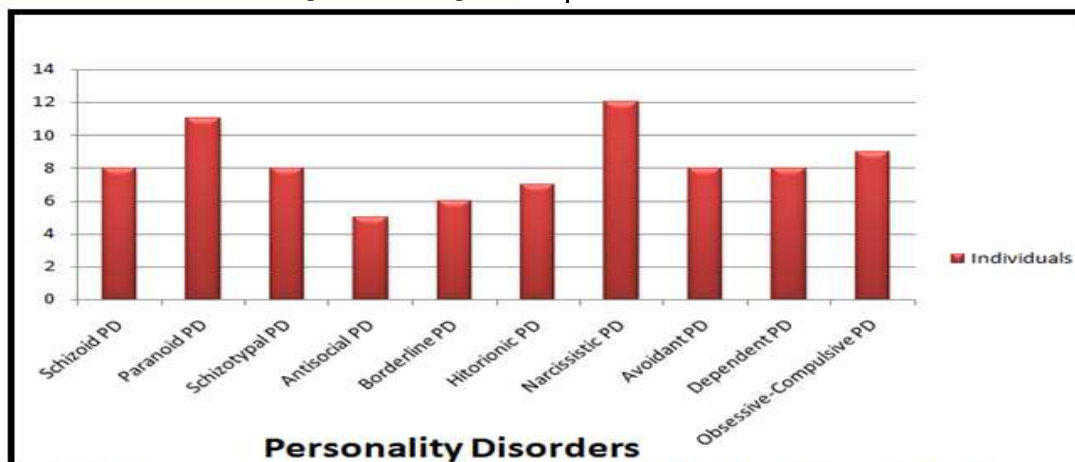


Fig 1.1 Awareness On The Different Personality Disorders Of The Selected Teachers In Chosen Schools Bohol And Siquijor Philippines

Age Groups

A total of three (3) age groups of teacher respondents identified and classified in this study as shown in Table 1.1.

The awareness of the age groups 20-29 years old with two individuals of the different personality disorders, showed that 100% narcissistic, 50% paranoid, and 50% obsessive-compulsive personality disorders. Results showed that there was significant difference against 40-49 years old ($p = 0.006$) and 50-61 years old ($p = 0.00$) on their awareness on the different personality disorders.

Age groups 30-39 years old with 7 individuals revealed where 43% paranoid; 29% schizotypal;

29% narcissistic; 14% obsessive-compulsive; 14% hitorionic; 14% avoidant paranoid; and 14% antisocial personality disorders. No significant difference among groups except for 50-61 years old group ($p = 0.00$).

For age groups 40-49 years old with 8 individuals, where 44% narcissistic; 33% avoidant; 22% obsessive-compulsive; 22% histrionic; 22% dependent; 22% borderline; and 11% for schizotypal, schizoid, paranoid, and antisocial personality disorders. There was different from 20-29 years old ($p = 0.006$) 50-61 years old ($p = 0.001$) age group

Age groups 50-61 years old with 10 individuals, where 70% schizoid; 60% paranoid; 60% dependent; 50% schizotypal; 50% obsessive-compulsive and hitorionic; 40% narcissistic, borderline, and avoidant; and 30% antisocial personality disorders. There was significantly difference among age groups, 20-29 years old (p 0.000), 30-39 years old (p 0.000), and 40-49 years old (p 0.001).

The results showed further that the age groups 50-61 years old having the highest level of awareness based. This affirms the findings of Gawker.com, (n.d.) and Philg, (2009), which states that the older one gets, the more one values the accumulated skills, **knowledge**, and wisdom. This explains on the high percentage of personality disorders based on their awareness.

Table 1.1 Awareness On The Different Personality Disorders Of The Selected Teachers Of Chosen Schools In Bohol And Siquijor Philippines for Groupings Based On Age Group

Groupings based on Age group		20-29 yrs old		30-39 yrs old		40-49 yrs old		50-61 yrs old	
		Total	%	Total	%	Total	%	Total	%
Cluster A	Schizoid PD	0	0%	0	0%	1	7	7	70%
	Paranoid PD	1	50%	3	43%	1	6	6	60%
	Schizotypal PD	0	0%	2	29%	1	5	5	50%
Cluster B	Antisocial PD	0	0%	1	14%	1	3	3	30%
	Borderline PD	0	0%	0	0%	2	4	4	40%
	Hitorionic PD	0	0%	1	14%	2	5	5	50%
	Narcissistic PD	2	100%	2	29%	4	4	4	40%
Cluster C	Avoidant PD	0	0%	1	14%	3	4	4	40%
	Dependent PD	0	0%	0	0%	2	6	6	60%
	Obsessive-Compulsive PD	1	50%	1	14%	2	5	5	50%

Field of Expertise

A total of seven (7) field of expertise of teacher respondents identified in this study as shown in Table 1.2.

The awareness of the nine (9) General content teachers on the personality disorders, that 78% for narcissistic; 44% paranoid; 33% obsessive-compulsive and avoidant; 22% schizotypal, and dependent; 20% schizoid; and 11% for hitorionic, borderline and antisocial personality disorders. There was significantly difference from Home Economics teaching content (p 0.03), Mathematics teaching content (p 0.001), and Science teaching content (p 0.03) against General content teachers.

English teaching content with four (4) individuals, where aware of the following 75% narcissistic; 50% schizotypal, obsessive-compulsive, hitorionic, dependent, borderline, and avoidant; 25% antisocial, schizoid and paranoid personality disorders. This was significantly different from Home Economics teaching content (p 0.03), Mathematics teaching content (p 0.001), and Science teaching content (p 0.03).

Home Economics teaching content with four (4) individuals, where aware of the following; 50% Hitorionic; 25% Schizoid, Schizotypal, Antisocial and Dependent personality disorders. No significant difference among teaching groups.

Social Studies teaching content with four (4) individuals, where aware of the following; 75% paranoid; 50% schizotypal; and 25% schizoid, obsessive-compulsive, narcissistic, dependent, borderline, avoidant and antisocial personality disorders. No significant difference among

teaching groups except for Mathematics teaching content (p 0.006).

Mathematics teaching content with two (2) individuals, where 50 % borderline and narcissistic personality disorders. No significant difference among teaching groups except for Filipino teaching content (p 0.03).

Science teaching content with two (2) individuals, where 100% avoidant; and 50% schizoid, paranoid, dependent and obsessive-compulsive personality disorders. There was significant difference against General content teachers (p 0.03) and English teaching content (p 0.03).

Finally, Filipino teaching content with two (2) individuals, where 100% schizoid, paranoid, hitorionic and obsessive-compulsive; and 50% schizotypal, antisocial, borderline, dependent personality disorders. No significant difference among teaching groups except for Mathematics teaching content (p 0.03).

Table 1.2 Awareness On The Different Personality Disorders Of The Selected Teachers Of Chosen Schools In Bohol And Siquijor Philippines for Groupings Based The Field Of Expertise

Groupings Based on Field of Expertise		General Content		English		Home Econ		Social Studies		Math		Science		Filipino	
		Total	%	Total	%	Total	%	Total	%	Total	%	Total	%	Total	%
Cluster A	Schizoid PD	2	22	1	25	1	25	1	25	0	0	1	50	2	100
	Paranoid PD	4	44	1	25	0	0	3	75	0	0	1	50	2	100
	Schizotypal PD	2	22	2	50	1	25	2	50	0	0	0	0	1	50
Cluster B	Antisocial PD	1	11	1	25	1	25	1	25	0	0	0	0	1	50
	Borderline PD	1	11	2	50	0	0	1	25	1	50	0	0	1	50
	Hitorionic PD	1	11	2	50	2	50	0	0	0	0	0	0	2	100
	Narcissistic PD	7	78	3	75	0	0	1	25	1	50	0	0	0	0
Cluster C	Avoidant PD	3	33	2	50	0	0	1	25	0	0	2	100	0	0
	Dependent PD	2	22	2	50	1	25	1	25	0	0	1	50	1	50
	Obsessive-Compulsive PD	3	33	2	50	0	0	1	25	0	0	1	50	2	100

The awareness, based on their field of teaching expertise showed varied results. This showed that the field of expertise does not dictate on the level of awareness and knowledge on the different personality disorder mentioned. It showed further a high level of awareness since this was already being learned back in their school days, readings, seminars, trainings, mass media and other mode of knowledge delivery that will promote awareness.

Due to unavailability of literatures that would link to any relationships on teaching field expertise on personality disorder knowledge further study is recommended on a more clinical approach. However, the level of awareness of the different personality disorders as observed study can be useful in understanding how to observe your natural impulses from an outside perspective as a teacher and by doing these observations on how to either change them or embrace them, instead of ignoring them. This study brings further awareness to the truth that there are many different types of people who require certain sensitivities given the notion that their reactions and habits (unfavorable or favorable) are sometimes beyond themselves, and the world can be a more peaceful place if everyone just knows that people have personalities.

The aforementioned results were not conclusive since it did not employ clinical diagnosis from an expert. It is only the psychiatrist who conducts one such test on a patient, and based on the answers of the patient, the psychiatrist will evaluate which category the disorder belongs to. In the recent

edition of DSM-IV lists general diagnostic criteria for a personality disorder, must be met in addition to the specific criteria for a particular named personality disorder which requires that there be an enduring pattern of psychological experience and behavior that differs prominently from cultural expectations, as shown in two or more of: cognition (i.e. perceiving and interpreting the self, other people or events); affect (i.e. the range, intensity, ability, and appropriateness of emotional response); interpersonal functioning; or impulse control; the pattern must appear inflexible and pervasive across a wide range of situations, and lead to clinically significant distress or impairment in important areas of functioning; the pattern must be stable and long-lasting, have started as early as at least adolescence or early adulthood; and he pattern must not be better accounted for as a manifestation of another mental disorder, or to the direct physiological effects of a substance (e.g. drug or medication) or a general medical condition (e.g. head trauma). In which this study were not able to meet all the required qualifications (American Psychiatric Association/DSM-IV, 2000). That is why this study was limited and should not be considered a form of diagnosis but rather an inexpert observation based on one's perceived knowledge on different personality disorders.

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