

Schizoid Personality Disorder (SPD)

How Emotional Detachment Hides the Pain Behind Substance Use



What is Schizoid Personality Disorder?

Schizoid Personality Disorder is a mental health condition marked by a persistent pattern of detachment from social relationships and a limited range of emotional expression. People with SPD typically prefer solitary activities, appear indifferent to praise or criticism, and seem emotionally distant or “cold” to those around them.

What Does it Look Like?

- > **Preference for Solitude**
They consistently choose isolation over family gatherings, social events, or one-on-one time.
- > **Emotional Flatness**
Even moments that should prompt joy, sadness, or anger get little visible reaction.
- > **Indifference to Relationships**
Little interest in close connections, even with family members desperate to reach them.
- > **Detachment from Reality**
They appear lost in their own world, disconnected from daily life and those around them.

How Does SPD Contribute to Relapse?

For someone with SPD, the inner world feels safer than connection with others, and substances become a way to manage an existence that otherwise feels empty or

- 1) **Emotional Numbness Drives Self-Medication**
SPD’s characteristic emptiness drives substance use as a way to feel something.
- 2) **Treatment Requires Engagement They Avoid**
Recovery depends on group participation and therapeutic relationships, which SPD makes feel pointless.
- 3) **Without Treating SPD, Isolation Continues**
They return to solitary patterns with no new motivation to stay connected to recovery.

Prevalence:

3.1% of U.S. adults¹

Co-Occurrence:

38% develop an alcohol use disorder in their lifetime²

Relapse Risk:

4-5x more likely to develop SUDs than the general population³

Sources: ¹ NESARC (National Epidemiologic Survey on Alcohol and Related Conditions), NIAAA. ² Grant et al., Alcohol Research & Health: NESARC data on personality disorders and alcohol use. ³ Co-Occurrence of Personality Disorders and Substance Use Disorders, PMC

Treating SPD and Chronic Relapse at Burning Tree Ranch

Clients with SPD tend to see relationships as unnecessary, which makes it impossible to benefit from a 30-day program that depends on rapid engagement with therapists and peers. They need extended time where connection develops slowly and naturally.

Our **long-term, progress-based model** allows clients with SPD to build tolerance for relationships at their own pace. Clients advance when they demonstrate **genuine engagement with others**.



“Clients with SPD can seem as if nothing is wrong because they seem calm on the surface, but that detachment is actually the disorder. Their recovery means learning to tolerate connection.”

 **Brook McKenzie, LCDC**
CEO, Burning Tree Ranch



Dual Diagnosis Treatment for SPD Co-Occurring with Addiction

When SPD and addiction occur together, treating only the substance use leads to relapse. The isolation that drove use remains. Without new ways to experience connection, familiar patterns return.

- **Treating Both Conditions Together**
Without addressing SPD, the emptiness that substances filled remains.
- **Building Tolerance for Connection**
SPD requires gradual exposure to relationships in a safe environment.
- **Providing Enough Time**
It takes more than 30 days to help someone who has avoided relationships for most of their life.

Dual Diagnosis:

The presence of **both a substance use disorder and a mental health condition** occurring together. Effective treatment for dual-diagnosis addictions must address both aspects simultaneously.



Have Other Treatment Programs Missed the Deeper Issues?

Burning Tree Ranch is the Nation's only authentic long-term treatment program for chronic relapse. Call us at (866) 287-2877 or visit us online at www.BurningTree.com.

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