

Schizotypal Personality Disorder (STPD)

When Chronic Isolation Leads to Self-Medication



What is Schizotypal Personality Disorder?

Schizotypal Personality Disorder is a mental health condition marked by intense discomfort with close relationships, unusual beliefs or perceptions, and eccentric behavior. People with STPD often feel profoundly disconnected from others and experience the world in ways that seem strange to those around them.

What Does it Look Like?

- **Odd Beliefs or Magical Thinking**
Believe they have special powers, sense the unseen, or feel events are mysteriously connected to them.
- **Unusual Perceptual Experiences**
Sensing presences, hearing their name called, or experiencing reality differently than others.
- **Extreme Social Discomfort**
Social situations feel overwhelming, and anxiety doesn't lessen over time with exposure.
- **Eccentric Appearance or Behavior**
Unusual speech, dress, or mannerisms, leaving family unsure how to connect with them.

How Does STPD Contribute to Relapse?

For someone with STPD, the world feels fundamentally strange and disconnected, and substances become a way to quiet the discomfort of never quite fitting in.

- 1) **Isolation Fuels Substance Use**
Chronic feelings of being different or misunderstood drive use as a way to escape persistent loneliness.
- 2) **Standard Treatment Programs Rely on Connection**
Recovery programs depend on therapeutic relationships and peer support that someone with STPD struggles to form.
- 3) **Without Treating STPD, Isolation Persists**
They leave treatment with the same disconnection from others, unable to build the relationships recovery requires.

Prevalence:

3.9% of U.S. adults¹

Co-Occurrence:

67.5% develop a substance use disorder in their lifetime²

Relapse Risk:

Significant

Highly elevated risk of persistent SUD at 3-year follow-up³

Sources: ¹ NESARC Wave 2, National Institute on Alcohol Abuse and Alcoholism. ² Pulay et al., Primary Care Companion J Clin Psychiatry (2009). ³ Comorbidity of Personality Disorder among SUD Patients, PMC (2018)

Long-Term Treatment for STPD and Addiction

Someone who struggles to form relationships and perceives the world differently cannot benefit from a program that depends on quick rapport with therapists and peers. They need extended time to slowly build the trust and connection that standard programs assume will happen quickly.

Our **long-term, progress-based model** allows consistent, repeated relationship-building that STPD demands. Clients advance through the program when they demonstrate genuine changes in **how they connect with others** and engage with treatment, not when a calendar says they're done.



“Short-term approaches aren’t effective for someone with STPD. These clients need time and consistency to help them feel safe enough to connect with others and question their established thought patterns.”



 **Meghan Bohlman, LPC-S, LCDC, EMDR-Trained**
Executive Clinical Director, Burning Tree Ranch

Dual Diagnosis Treatment for STPD

Without treating the underlying disconnection and unusual thinking, the isolation that drove substance use remains, and the person returns to the same profound loneliness with no new way to cope.

- **Treating Both Conditions Together**
Without addressing STPD, the social alienation that drives use remains.
- **Building Relationship Skills**
Recovery depends on connection with sponsors, peers, and community. STPD makes these relationships difficult without targeted work.
- **Providing Enough Time**
Deeply ingrained patterns of disconnection and unusual thinking take extended time to address.

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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