

Supporting someone recovering from BPD

Family, whanau and friends have found the following strategies useful:

- Recovery from BPD is a journey that can take time
- Learn what you can about the diagnosis, its treatment and what you can do to assist
- If you find yourself 'walking on eggshells' for fear of what the person with BPD might do or say, get some support for yourself
- Remember the person's distress is real – being judgmental or assuming they are 'attention-seeking' won't help; neither will giving in to every demand or taking responsibility for their lives. Get support for yourself to find the compassionate balance and limits that work for both you and the person with BPD
- Find ways to look after yourself and maintain your own wellbeing
- Remember, all of us can be 'borderline' at times of loss and grief

Get support from friends and family



Resources

The Mental Health Foundation has a comprehensive range of information on mental health and wellbeing including pamphlets, books and DVDs for purchase or loan.

Contact Us

Resource & Information Service

Phone: **09 623 4812**

Email: resource@mentalhealth.org.nz

Mental Health Foundation

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Units 109-110, Zone 23, 23 Edwin St, Mt Eden, Auckland

Phone: **09 623 4810**

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www.mentalhealth.org.nz

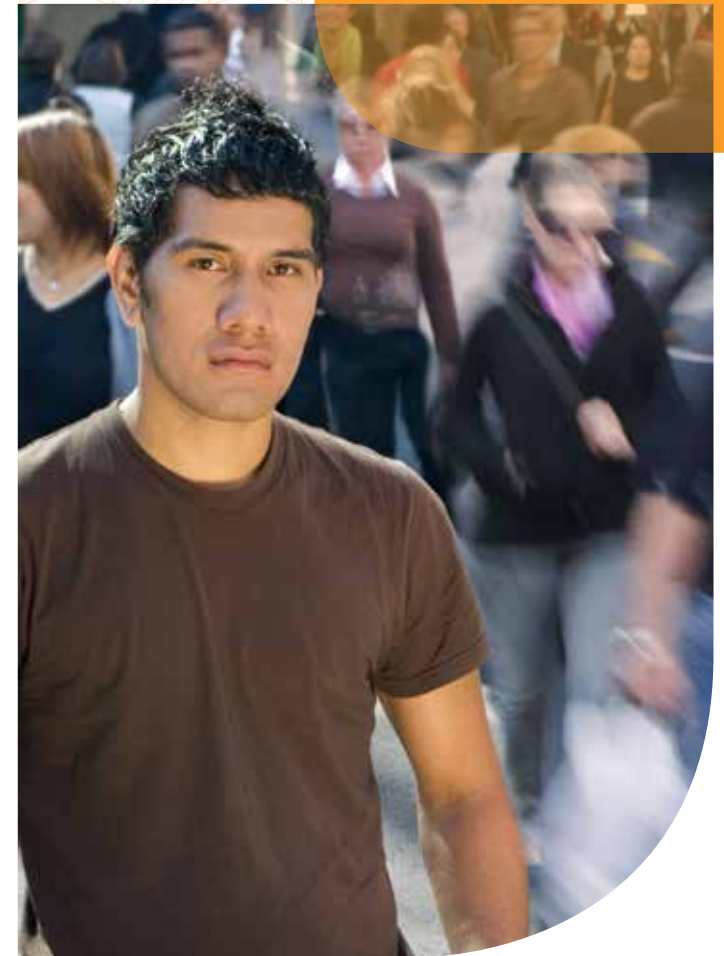
Disclaimer

This brochure should not be used in place of an accurate diagnosis or assessment. If you think you may have Borderline Personality Disorder or would like further information or support:

- Talk to your GP
- Phone your local mental health service – numbers are in the front of the phone book under 'Hospitals and Other Health Service Providers'

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Borderline Personality Disorder



What is Borderline Personality Disorder?

Borderline Personality Disorder (BPD) is diagnosed in around 2% of adults and in up to 20% of people using mental health services. It is more commonly diagnosed in women than men.

It is often assumed that borderline means 'a marginal but not full-blown disorder'. This is not accurate. People with BPD are frequently in significant emotional pain. The name comes from the fact that it was originally thought to be on the 'border' between psychosis and neurosis. We now understand that people with BPD experience difficulty managing their feelings and this impacts on their relationships and behaviour.

What are the symptoms of Borderline Personality Disorder?

People with BPD experience some or all of the following:

- frantic efforts to avoid real or imagined abandonment
- a pattern of unstable and intense interpersonal relationships
- identity disturbance, unstable sense of self
- impulsiveness (potentially self-damaging)
- intense anger, that does not fit with the situation, or difficulty controlling anger
- recurrent suicidal behaviour or self-harm
- reactive feelings and moods
- chronic feelings of emptiness
- experiencing minor problems as major crises
- 'black and white' thinking which often means switching between love and hate in personal relationships
- the use of self-destructive coping mechanisms to express anger, frustration, desperation and dismay

These symptoms impact seriously on their lives and their relationships with others. People experiencing this disorder are often blamed for their symptoms but they are not at fault.



What causes Borderline Personality Disorder?

The causes are not fully understood but factors that may be important include:

- Emotional vulnerability – the person is 'finely tuned,' emotionally sensitive and reactive. Of itself this is not a problem, but when this is combined with an environment that does not fit with this sensitivity, it can make it hard for the person to learn how to manage their feelings
- Sexual, physical and/or emotional abuse, especially in childhood and adolescence
- Emotional neglect or attachment difficulties in childhood, separation and loss
- An 'invalidating environment' where the person's feelings are denied, ridiculed, ignored or judged as "wrong"

What are the treatments for Borderline Personality Disorder?

The primary treatment for BPD is psychotherapy. Successful therapy should:

- Be well structured
- Have a clear focus, whether the targets are behavioural or interpersonal
- Provide a framework for coping with risk and suicidality
- Be well-integrated with other services
- Reduce blame or criticism of clients
- Treat clients as capable (not fragile)
- Emphasise hope and recovery

Many types of therapy may be successful, especially those that help the person find alternative ways of dealing with distress.

Medication is an adjunctive treatment, used to target specific symptoms, for example:

- Anti-depressants to reduce depressive symptoms
- Mood stabilisers to help reduce extremes of mood
- Anti-psychotics to reduce perceptual disturbance

Strategies for Recovery

People who are diagnosed with BPD have found the following strategies useful:

- Remind yourself that 'feelings aren't facts' – you might feel that you can't cope or that you're a terrible person, but that doesn't mean it's true. Learn about how feelings work and what helps reduce their intensity
- Learn about ways that you can manage distress without making it worse, i.e. without self-harming or destroying relationships with others
- Work out what a 'life worth living' would look like for you and start working on steps towards that. What would you like to be doing with your time? What sorts of relationships and friendships would you like to have? What's a small first step you can take?
- It takes time and practise to find new ways of coping that don't involve self-harming or risky behaviour. Ask yourself how long you've been 'practising' the old ways, before you give up on the chance to get used to new ways of managing your feelings
- Avoid the use of alcohol and other drugs, as these can badly affect your feelings and impulsivity
- Work on meeting your physical and spiritual needs – this helps you cope better with your emotions. For example, it is hard for anyone to manage their feelings when they're hungry, tired, sick with flu and hung over...
- Be part of developing a plan to maintain wellness, to manage emotional crises and to work on stopping risky behaviour. Health professionals involved with you can help with this
- Take an active part, as far as possible, in decisions about treatment and support. This ensures you can make informed choices about what is best for you
- Therapy takes time – try to stick with it and let your therapist know about what you're finding difficult, rather than impulsively quitting treatment
- Take medication as prescribed to make sure it has a chance to work and discuss side effects to the medication with your GP
- Get the continuing support of friends and family who know about BPD and understand what they can do to support you
- Get support and understanding from culturally appropriate support groups, organisations or advocates (trained supporters)