

Amanda Robins Psychotherapy

B P D

A Guide for Parents and Young People



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INTRODUCTION



****THIS BOOKLET IS NOT MEANT TO BE A SUBSTITUTE FOR A FULL ASSESSMENT BY A HEALTH PROFESSIONAL****

****If you are worried about your child or someone you know it is always best to get them to a face to face appointment with an experienced therapist.****

Whilst it is unusual for someone under 21 to receive a diagnosis of BPD, that doesn't mean that it can't be assessed at a younger age or that people under 21 don't have it.

It is felt that it is better not to label young people with a personality disorder before the personality is fully settled. Longitudinal studies have yet to provide evidence for the stability of the pattern for young people over time. The problem with this is that it can mean that young people aren't able to get help early on and they may miss out on the interventions that can make a difference to their trajectory into adulthood.

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KEY FACTS



1. People with BPD experience high levels of anger and distress.
2. People with BPD can find everyday situations very upsetting. Things that other people do or say can feel very hurtful.
3. BPD is a condition of the brain and mind. It is not the person's fault and they did not cause it.
4. BPD is a treatable condition and most people with BPD can recover.

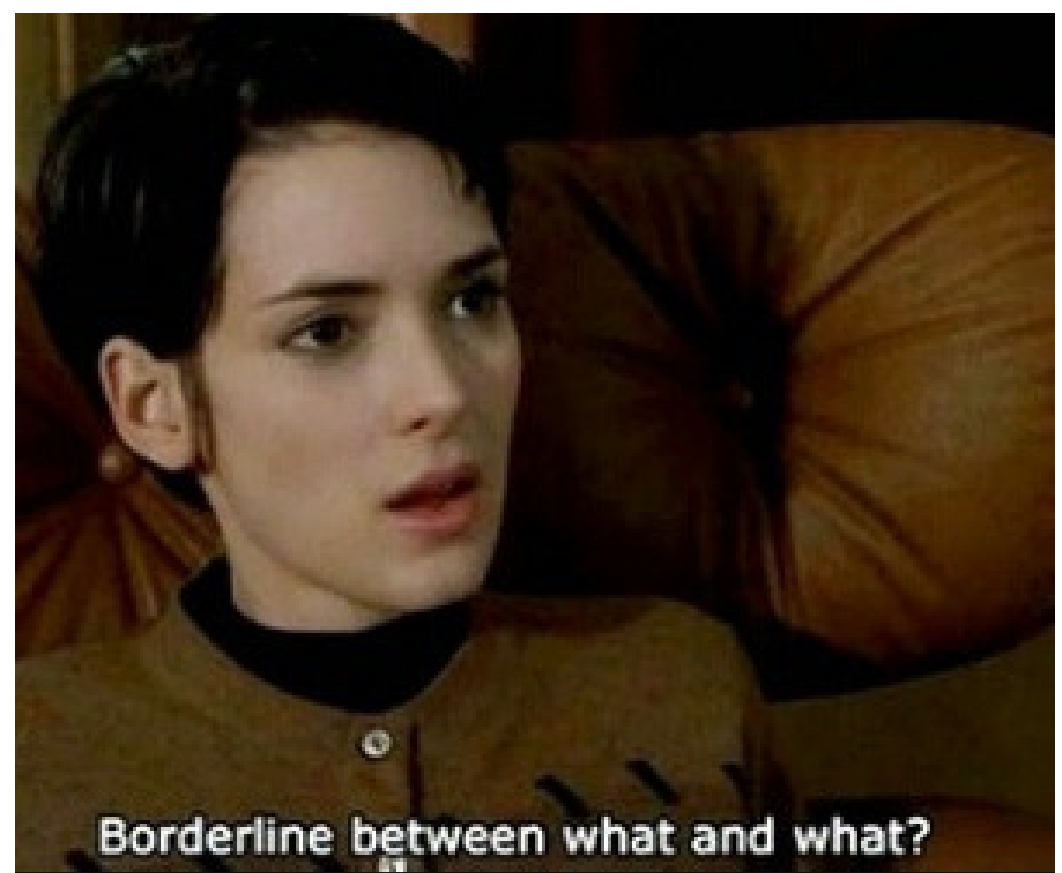
WHAT IS BORDERLINE PERSONALITY DISORDER (BPD)?

Borderline personality disorder (BPD) is a mental illness that:

- makes it hard for a person to feel comfortable in themselves
- causes problems controlling emotions and impulses
- causes problems relating to other people.
- People with BPD have high levels of distress and anger.
- They can easily take offence at things other people do or say.
People with BPD might struggle with painful thoughts and beliefs about themselves and other people.
- This can cause distress in their work life, family life and social life.

- Some people with BPD harm themselves.
- For most people with BPD, symptoms begin during their teenage years or as a young adult, then improve during adult life.
- BPD is a condition of the brain and mind.
- If someone has BPD, it is not their fault and they did not cause it.

THE BORDER BETWEEN WHAT & WHAT?



The "borderline" in Borderline Personality Disorder was originally meant to signify an illness where people were on the border between neurosis and psychosis. BPD is most commonly caused by trauma in childhood (the trauma need not be a single event nor does it need to be caused by severe abuse) and there is a strong movement to change the name Borderline Personality Disorder to "Developmental Trauma Disorder" or DTD.

Signs and Symptoms of Borderline Personality Disorder



Someone with BPD will have several of these signs or features:

1. Being prone to fear that other people might leave them. This can cause them to make frantic efforts to avoid being abandoned by other people – including in situations where other people wouldn't feel let down or wouldn't take it personally.
2. Having relationships that are unusually intense and unstable (e.g. idealising another person, then intensely disliking them).
3. Being very unsure about themselves – not really knowing who they are or what to think about themselves
4. Taking risks or acting impulsively in ways that could be harmful (e.g. not thinking before spending money, risky sexual behaviour, risky drug or alcohol use, driving recklessly or binge-eating).
5. Repeatedly harming themselves, showing suicidal behaviour, or talking and thinking about committing suicide.
6. Experiencing short-lived but intense emotional 'lows' or times of irritability or anxiety. This is usually only for a few hours at a time but sometimes this can last longer.

7. Experiencing a persistent feeling of being 'empty' inside.

8. Experiencing anger that is unusually intense and out of proportion to whatever triggered the anger and being unable to control it (e.g. having fits of temper or getting into fights).

9. When stressed, becoming highly suspicious of others or experiencing unusual feelings of being detached from their own emotions, body or surroundings.

10. When stressed, becoming highly suspicious of others or experiencing unusual feelings of being detached from their own emotions, body or surroundings. Causes of borderline personality disorder

For a person who is naturally very sensitive, life problems while growing up might be especially damaging.

These problems could include bad experiences or having another mental health condition.

It is not possible to predict who will develop BPD.



How is Borderline Personality Disorder diagnosed?



There is no test for BPD. It can only be diagnosed by a mental health professional after talking to the person and getting to know them. The diagnosis of BPD can be made if a person has several of the signs or features. There are many combinations of these features, so people with a diagnosis of BPD can seem very different from one another.

If someone has signs of BPD, their doctor or therapist will carefully ask questions about their life, experiences and symptoms before making the diagnosis. It could take more than one session to be sure of the diagnosis, because some of the symptoms of BPD are similar to the symptoms of other mental health conditions.

BPD is usually not diagnosed in children.

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Can a Person Recover From Borderline Personality Disorder?

With treatment, most people with BPD recover from their symptoms for at least some of the time. If someone recovers there's a good chance they won't develop symptoms again. Most people find that their symptoms improve within a few years after getting the diagnosis. Many people achieve a good social life and work life. Some people still have some problems with work and social life, even though their symptoms have improved.

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Could I have Borderline Personality Disorder?

What can I do?

The sooner you get help, the more chance you have of getting the correct diagnosis and getting effective treatment and help to manage your problems.

Where to get help in Australia

- Your GP (family doctor) – a GP can refer you to a public mental health service or a private psychiatrist, psychotherapist or private hospital clinic.
- headspace, Australia's National Youth Mental Health Foundation
headspace.org.au
- Your local mental health service – assessment and treatment at public mental health centres is free.

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Myths about Borderline Personality Disorder

1

There is no such thing as BPD!

FACT BPD is a pattern of behaviour and symptoms that can be recognised by trained, experienced health professionals.

2

People with a diagnosis of BPD really have post-traumatic stress disorder (PTSD)

FACT BPD and PTSD are separate conditions. They are diagnosed in different ways and have different treatments. Some people with BPD might also have PTSD, but many do not. BPD is often caused by trauma and many professionals refer to it as a form of "Complex Trauma" but it is not the same thing as PTSD as this is normally caused by a singular traumatic event. BPD is referred to as a "developmental disorder" as it develops while people are growing up.

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3

A person with BPD should not be told their diagnosis.

FACT Getting the correct diagnosis helps people to find the right treatment. Knowing they have BPD can also help someone understand their experiences.

Most people with BPD are relieved to learn that they have a recognised mental health condition.

In the past, some doctors believed it was unhelpful to tell someone they had BPD and kept the diagnosis a secret. They usually did this because they thought this would protect their patients from negative attitudes in the community and within the mental health system. Today, BPD experts believe that not telling a person with BPD their diagnosis is a form of discrimination. We now expect honest, accurate information from our health-care system, although the fact remains that there is still a lot of prejudice and stigma attached to the diagnosis.



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BPD is always due to child abuse

FACT

People can develop BPD even if they have not experienced overt abuse. Many people with BPD do report difficulties in their upbringing, which might include not feeling important to others, neglect, physical abuse or sexual abuse. But many people who have bad experiences during childhood do not develop BPD. BPD has multiple causes and temperament and genetic factors may contribute to the development of the disorder. An extremely emotionally sensitive child will be vulnerable to any signs of invalidation or emotional disconnection between themselves and a parent. In this case the problems arise due to what is more usefully described as a "bad match".



BPD cannot be treated

FACT

BPD can be treated effectively with psychotherapy and with more skills based treatments such as DBT.

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What treatments work for Borderline Personality Disorder?

Psychological treatments (talking therapies such as psychotherapy) are the best way to treat BPD. These treatments usually involve talking with a health professional one-to-one, or sometimes attending special groups.

Medication is not recommended as a person's main treatment for BPD. For someone who is already receiving psychological treatment, medication may be helpful to manage particular symptoms.

Electroconvulsive therapy (ECT) does not work for BPD.

What are the aims of treatment?

- ★ • to overcome emotional problems (such as depression, anxiety and anger)
- ★ • to find more purpose in life (e.g. by making a positive contribution to their community)
- ★ • to build better relationships
- ★ • to learn how to understand and live with yourself
- ★ • to improve physical health.

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When Should Treatment Start?

Early treatment is best for people with BPD. It is important to get a diagnosis as soon as possible, so that a health professional (e.g. your GP, psychiatrist, or psychotherapist) can arrange the right treatment.

Even if your diagnosis is not certain, you can still start treatment. Many of the psychological treatments that are effective for BPD can also be useful for other mental health conditions.

Young people, including teenagers, can have BPD and can start treatment as soon as the diagnosis is made



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Psychological Treatment

Several types of psychological treatment are effective for treating BPD.

Psychological treatment can be provided by psychiatrists, social workers and psychologists and psychotherapists. BPD treatments that are available in some parts of Australia and New Zealand include: • psychotherapy, behaviour therapy (DBT) • mentalisation-based treatment (or ‘mentalisation’) – a type of psychodynamic psychotherapy. The availability of BPD treatments differs between regions.

All the treatments have some things in common

- They are designed to solve typical problems for people with BPD and focus on helping you change.
- Some of them are highly structured – this means they are pre-planned, well-organised and have regular sessions (particular treatments such as DBT are based on a written manual that your treatment provider follows). In more open-ended treatments such as psychodynamic psychotherapy, you will have the structure of weekly ongoing sessions to support and contain you.
- The ideas behind the treatment will be explained to you and your participation in the treatment is essential.
- The relationship between you and the person providing the treatment is an important part of the treatment.

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- You will be encouraged to take control of your own life, and are involved in making plans for your treatment.
- Your treatment provider helps you understand how the things that happen to you are linked to your feelings.
- Your treatment provider doesn't just listen, but responds to your ideas and helps guide you to solve your problems.
- Your treatment provider pays attention to your emotions and accepts that your experiences and feelings are real.

One type of psychological treatment may not suit everyone. If possible, you should be given a choice between treatments that are available.

Young People & BPD

Young people with BPD symptoms should be given psychological treatments that are especially designed for their age group (if available). People aged under 25 years may benefit from treatment in specialised mental health services designed for young people. If you have another mental health condition as well as BPD, both conditions should be managed at the same time. Examples of common conditions include eating disorders, drug and alcohol problems, depression and anxiety.

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Will I Need Medication?

Medication is not recommended as a person's main treatment for BPD. Medication can make small improvements in some BPD symptoms, but does not improve BPD itself. Your doctor may prescribe medication to manage particular symptoms in the short-term. You may need medication for a short while during a crisis. Normally this medication should be stopped soon afterwards.

Working with your health care team

BPD can be treated by psychiatrists, psychotherapists and psychologists. It is sometimes also treated by GPs, nurses, social workers and occupational therapists with special training.

Specialised mental health services for people with BPD are available in some major cities. All psychiatrists, psychologists and psychotherapists should be able to diagnose and treat BPD, but some have more expertise and experience than others.

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Psychiatrists: their role in treating borderline personality disorder

Psychiatrists are medical doctors who are experts in mental health. They are specialists in diagnosing and treating people with mental health problems such as BPD. Psychiatrists have a medical degree plus extra mental health training. They have done at least 11 years of university study and medical training. Psychiatrists often lead teams of other mental health workers who can help with your treatment.

Psychotherapy for BPD

Psychotherapy is a type of longterm talk therapy that provides good results for BPD and other personality disorders.

Psychotherapy can be offered by psychiatrists, psychologists, social workers or counsellors. Different psychotherapists use different approaches and most use a mix of approaches. Some psychotherapists may use elements of DBT and you may find a psychotherapist who can work with you individually alongside your group based classes if you choose to join a program like this - and/or after you have graduated from the more structured DBT programs.

If you have BPD, finding a good therapist is vital and developing good rapport ensures you can manage the therapeutic relationship, learn to trust your therapist and withstand the stress of therapy.

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Often therapy will elicit painful feelings and these may seem overwhelming, especially when they need to be managed in between sessions. For the therapy to work, you will also need to learn to be (emotionally) dependant on your therapist, at least for a while. This can be scary, especially when your therapist isn't available all the time. Learning about limits is part of the work of therapy. Hopefully you will learn some skills to manage the stress and feelings of abandonment either through your one on one sessions or through group skills work in a DBT program. Learning to self-soothe is one of the most important steps to recovery.

Whilst it is a good idea to "shop around" for a therapist, it is also a good idea to make the effort to work through any misgivings you might have about a new therapist so that you both can have time to develop a strong relationship. Managing and exploring this relationship is part of the work of therapy and will allow the therapy to help you.

Most recovery for personality disorders takes place within the context of 1-2 years of weekly psychotherapy. It seems like a huge commitment, but real change comes only through hard work and time.

Managing and exploring the therapeutic relationship is part of the work of therapy and will allow the therapy to help you.

“ I have worked with many young people with BPD and am looking forward to joining you on your recovery journey. ”

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ABOUT THE AUTHOR



Amanda Robins MSW, PhD is a psychotherapist and is in private practice in Fitzroy, Melbourne. She specialises in self-harm, eating disorders and Borderline Personality Disorder (BPD).

Amanda's attachment-based, psychodynamic approach to psychotherapy is effective for addressing anxiety and self-harm issues in adolescents and young people. Her approach to self-harm focuses on helping young people develop greater self-awareness and to manage strong feelings, improving their ability to cope in times of stress.

[Click here to learn more about my approach to self-harm treatment and my practice Melbourne.](#)

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