All humans are social, and one of our deepest needs is to attach, or feel connected to others. In fact, we can’t survive without others. When we’re young, our most important attachments are to parents and adult caregivers. As we get older, our attachments change to include friends and peers. In adulthood, it changes to focus on romantic partners.

Because one of our deepest needs is to attach, it is natural then, that one of our deepest fears is lack of attachment, or rejection, or abandonment. For youth with borderline personality traits, these fears become overwhelming and extreme.

Youth with borderline personality traits are very emotionally sensitive. They are especially sensitive to rejection, where they can feel rejected by others, even when the other person did not intend to reject them. This can cause problems in relationships.

When things are going well, youth with borderline personality traits can be exciting and fun to be with. They can be very appreciative, and ‘idealize’ friends and loved ones. This can make friends and loved ones feel very important and valued.

But it’s a different story if things are not going well. If youth with borderline personality traits feel rejected (perhaps because of a disagreement), their feelings can change very quickly. For example:

- Feelings of happiness may suddenly shift to feeling depressed and suicidal.
- Appreciation may suddenly shift to anger and hatred of others.

Unfortunately, the fears of abandonment and rejection can be a self-fulfilling prophecy. Youth with borderline personality traits fear abandonment or rejection. This leads to negative behaviours (like excessive clinginess and jealousy) that make it so others find it hard to be with them.

Youth who have Borderline Personality traits:
- **Are very afraid of being rejected or abandoned.** Because of this, they can become very clingy in relationships. They may need a lot of reassurance, which can be hard for others to understand.
- **Have trouble regulating their emotions** (for example, controlling intense emotions and anger). It’s natural to care about our relationships. It’s important for us to get upset if we have stresses in our relationships, because this reminds us to work out the problem. For youth with borderline personality traits, their extreme emotions cause problems.

- **Can have impulsive and harmful behaviour.** Youth with borderline personality traits may turn to negative behaviours (like self-harm, or self-medicating with drugs and alcohol) to control their intense emotions. But in the long run, these negative behaviours end up causing more problems.

Youth go through many changes during the teen years. And the way they react to people and situations can change a lot too during this time. For these reasons, psychologists and psychiatrists generally don’t make a formal diagnosis of Borderline Personality Disorder (BPD) until youth are at least 18.
Borderline personality traits include:

- Intense and frequent mood swings;
- Trouble managing anger;
- Feeling alone and empty inside;
- Fears of being alone, rejected or abandoned to the point where your teen makes frantic efforts to avoid being alone, rejected or abandoned;
- Relationships that go from one extreme to the other (alternating between powerful love and hate for the same person);
- Problems from impulsive behaviour (acting before thinking);
- Repeated thoughts of suicide or self-harm behaviours (like cutting).

Families of youth with borderline personality traits may feel that they are ‘walking on eggshells’ much of the time.

There are many theories, but it’s likely caused by several things working together, like:

- **Family history.** Youth with borderline personality traits seem to be born or “hard-wired” with a very intense emotional system, or temperament. This tends to run in families. For youth with these traits, up to half of their family members will also have a very intense emotional system. Having just enough sensitivity in relationships is a good thing. But being extremely sensitive causes problems.

- **Life events.** Many youth with borderline personality traits have experienced some form of abuse or trauma.

**Other conditions**

Youth who have borderline personality traits often have other conditions, like:

- Anxiety disorders;
- Substance abuse;
- Mood disorders (like depression);
- Eating disorders, (usually binge eating or bulimia, but sometimes anorexia nervosa).

It’s important for youth to get help for these conditions as well.

(Reference: National Comorbidity Survey Replication study)

There are very few studies of borderline personality traits in youth. Two studies suggest that 1-3 out of every 100 youth under 18 may have these traits. Researchers estimate that 1-2 out of every 100 adults have Borderline Personality Disorder (BPD). Recent studies show that the number of women and men in the community with BPD are similar. More women see professionals for treatment, through.

Many parents struggle with wondering whether their teen’s behaviour is truly a problem, or part of normal adolescence. If you think your teen has a number of the borderline personality traits outlined above, have your teen assessed by a psychologist or a psychiatrist. It is better to do this as early as possible, instead of waiting for problems to get worse. Professional help can give youth the support and strategies that will help them (and their families!) to cope.
Most youth who receive appropriate treatment will benefit and show improvement. Youth who don’t get treatment are at higher risk for aggression, criminal behaviour, ongoing mental health problems, suicide, homelessness and problems in their relationships.

In adults, the symptoms of Borderline Personality Disorder (BPD) are worse in early adulthood and the young adult years. But most have more stable lives and emotions in their 30’s and 40’s. Newer, more effective therapies, like Dialectical Behaviour Therapy (DBT), outlined below, can help youth recover more quickly. With this therapy, youth learn skills to help them build a life they feel is well worth living.

**Treatment**

1. **Dialectical Behaviour Therapy (DBT)**
   
   In DBT, youth learn to accept themselves without judgment. At the same time, they learn to find ways to change problem behaviours in ways that bring them closer to their own ultimate goals. This therapy includes education for parents and family members. In DBT, youth learn many skills to help them handle their intense emotional system including:
   - Mindfulness;
   - Interpersonal effectiveness;
   - Distress tolerance;
   - Emotional regulation.

   We’ll outline these skills in more detail, below.

2. **Psychodynamic and interpersonal therapies**: It can be hard to find a therapist who is trained in DBT. But there are other types of therapy that can be helpful for youth with borderline personality traits. In practice, most therapists will use a combination of therapies depending on their training, and your teen’s situation.

3. **Medications**: There are no medications that treat borderline personality traits specifically. But medications may be helpful for anxiety or depression that is not getting better with talk therapy.

**Dialectical Behaviour Therapy (DBT) Skills**

**Mindfulness**

Youth with borderline personality traits can become “stuck” in their intense and distressing emotions, “I feel terrible; I’m such a bad person for feeling this way.”

Practicing mindfulness can help youth get “unstuck”. It can help them cope with these feelings, and give more options on how to cope, “I’m feeling terrible. Anyone would feel terrible in this situation. This is what I’m going to do about it...”

Mindfulness is one of the core strategies in DBT. It is a kind of focused awareness where youth:
- Practice being in the present moment, instead of thinking or worrying about the past or future. Focusing on the body (sights, sounds, body sensations, breathing) while letting other thoughts go, can help a lot with worries.
- Learn to look at themselves and the world in a way that helps them to accept themselves, without being critical or judgmental.
Distress Tolerance
For youth with borderline personality traits, everyday conflicts and problems can feel like life or death situations. In these situations, these youth tend to react quickly in ways that reduce their emotional distress. Unfortunately, these reactions don’t usually help to solve these problems in the long run.

With support, youth can learn to tolerate intense emotional responses without doing things that will make the situation worse.

Emotional Regulation
Emotional regulation is about:
- Working with emotions so that youth are able to use them effectively.
- Being able to keep feelings in balance and not let them become overwhelming. This allows youth to stay calm and rational, even when faced with emotionally difficult situations.

Emotional regulation includes:

- Recognizing your feelings.
  “I’m feeling upset… I’m angry that my sister didn’t say hi to me in front of the other family members.”

- Accepting your emotions.
  “It’s natural to feel upset in a situation like this.”

- Choosing how to respond appropriately.
  “I’m too upset to deal with this right now. I’m going to go to the bathroom and calm down before I do anything rash.”

- Being able to calm down if you’re too upset.
  “Maybe she’s upset with me, or just too busy with the other guests? Either way, the safest thing to do is to be nice. When things are quieter, we can talk alone and see what’s up. Even if she is pissed off now, if I’m kind and helpful, she’ll apologize later.”

Types of emotional regulation strategies that are taught in DBT:
1. Keeping a healthy ‘emotional bank account’ by doing things that make youth less susceptible to intense and negative emotions (for example, eating well and getting enough sleep).
2. Thinking about whether or not feelings “make perfect sense” for the situation at hand. If they do, youth should act on these feelings. But if the feelings aren’t justified by the facts of the situation, youth can learn how to change their feelings by adopting an opposite emotion.
Positive coping
Youth can learn many different ways to handle challenges and problems more positively.

Problem-Solving
- What’s the problem?
- What would I like to see happen (goals)?
- What are possible solutions to reach that goal?
- What are the pros and cons of each possible solution?
- Did it work? Should I try something else?

Getting social support
- Spending time with family and friends.
- Reaching out to talk with people close to you during rough times.

Grounding exercises
Connecting to the present moment. For example, “What day is it? Its Saturday. Where am I? I’m in the living room. What’s in the room? I see the couch, the coffee table, and my cup of coffee.”

Keeping busy (behavioural activation)
Being passive and obsessing about stresses doesn’t help. Keeping busy with an activity can be a really positive way to handle stress.

Relaxation exercises
- Deep breathing
- Progressive relaxation
- Mindfulness

You can support your teen by:
- Understanding that,
  - Youth with borderline personality traits experience emotions (especially anger and anxiety), differently than most people. For these youth, a conflict with a loved one can feel like a life and death situation.
  - Feeling abandoned can ‘trigger’ these youth. Reassure your teen often that you are and always will be ‘there’ for her. For example, whenever you have to leave, talk about the next time that you’ll be together (“Have a good day, and I’ll see you tonight!”).

- Trying not to take it personally if your teen has an outburst or tantrum. Understand that this is part of the condition. Be patient, and stay calm. You might say things like: “I can see you’re upset.” “What’s making you so upset?” Empathize by saying things like, “Yeah, I’d be upset if that happened to me too... That’s frustrating...” Empathy is one of the most powerful ways to support youth with borderline personality traits.

- Validating your teen’s feelings. This means recognizing the feelings, and not criticizing or ridiculing your teen for having them. You don’t have to agree with your teen’s feelings or response to a situation. You just need to show that you can see how she feels. For example, “I can see you are very worried about this”.

- Setting clear expectations with your teen about what you can and cannot do. It is important that you set limits to avoid burn out. For example, you may need to make it clear that you need a little time to yourself to recharge. Your teen might see this as rejection. Make sure that when you talk about the separation (the times when you’re away), always talk about the reunion as well. You might say, “I’m starting a yoga class on Wednesday evenings. I need to take care of myself and stay healthy, so that I can be there for you. I’ll be away from 7-9 pm. I’ll be back home by 9:30 pm to check in with you and see how your evening went. How does that sound?”
• **Arrange regular, one on one time alone with your teen.** Go for a walk, take in a movie, play a board game, bake or build something together. When you make a plan for regular ‘special time’ together with just you and your teen, you’re showing your teen that he is important to you.

• **Not giving advice unless you're asked.** All of us need to be accepted and validated, and this is especially true for youth with borderline personality traits. When you give youth advice without being asked, they get the message that you don’t accept them and want them to change. If you really feel you need to give advice, then ask for permission: “I am worried about you. Can I give you some advice?”

• **Asking youth how they would like to be supported.** You might say: “I’m here for you. How can I support you?” Your teen might respond in many ways, for example, “I just need someone to listen to me”, or “Let’s go out for a walk” or “I need a hug...” or “I need your advice...”. The key is to follow your teen’s lead. If your teen can’t tell you what support would help, then you might make a make a suggestion.

• **Keeping regular routines as much as possible** (like wake up times, mealtimes, bedtimes).

• **Supporting your teen's treatment.** Parents and family are essential to effective treatment. Help your teen get to appointments, and take part in family education and group sessions. If your teen gets upset:
  - Be there for her. If you can’t be there in person, connect by phone.
  - Let your teen know that you can see that he’s upset, “I can see you’re having a tough time. It’s hard to be upset.”
  - Stay close, but don’t try to problem solve until your teen’s had a chance to settle.
  - Once your teen has settled down, help him to ‘look for the kernel of truth’. Even though your teen’s response was intense, it was likely not completely ‘out of the blue’. There is probably an issue that needs to be worked out.

• **Remarking on improvements you notice** if your teen is taking part in treatments that have been helpful. But also remind your teen that just because things are going better, it doesn’t mean that you expect everything will go well all the time.

• **Remembering that you are not the therapist** (even if you happen to be a therapist, your role is to be a parent in this situation). Avoid trying to ‘analyze’ your teen. And if you’re asked for advice, just share some suggestions. Don’t be too forceful in telling your teen what to do.

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**Supporting a teen who self-injures**

Youth with borderline personality traits often ‘self injure’, and they often do this by cutting themselves. This can be very stressful for parents and families. The following suggestions can help you cope more positively if your teen self-injures.

• Remember that youth with borderline personality traits self-injure because they are trying to cope with intense emotional pain.

• ‘Connect before directing’. Connect by asking how your teen is feeling. You could also observe out loud that your teen must be in a lot of emotional pain and are trying to cope (“I see that you’re hurting and trying to cope”).

• If your teen responds, then express how you care, and gently offer your support in helping to find other ways to cope. If your teen is seeing a therapist, ask if the therapist has suggested things to do in times of intense emotional distress.

• While it’s ideal if youth can confide in parents or caregivers, they may not always be able to. If your teen just can’t share thoughts or feelings with you, remind him that he can call his therapist or a crisis line.

• If your teen has self-injured and needs medical attention for the injuries (like stitches for self-cutting), then bring her to your doctor, an urgent care centre or emergency department.

• Let your teen know that you care and that you will be there to help with the problem when she’s ready. When your teen is self-injuring, focus on what is causing the most immediate stress. For example, “What’s causing you to feel upset?” “What stresses are you under?” You can then help resolve some of those stresses.
Please avoid:

- Telling youth to stop self-injuring, or making them feel guilty about it. This doesn’t help, and will probably make things worse in the long run, because:
  1. Youth will feel worse, and will be less likely to turn to you or share feelings with you;
  2. If youth could stop injuring themselves, they would have done so by now.

- Saying things like, “How can you do this to me?”. Don’t take your teen’s behaviour personally, because it’s not about you.

Finding help in Ottawa

- In a crisis? Child, Youth and Family Crisis Line for Eastern Ontario, 613-260-2360 or toll-free, 1-877-377-7775
- www.eMentalHealth.ca is a bilingual directory of mental health services and resources for Ottawa, Eastern Ontario and Canada.
- Youth Services Bureau, for ages 12-20, 613-562-3004
- Family Service Centre of Ottawa, 613-725-3601, www.familyservicesottawa.org
- Jewish Family Services, 613-722-2225, www.jfsottawa.com
- The Children’s Hospital of Eastern Ontario and the Royal Ottawa Mental Health Centre (by physician referral), 613-737-7600 ext. 2496. For more information on our programs, www.cheo.on.ca
- To find a Psychologist in Ottawa: Call the Ottawa Academy of Psychology referral service, 613-235-2529. Listing many, but not all, Ottawa psychologists, www.ottawa-psychologists.org/find.htm

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- www.eMentalHealth.ca is a bilingual directory of mental health services and resources for Ottawa, Eastern Ontario and Canada.
- Renfrew County: Phoenix Centre for Children, Youth and Families, with offices in Renfrew and Pembroke. 613-735-2374 or toll-free 1-800-465-1870, www.renc.igs.net/~phoenix
- Lanark County: Open Doors for Lanark Children and Youth, with offices in Carleton Place, Smiths Falls and Perth. 613-283-8260, www.opendoors.on.ca
- Cornwall and area: Child and Youth Counselling Services (CYCS)- (Cornwall Community Hospital) provides assessment, therapy, and counseling. Services provided in English. Office in Cornwall 613-932-1558, limited outreach services in Winchester office.
- To find a Psychologist anywhere in Ontario: College of Psychologists of Ontario, 1-800-489-8388, www.cpo.on.ca
Support and advocacy groups

- PLEO (Parent’s Lifelines of Eastern Ontario), a support group for parents of children and youth with mental health difficulties, www.pleo.on.ca
- Parents for Children’s Mental Health, a province-wide organization for parents supporting children and youth with mental health issues, www.parentsforchildrensmentalhealth.org

Websites

- Behavioural Tech is the website for Marsha Linehan, founder of Dialectical Behaviour Therapy (DBT). www.behavioraltech.com/
- NEA-BPD National Education Alliance for Borderline Personality Disorder www.borderlinepersonalitydisorder.com
- Ottawa Network for Borderline Personality Disorder offers a course to help family and friends cope when someone they love has BPD. www.on-bpd.ca

Further reading

Please check out CHEO’s Kaitlin Atkinson Family Resource Library for books, videos, DVDs and resource lists for many health topics. Search online at: http://www.cheo.on.ca/en/kaitlinatkinsonfrl


References


About this Document

Written by Dr. Deanna Mercer (Ottawa Hospital); Dr. Marjorie Robb (CHEO), Dr. Michael Cheng (CHEO) and CHEO’s Mental Health Information Committee. Special acknowledgements to the Ottawa BPD Network for their comments and suggestions.

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Disclaimer: Information in this fact sheet may or may not apply to your child. Your health care provider is the best source of information about your child’s health.