CAAP Final Project Letter of Intent

The Jagged Line:

The Impact of Borderline Personality Disorder (BPD)

On the Mother-Child Relationship

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Introduction

The following letter of intent is in partial fulfillment toward the Campus Alberta Applied Psychology (CAAP) Master’s of Counselling degree, and a final project consisting of a comprehensive literature review and the development of a practitioner’s manual for those mental health professionals who provide services to mothers with Borderline Personality Disorder (BPD). This letter of intent will provide a statement of the problems to be addressed as well as the rationale for the importance of educating mental health professionals on BPD and its impact on the parenting role. References to the empirical literature will include the needs of children who are raised by mothers with BPD and will be summarized in the manual in an effort to provide information pertinent to effective treatment and parenting for the mother with BPD. Finally, the letter of intent will conclude with a description of the method and procedures that will be employed as well as the beneficial implications of this project.

Overview

Problem Statement

A report on mental illness in Canada claimed about 6% to 9% of the national population has a personality disorder (Health Canada, 2002). The National Institute of Mental Health (NIMH, 2006) reported that Borderline Personality Disorder (BPD) is the most common of the personality disorders and it affects 2% of adults, mostly young women. BPD is a severe, chronic disorder characterized by affective, impulsive, and interpersonal symptoms (Minzenberg, Poole, & Vinogradov, 2006). Research has shown the impact of BPD is devastating for the individual and has horrendous impact on the lives of loved ones (Marchetto, 2006). Children of mothers with BPD are most dramatically affected. Researchers have concluded children of mothers with
BPD are exposed to a combination of risk factors and are at greater risk of emotional, behavioral and somatic problems (Barnow, Freyberger, Grabe, Kessler, & Spitzer, 2006). The available empirical literature available on BPD reported some consistent findings on the challenges BPD parents face. For example, parents with BPD can be seen as high-risk parents likely to have attachment and relationship difficulties with their children (Newman & Stevenson, 2005). Services available to women with BPD need to effectively address the concerns through counselling, rehabilitation and support (Ackerson, 2003). Effective interventions can enhance the parenting role and directly reduce the impact of the illness on the child in her care (Craig, 2004).

The purpose of this letter of intent leading to the final project is two-fold. First, it is to identify and address the needs of women with a formal BPD diagnosis in their parenting role. Secondly, the present author will identify and address the needs of children being raised by mothers with BPD. In responding to these needs, the anticipated outcome is the development of a manual to guide mental health professionals in providing effective counselling to mothers with BPD. The compilation and distribution of the practitioner’s manual will highlight the need for program development and interagency collaboration in the provision of care to BPD mothers and their children (Marchetto, 2006).

The development of a practitioner’s manual focused on the needs of the female BPD population will hopefully increase counsellor’s competency and comfort. Effective treatment interventions may minimize the impact BPD has on the individual and her family. Particularly, the focus of the manual will address the identified symptoms of BPD in women that pose significant challenge and risk in the mother-child relationship. There is evidence supporting the presence of familial aggregation of BPD, which suggests that there is an “increase risk of 11% of BPD in first degree probands with the disorder” (Barnow et al., 2006 p. 965). Presently, there are few empirical studies of psychopathology in children of mothers with BPD (Crandell, Hobson, &
The results of the few studies have concluded that more psychiatric disorders, higher impulsivity, and a higher frequency of borderline pathology are noticed in children of mothers with BPD than comparison groups (Barnow et al., 2006). Current literature encourages women with BPD to receive effective counselling, training and support services to assist in her symptom management and rehabilitation (Newman & Stevenson, 2005). Further, as the mother with BPD becomes more insightful and competent in the management of her mental illness, the impact of the mental illness on the child will hopefully decrease (Craig, 2004). The central aim of the accompanying practitioner’s manual is to disseminate the current empirical literature on BPD, increase mental health professionals clinical knowledge, and review effective BPD treatments and interventions to assist in decreasing the intensity of symptoms experienced by mothers as well as the transmission of BPD symptomatology to their children. The practitioner’s manual will aim to be a useful tool for mental health professionals such as psychologists, counsellors, nurses, and social workers with some clinical background and experience providing care to women with BPD.

The proposed final project will explore current practice in regards to individual and group treatment strategies for women with BPD, as well as the effectiveness of interventions specifically designed to treat women with BPD and their parenting role. The practitioner’s manual will offer suggestions for treatment interventions that will include a multidisciplinary approach. The inclusion of a variety of professionals in the care team of the women diagnosed with BPD and their children will attempt to provide care that will enhance the client’s life experience and those in their care (Ackerson, 2003). The literature identifies limited agency collaboration amongst services for the adult and child affected by a mental illness (Ackerson, 2003). This limitation occurs for a number of reasons such as lack of expertise, time constraints, acuity of the diagnosed and limited funding for program development (Darlington, Feeney, &
Rixon, 2005). Moreover, the present author’s personal experience in working within the adult mental health field, feedback from colleagues, and discussion with clients has indicated inadequate attention and support by the mental health system to provide treatment and services to meet the needs of BPD mothers and their affected children.

Rationale

The purpose of the present final project is to review the existing literature on women formally diagnosed with BPD, with a particular interest in women with BPD in the mothering role. The review will also include the needs of children being raised by mother’s with BPD. The diagnostic traits associated with BPD have significant impact on interpersonal relationships (Sable, 1997). Many of these women manifest symptoms and behaviors, as outlined by the Diagnostic and Statistical Manual of Mental Disorders, Text Revision (DSM-IV-TR), include severe problems in sustaining close relationships, with extreme shifts of idealization and devaluation, over protectiveness and disengagement, self destructive behaviors, volatility, emotional lability, and identity disturbance (American Psychiatric Association, 2000). These symptoms and behaviors have a profound impact on the BPD woman’s capacity to parent (Barnow et al., 2006).

Oftentimes, BPD women believe that taking on a parenting role will improve their quality of life (Massie & Szajnberg, 2006). The significant abuse, trauma, lack of attachment and invalidation the women with BPD have experienced blurs their vision of love, commitment and care (Massie & Szajnberg, 2006). As quickly as a mother with BPD becomes pregnant and experiences her first-born, the appearance of her limited capacity for attachment, emotional empathy and interpersonal connectedness wreaks havoc on the mother-child bond (Newman & Stevenson, 2005). The disruption this brings for both mother and child is tremendously damaging and difficult to manage or address. Professionals often experience frustration, disappointment,
concern, and uncertainty when intervening. Ultimately, the greatest concern is the development and care of the infant. Due to mothers’ mental health issues, this relationship struggle can cause great pain, confusion and oftentimes results in neglect of the emotional and care needs of her baby (John-Seed & Weiss, 2005).

Unfortunately, there is a lack of literature paying attention to the issue of adults with BPD becoming mothers. The lack of attention is of great concern as mothers with BPD have common problems in the parenting role that is significant in terms of child outcome (Newman & Stevenson, 2005). Children raised by parents with a mental illness are at greater risk (32-56%) for developing a mental illness themselves (Mowbray & Oyserman, 2000). In particular, mothers with BPD have known the challenges involved in attachment and emotional empathy. As Kaufman and Zigler (as cited in Newman & Stevenson, 2005) stated, “given the high rates of abuse in this group and evidence of familial patterns of abuse across generations, mothers with BPD are likely to be overrepresented in coming to the attention of child protection services” (p. 387). Early treatment of BPD symptomatology through resources and interventions may prevent children from experiencing such abuse as well as decrease their risk of developing more severe mental disorders, including BPD (Barnow et al., 2006).

Provision of services must address the needs of adults as well as their children. According to the existing empirical literature, there is a lack of service connectedness pertaining to care for the family (Ackerson, 2003). Oftentimes, parents with mental illness are connected with adult mental health. However, the needs of other family members are often not addressed. Collaboration amongst service providers is necessary to ensure continuity and consistency of care of the individual and family. There are a number of identified challenges pertaining to interagency collaboration, the need for program development and intervention models to support families with complex needs will ease the challenges experienced by service providers and
enhance well being for families (Darlington et al., 2005). Of particular need is the interagency collaboration and support necessary to provide care to the BPD mother and her children. Women with BPD can be mentally and physically exhausting to their care provider which highlights the importance of a multi disciplinary approach to the treatment program (Clarkin & Levy, 2006).

Literature Review

The empirical literature review will focus on three areas: (a) the identification and acknowledgement of the needs of the woman diagnosed with BPD (b) the effect of parental mental illness (BPD) on children and (c) interventions and service delivery methods to meet the needs of the two identified populations. The limited literature available has presented several reasons why it is important to provide BPD mothers with information about the mental health condition and how to care for themselves and their children. Further, developing a better understanding about the characteristics and difficulties BPD mothers experience will assist care providers with interventions in an effort to improve the relationship between these mothers and their children. Early interventions may prevent the transgenerational transmission of abuse, interactional disturbance and personality dysfunction (Newman & Stevenson, 2005).

Further review of the empirical literature evidenced the empirical support that children of parents with a mental illness are at greater risk of developing symptoms of a mental illness (Levine & Ligenza, 2002). Children of mothers with BPD are at significantly greater risk of not developing secure attachments between themselves and their mother (Barnow et al., 2006). Insecure attachments can contribute to significant learning and developmental issues (Craig, 2004). Children in these circumstances will likely benefit from early identification and intervention services to promote functional and adaptive development.

The empirical literature review highlights the lack of a collaborative approach to providing care to adults with a mental illness and the children in their care. There are many
challenges identified by community service providers such as time constraints, lack of knowledge, and program mandates (Darlington et al., 2005). The need for program development to provide identification, treatment and support to BPD mothers will create a multitude of benefits for the continued mental health and development of their children (Biebel, Hinden, Mehnert, & Nicholson, 2005).

Methods and Procedures

Toward the completion of this final project, it will begin with a thorough literature review. Electronic databases that will be used for the empirical literature review are psychARTICLES, PsycINFO, Academic Search Premier, and Psychology and Behavioral Sciences Collection. Literature from 1990 to 2006 will be reviewed and terms utilized for this search will include terms such as borderline personality disorder, mental illness and parenting, mother-child attachment, and childhood trauma. There will be a specific emphasis on research and interventions involving mothers with BPD and the impact on the mother-child relationship. Specifically the research reviewed will highlight traits and characteristics symptomatic of BPD and the implications for effective parenting. Specifically, the literature review will address the identified factors that may influence a higher risk of parental BPD being transmitted to children. The literature review will pertain to specific interventions effective when providing treatment to the individual and families plagued by the diagnosis of BPD. The literature reviewed will then help refine and define the nature of the problem in order to better understand the impact of BPD on mothers, children, and the mother-child relationship. Further, consideration will be given to these two populations which are grounded in attachment theory and the interventions recommended to enhance attachment between BPD mothers and their children.

The proposed final project outlines three primary steps. First, the effects of BPD on mothers and children will be comprehensively explored. Secondly, interventions to address the
problems a mother with BPD experiences particularly in the parenting role will be reviewed. Finally, the information gathered will be synthesized into a practitioner’s manual. The practitioner’s manual will guide mental health professionals working with females formally diagnosed with BPD in the parenting role. The manual will be developed considering the needs of the mother and child with empirically based intervention recommendations and strategies. The practitioner’s manual will be promoted for use by trained mental health professionals and is intended to facilitate the clinician’s competency in the delivery of treatment interventions for BPD women. Further, the manual will identify particular linkages between symptoms of BPD and the impact on the mother-child relationship. The practitioner’s manual will assist in the implementation of empirically based strategies and interventions to assist the mother with BPD towards adaptive functioning and promotion of the development of a nurturing relationship with their children.

In short, the final product will produce a practitioner’s manual which will present problems typically encountered by women with BPD, and their children. The impact this mental illness has on the capacity to establish healthy emotional attachments and bonds with significant others will be explored within the mother-child relationship (Sable, 1997). The manual developed from this project aims to describe interventions for mothers with BPD, drawn from current empirical literature (Clarkin & Levy, 2006). In regard to mother-child relations, interventions involving those in infancy and early childhood will be drawn from therapeutic interventions that involve play, observation, and parent coaching (Barwick et al., 2000).

The final project will not contain human subject participants, and thus it is not subject to review by an ethics committee. The information gathered for the practitioner’s manual will be obtained through a comprehensive review of the research focused on the mother with BPD,
treatment interventions for mother and child as well as identification of risk of transmission and disrupted mother-child relations.

Implications

The central aim of this final project is to assist women with BPD in the parenting role. Parenting can often be a difficult transition for adults. Mothers with BPD have greater challenges adjusting and providing adequate care to their children due to issues of attachment, emotional dysregulation, and lack of emotional empathy (Gormley, 2004). The present final project will endeavor to assist mothers, their children, and practitioners towards increased awareness and understanding of BPD as it pertains to mothers and their children. Understanding the impact this disorder can have on the mother-child relationship will inspire program development and interventions that will minimize the impact of BPD.

The practitioner’s manual will be developed with a focus on the symptoms of BPD that impact the mother in the parenting role, specifically the diminished parenting capacity and the maladaptive mother-child relationship. The manual will describe empirically supported interventions related to these issues. The manual will be directed at clinicians providing care to BPD mothers and their children who receive mental health counselling services.

The specific outcomes of this project, namely the increased understanding of the needs of the parent and child impacted by BPD will be addressed by the practitioner’s manual. It is hoped that these outcomes will positively assist BPD mothers in their roles as mothers. In doing so, clinicians can then feel more confident and competent when providing care to these individuals affected by BPD.

Summary

In summary, the proposed final project will culminate in the development of a practitioner’s manual that will highlight the parenting issues experienced by BPD mothers and
their children. BPD women are extremely fragile and experience high levels of inner turmoil (Newman & Stevenson, 2005). The empirical literature supports the understanding that most women diagnosed with BPD have difficulty with interpersonal relationships and the formation of healthy attachments (Barnow et al., 2006). These realities pose significant distress in the mother–child relationship and impact the well-being of both throughout the course of a lifetime. The final project will better inform practitioners and clients on the issues of BPD and the impact this disorder can have on the mother and her children. Knowledge, information, and awareness will have remarkable influence in the service provision and healthy development of the mother-child relationship.
References


