



CYBER INTERVENTIONS IN MANAGEMENT OF BORDERLINE PERSONALITY DISORDER -BPD

Dr. Padmakali Banerjee,

Dr.Amita Puri,

Amity university, Gurgaon.

Er. Astha,

FCG, Ford Motors, Chennai.

ABSTRACT

The term borderline personality is highly evocative, suggesting someone living life on the edge. In reality, borderline personalities are characterized more by volatility than by risk. Emotional dysregulation and impulsivity are at the disorder's core. Sufferers swing from happiness to despair to fury, often in minutes, and each feeling is vastly disproportionate to its trigger. "Life is like a ship in a stormy sea without a keel," Dealing with BPD's in hospitals and clinics is itself a challenge which becomes all the more challenging with cyber consultations for family members on management of BPD's at home. However, that is the need of the hour today. The beginning of millennium saw the United states of America breaking the 50 percent mark in the Internet use, usage of personal computers and cell phone. The life styles of people got intertwined with machines and this paved way for the research on the relevance of Human Computer Interaction within the field of cyber psychology. With expansions in the field, gradually, cyber psychology will become more visible and necessary in understanding the current modern lifestyles of many people in terms of Internet Assisted Therapy (IAT). Some related topics include : online relationships, online identity, transference to computers, addiction to computers, gambling on computers, regressive behavior in cyberspace, online identity, online dating, managing online relationships – IDR (long distance relationships), online breakups ,

online support groups for various issues – physical and psychological. In the present day era of corporate life style, there is very less time for oneself, let alone time to seek consultations for psychological issues in the traditional face to face interactions and sessions.

In this paper, an attempt is made to show the efficacy of consultations via cyber psychology in enhancing the mental health of the individual. The focus area is evolving strategies in counseling consultations to stay ahead of the competition especially in the Indian context.

Keywords : cyber, psychology, transference, behavior, Human computer interaction

Introduction

To know better about this condition, Borderline disorder, lets have a look at this example first.

Thanks for the session yesterday. I know i need to be a little more strong and confident. and with time I am trying to build that. As far as materialistic things are concerned, everyone looks forward to living a comfortable life. But at present my first priority is my mental peace. I want to live a peaceful life. I know Harish talks all positive but somehow he has failed to be a good husband. Has always been very dominating and bossy. I have always felt like an employee of his rather than his wife. Why does he love me and I am not able to have the same feeling for him? Thats the question. And somewhere he knows and feels the same and has asked me many times whether I also love him or not. To which I have always lied that 'I DO'., just to sustain our relationship. He use to torture me with his these questions so much that once i Cooked up and lied to him that I had an affair before marriage so am not able to give myself fully to him at night. Because it was only during the nights when I had to give in myself to his demands that he use to feel I am not willingly doing the act. This made him develop that feeling that somewhere I don't love him.

Yesterday we didn't go for any dinner or outing together as he had a business meeting which lasted for few hours. I am not a girl who puts forth her demands. I am little shy personality. But nevertheless, if i have somehow managed to tell him something as simple as going for a movie of my choice, which no doubt he has done but again making me realise that it was a favour to me. and many times it has also happened that he has walked out of the cinema hall leaving me alone saying that 'its your choice so u watch and i am waiting outside.' Can someone explain me that in such a situation what shall I do? I also use to get up and come out

of the hall coz he use to be full of anger and then I had to control the situation by saying that yes this is a stupid movie , lets go somewhere else. And gradually I stopped my little demands also.I don't know where my life will take me but I have just one son, whom I want to remain unaffected by whatever is happening between us.

The term borderline personality is highly evocative, suggesting someone living life on the edge. In reality, borderline personalities are characterized more by volatility than by risk. Emotional dysregulation and impulsivity are at the disorder's core. Sufferers swing from happiness to despair to fury, often in minutes, and each feeling is vastly disproportionate to its trigger. "Life is like a ship in a stormy sea without a keel," says New York psychiatrist Frank Yeomans. Borderline personality disorder cuts a wide swath of destruction. Slowly, the condition is yielding to new understanding—provided patients get the correct diagnosis.

Another case:

It had been an idyllic day celebrating a cousin's wedding until Rohan's wife turned to him during the reception and said she was having a panic attack. The loud music in the room seemed to be engulfing her, heightening her anxiety. After the main course was served, Rohan and his wife got up to go for a drive and get some air. To respect his wife's privacy, Steve did not tell anyone why they were leaving, including his sister, Sunita who was seated at their table.

Minutes after the two left the wedding, as Rohan later learned, Sunita started approaching family members to claim that Steve and his wife had stormed off over something she did—and that they'd refused to tell her what she'd done wrong. She marched from table to table sharing the story, adding more drama with each telling. She ended up in the ladies' room a few minutes later, sobbing, and it took Rohan's mother, other sister, and several close friends to calm her down so she wouldn't disturb the festivities.

*While trying to help his wife through her panic attack, Rohan had stopped paying attention to his cell phone. When he next looked at the screen, he faced a torrent of messages from Sunita , each more indignant than the last. "I deserve better... what the **** is wrong with you!... I HATE YOU!... Never call me again. You're dead to me!" Steve still marvels at how quick*

Sunita Klara was to erupt in response to her perception of events. "Despite there being no argument, no unpleasant words exchanged," he says, "our absence was presumed to be a slight directed at her and her alone."

Sunita's spontaneous emotional combustion at the wedding would probably seem totally unremarkable to the 14 million adults in the U.S. who are estimated to have borderline personality disorder. They make up 2 percent of the general population but 20 percent of psychiatric inpatients. Most are women, and they typically turn the ups and downs of everyday life into a roller-coaster ride of moods. In doing so, they don't just alienate others around them, they subvert their own life trajectory. Explosively reactive, and often struggling to get a grip on themselves, borderlines have difficulty maintaining stable relationships or even holding down a job.

Courting Chaos

If interacting with a borderline is confounding, the condition is highly disruptive to borderlines themselves. During her worst flare-ups, says Kavita, her emotions became so overwhelming they gave rise to physical symptoms. **"My head would feel like it was spinning. My breathing would become shallow and my muscles tense. I would get what I describe as a flush of cold adrenaline flooding through my body. The urge was to curl up in the fetal position and cry until I was so exhausted that I wanted to sleep."**

Although BPD has long been ascribed to problematic parenting scientists now believe that the borderline personality develops out of a neurobiological flaw. Borderlines exhibit a highly reactive limbic system in conjunction with a decreased capacity for cortical control of it, reports Mayo Clinic psychiatrist Brian Palmer. Vulnerability to the disorder appears to be inherited in the form of a tempestuous temperament, although early caretaking in some way seems to activate it.

The condition may not manifest until adolescence—often with self-cutting, burning, or frank suicidal behavior—but it begins long before. "As children, they are hard to parent," says Palmer. In the absence of exceptional parenting, they never achieve self-regulation or a stable sense of self and never learn to tolerate any distress.

Hence living with a BPD becomes an ordeal in itself. And the worst sufferers become the spouse and the children especially in the Indian context.

They are quick to assume others are excluding them—and quick to react to that perceived rejection. "Say you're having dinner with a borderline person and someone else comes into the room, and you start a conversation with that other person," "The borderline is liable to think that the other person is preferred, and to feel betrayed. When the other person leaves, the borderline will say something like, 'What was so good about her?'" Paranoia, especially arising in interpersonal conflict, has been one of the diagnostic criteria for borderline disorder.

Borderlines' all-consuming fear of rejection stems from a bone-deep terror that the people they're close to will abandon them. "The fear of abandonment commonly drives borderlines to seek confirmation that they truly matter. In practice, it could mean interrupting a boyfriend during an important work meeting or showing up at his doorstep in pajamas in the middle of the night. "I feel I'm going to die if I can't contact the person," is the feeling these persons suffer from.

Their overwrought rejection sensitivity leads borderlines to assess other people and situations in all-or-nothing terms. "There's a tendency to operate in extremes—black or white, right or wrong," says psychiatrist Jerold Kreisman, author of *I Hate You—Don't Leave Me: Understanding the Borderline Personality*. Chaos and crises, in fact, bring comfort to borderlines. "They actually feel safer in chaotic environments and relationships," says San Diego psychiatrist David Reiss. "In a chaotic situation, the person knows the territory. In a calm situation, the person feels insecure, not knowing when the next shoe will drop and unprepared for what type of abuse or disruption may lie ahead."

Intense Irony

The affirmation that borderlines pursue so desperately from others turns out to be the Achilles' heel of their lives. Their interpersonal intensity—emotional outbursts, heated middle-of-the-night exchanges—often jeopardizes their most important relationships. Calling a friend at four in the morning after a fight, pleading "I have to see you right now. I have to know that things are OK between us," is seldom endearing. "Borderlines engineer the ending of the very relationships they covet" by wearing out friends and loved ones..

Intractable No More

Perhaps the most remarkable aspect of borderline personality disorder is the view that has emerged over the past decade that, despite the array and depth of deficits, it is not an intractable condition. With treatment, symptoms like suicide attempts and cutting remit. "Most patients lose some symptoms rapidly," observes McGill University psychiatrist Joel Paris.

The most specific and best-evaluated treatment for borderline personality disorder is dialectical behavior therapy. Developed by University of Washington psychologist Marsha Linehan, DBT grew out of her failed attempts to treat borderlines with traditional cognitive behavior therapy. Patients perceived its emphasis on change as totally invalidating and often dropped out of therapy. The "dialectical" in DBT reflects the paradox at its heart—communicating radical acceptance in the face of constant self-invalidation while recognizing the need for change.

The therapy aims first to diminish suicidal behavior, then to impart such basic behavioral skills as emotional regulation and distress tolerance. "The ultimate goal of treatment," Linehan has said, is "to move the client from a life in hell to one worth living, as quickly and efficiently as possible."

Efficacy of Cyber consultations

In such a scenario, family members of BPD's feel crushed and trampled after years of living in such an unstable environment with an unpredictable person. They suffer from low self esteem and depression and need counseling themselves for their own sanity. But as life is becoming more and more hectic and daily hassles of living have become numerous, it gets really difficult for such family members to get help. Sometimes its due to lack of time or even space (which a BPD family member refuses to give), So in this era of technological advancement, cyber consultations provide the next best solution for retaining the sanity of such family members who get overwhelmed and overwrought by living in such pathetic mental health conditions which living with a BPD reduces them to. Also, to stay ahead of competition, as professionals too, cyber consultations are an area with needs more exploring and passionate commitment requiring different and specific set of skill sets.

The authors have been successfully involved in doing cyber consultations and yes, the success rate of such therapy is also quite high as many researches do also suggest. (Barnow et al, 2009)

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