

When strong feelings arise while treating BPD

Assoc, Prof Jo Beatson
8th August 2022

Aims for this ECHO presentation

- To document some of the strong feelings that may arise when treating BPD
- Examine what they tell us about the person with BPD
- Examine what to do when experiencing them
- And what not to do

Common feelings when treating BPD

Feeling that you haven't done enough for the person

Hatred, anger, frustration, sense of helplessness, inadequacy, worthlessness


Anxiety re the patient's anger, rage, suicidality, hatred, criticisms, seductiveness

Guilt, shame, about negative or sexual feelings towards the patient, wishing they would leave treatment

Feeling deskilled, overwhelmed, dreading every session

Anxiety about patient's lack of progress

Sexual arousal, protective, parental feelings

- 
- **Definition: Feelings, attitudes, thoughts, towards a particular person with BPD are called the clinician's countertransference**
 - These feelings may arise because of unconscious, unresolved conflicts in the clinician's own past
 - **However, when treating someone with BPD they usually reflect the person's own feelings & are often accompanied by an urge to act on the feelings**

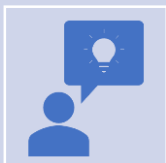


Countertransference

Research: Important Findings



Strong feelings of various kinds are experienced by all clinicians who work with people with BPD



Research has shown that similar feelings towards people with BPD are experienced by clinicians who work in entirely different modalities



The clinician's feelings are important for understanding the person at a deeper level

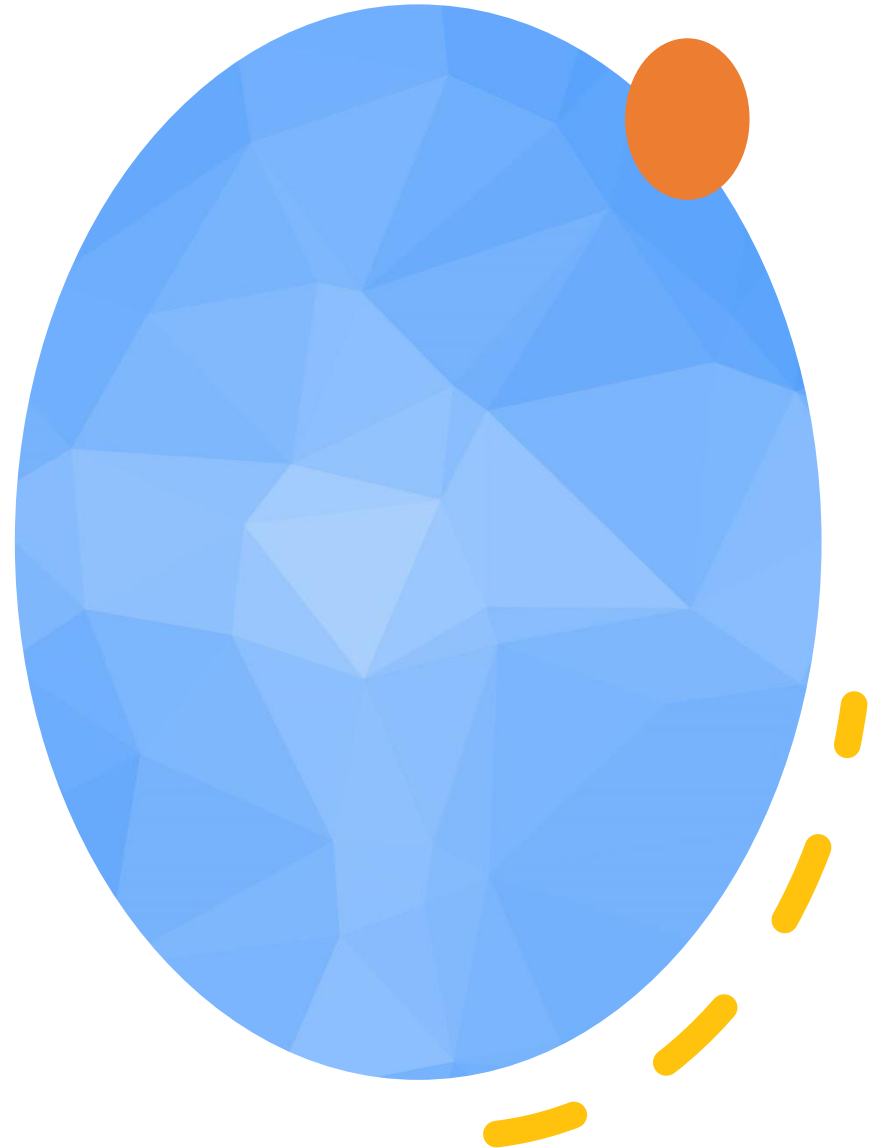
Primitive defences & BPD

Splitting and projective identification (PI) are the predominant defences in people with BPD and are the source of strong feelings in the clinician

PI is operating when the patient unconsciously projects unmanageable aspects of herself into you

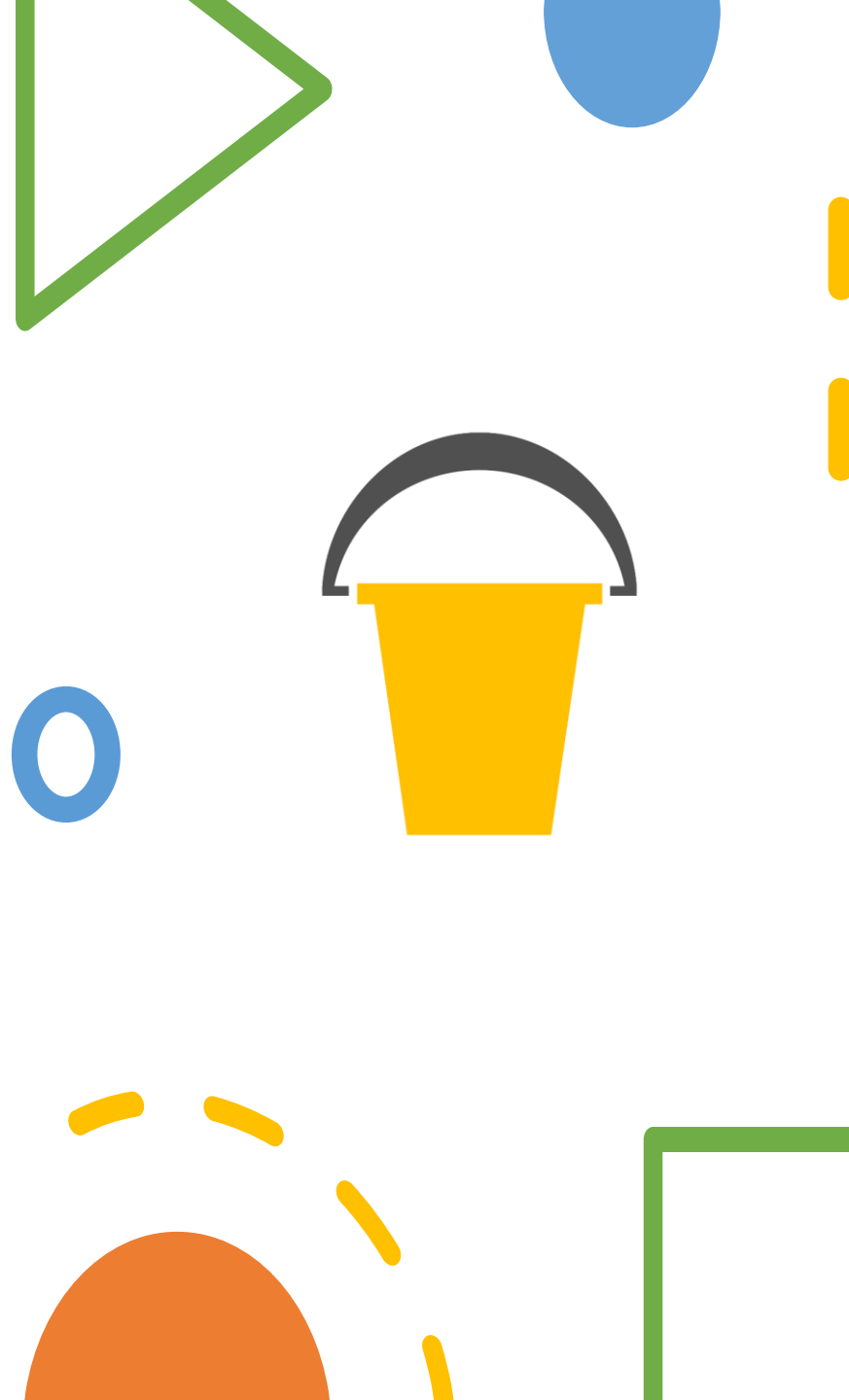
Your feelings toward the patient represent these aspects & are an important route for understanding the patient's internal world

When the feelings are experienced with intensity and accompanied by an urge to action, projective identification is almost certainly operating



What to do with these feelings

- Your role is to bear or 'contain' the feelings stirred up in you
- Containment is anything but a passive act
- The urge to action (sometimes to retaliation) can be hard to resist
- Yet if we can't contain the feelings projected into us, how can the person with BPD do so?
- They are aware (consciously or unconsciously) when we are able to contain what they have experienced as unbearable



More on handling your CT

- Faced with the person's rage/ hatred/criticism, remember what to do when facing a grizzly bear
- Don't attack and don't retreat.
- In other words, 'Don't just act, sit there'
- Be interested in what caused them to become enraged, or distressed
- If they are yelling at you, try to remain calm
- Consider asking if they can try to stop yelling because you can't think when that is happening
- If they continue to yell, suggest some deep breaths, or ask them to leave the room for a few minutes to try to calm down, then return so that together you can try to understand what has happened

If you have misunderstood something....

- **Apologize**
- **We are all human**
- **Of course we make mistakes at times or say something that offends someone with BPD**
- **Your task is to try to understand what they 'took' as your meaning**
- **Validate their distress**
- **And say that you are sorry that you caused them distress**

Glen Gabbard on Countertransference

'Although the skillful management of countertransference is only one aspect of an overall approach to BPD, it constitutes the foundation of the treatment on which all other efforts will rise or fall'



References

- Gabbard G. (1993) An overview of countertransference with borderline patients. *J Psychotherapy Practice and Research*, 2 (1)
- Gabbard G (1991) Technical approaches to transference hate in the analysis of borderline patients. *Int. J. Psycho-Anal* 72:625-637

