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## Research Article

# Parent- Child Relationship in Adolescents with Borderline Personality Disorder- A Comparative Study

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Abstract: Background- Adolescence is a crucial period in human development. During this phase a person starts maturing. The shape of one's personality gets crystallized during this phase and the environmental factor is an important contributor to this process. Individuals' immediate environment is family where parental influence evidently plays a major role in his or her development. Besides the patterns of child rearing practices, individuals' perception of relationship with their parents is worthy of research and it is a two-way procedure. Based on the premise of parental influence on adolescents the present study explored the difference between adolescents with borderline personality disorder (BPD) and normal healthy control with respect to parent-child relationship. Method and Material- Twenty subjects in each group were purposively selected for exploration. Based on certain parameters like age, gender, marital status, education and socioeconomic status of family, clinical subjects was screened by using Millon Adolescent Clinical Inventory. Those clients who met the criteria for borderline personality disorder were taken into the clinical group. The control group of healthy subjects was screened by using the Symptom Checklist 90. Following the screening procedure, the Parent-Child Relationship Scale (Rao, 1989) was administered individually. The clients responded across both domains of relationship with father and relationship with mother. Then the data were statistically analyzed by SPSS software. Result- Significant differences were found across several positive as well as negative dimensions.

**Keywords:** Adolescents, Borderline personality disorder (BPD), Parent-child relationship, Parenting.

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#### INTRODUCTION

Adolescence is often termed as an age of storm and stress since one's cognition, emotion, behaviour and conglomeration of personality functioning become crystallized in this phase. Any deviation from the normal developmental pathway may lead to psychopathology. Hence early detection and intervention for adolescents with BPD is earnestly required (Mahler *et al.*, 1975; Pine 1985).

Adolescents with such problems manifest reactive and impulsive form of aggression, self- harm, problems at school, behavioural problems, substance abuse, deviant sexual behavior, interpersonal difficulties and stress (Lavan and Johnson,2002; Serman *et al.*, 2002; Westen *et al.*, 2003; Johnson *et al.*, 2005; Daley *et al.*, 2006),often requiring emergency admission (Kasen *et al.*, 2007). For diagnosis the symptoms must be present for at least one year.

There are several genetic and environmental factors that affect adolescents' development among which parenting plays a significant role as supported by ample literature. Parenting as a broad concept incorporates different dimensions like developmental perspective, attachment style, and classification of child rearing practices, parental attitude, and child's perception of parenting.

Psychodynamic theorists, object relation theorists have proposed a stage wise way of connecting with others and development of the self. As per Kernberg's psychodynamic theory (Kernberg&Caligor,2005) children fail to integrate positive and negative images of self and others due to excessive primitive aggression either innately acquired or led by frustration. As a result children engage in black and white thinking. Another theory of Adler proposes that disturbed maternal care hinders the development of stable object constancy. Hence the real state of parent-child relationship and perception of the same are equally important in early age. According to

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Mahler's theory developmental arrest in separation – individuation phase caused by maternal resistance against autonomous activity of children are observed in pre borderline children.

Attachment theory reflects that insecure disorganized attachment style during early developmental years is the precursor of Borderline personality disorder (Bowlby, Ainsworth, 1978). Failure in mirroring a child's emotions in a positive way contributes to attribution of own emotions as the 1946: mother's own. (Klein, Kernberg. 1976).Depending on adjustment with mother's separation and responsiveness towards stranger the theories by Bowlby (1979) and Ainsworth(1978) differentiates secure and insecure attachment style with sub-classifications like preoccupied, anxious-avoidant, disorganized attachment. Several environmental factors are there like prolonged early separation, chronic insensitivity, parents' illness leading to marital conflict which might contribute to attachment with parents and later attachment with others.

One of the major factors behind constellation of attachment style is the process of how parents rear up the child. The perspective of the child rearing practice has been theorized by many researchers. Baumrind (1978) have proposed 3 types of child rearing style depending on control and responsiveness. Authoritative parenting involves both control and warmth which makes the child worthy and compliant. In authoritarian parenting rigid control with lack of attention to emotional demands make the child's self-esteem belittled and rigid. In permissive parenting, preponderance of warmth with lack of proper control makes the child undisciplined.

Parental attitude towards children is the underlying key factor of parent- child relationship, attachment as well as child rearing practices. Parental rejection yields consistent negative effects on the psychological adjustment and on the behavioral functioning of children; on the reverse side of which positive influence on the child is directly related with parental acceptance. Parental Acceptance- Rejection theory (Rohner, Khaleque, and Cournoyer; 2005) postulates that parental rejection counter-rejection cycle yields a detrimental effect on one's self- image and mental representation of interpersonal relationship. Although a child attempts to control parental rejection by showing increased positive responses, beyond an individual specific limit where such attempts are of no work, the child exhibits anger, resentment or else diminishes the emotional responsiveness. Research evidence implicates that children depend on parents for emotional warmth and responsiveness to their needs, whereas parents' bad reaction to children's disclosure, inadequate parent-child boundary may facilitate problem behaviour. Other than emotional responsiveness parental control takes part in childrearing practices. It is evidenced that democratic child rearing practice includes acceptance, involvement, demands of maturity and psychological autonomy granting. Openness regarding reasoning encourage positive individual development by contrast of which over controlling endeavour like guilt and anxiety induction along with personal attack pave the way for negative development of the youth (Steinberg, 2001; Barbar, 2002).

Innumerous factors are present behind the child rearing practice. Contextually the way back to pathogenesis of problem behaviour reveals traumatic experiences such as traumatic separation, emotional neglect, abuse, extreme lack or excess of protection from mother and low care (Paris and Frank, 1989; Guttamn and La Porte, 2000; Bandelow et al., 2005). One of the pivotal factors is Reinforcement and how is delivered by Contingency management technique.Learning by means of reinforcement is theorized as operant conditioning (Skinner, 1971). Reinforcement can be classified in several ways. Broadly reinforcement can be classified as reward and punishment. Reinforcement in turn is linked with theories of motivation- intrinsic and extrinsic one. Hence, offering reinforcement is directly related with motivation of the target person of reinforcement. The study in hand incorporates symbolic rewards which is symbolic expression of appreciation for emotional, psychological security of the child in contrast to symbolic punishment by which parents show their annoyance symbolically. The concepts of object reward implying physical, tangible, concrete action of warmth and object punishment indicating symbolic expression of temporary annoyance are embedded in currently referred theory of parent child relationship.

In the present study following ten domains of parent-child relationship are taken into consideration in order to study the behavioral relationship between parents and adolescents. This study precludes whether the relationship is Protecting or perceived to be hostile, oppressing and harmful; Loving; Symbolic Rewarding; Indifferent; Object-Rewarding. On the other hand it would explore whether the relationship involves Symbolic-Punishment; Rejecting; Object-Punishment; Demandingness; Neglect.

# METHOD AND MATERIAL

#### **Tools Used**

Millon Adolescent Clinical Inventory, (Theodore Millon, 1993)

Symptom Checklist 90, (Derogatis, 1992)

Parent- Child Relationship Scale (Nalini Rao, 1989)

#### Methods

The subjects were selected through purposive sampling method. The adolescents with BPD as well as the healthy adolescents were screened by MACI and SCL 90 scale. The inclusion criteria were- female

adolescents of 15 to 17 years of age, average level of intellectual functioning, academic attachment, unmarried, availability of both parents in a family, BPD as main diagnosis; similarity in religion, socioeconomic strata, mother tongue of both groups. Exclusion criteria were florid psychosis, significant neurological complication, presence of other significant

physical illness, any other major diagnosis other than BPD. Thereafter PCRS was administered individually.

After data collection the scores were analyzed by the Mann Whitney U Test for scores on the mothers of both groups and the fathers of both groups separately.

# RESULTS

**Table 1:** The date on Table 1 shows the Mean and Standard Deviation of rating for parents of adolescents with BPD and healthy adolescents

	Fathers'Scor e for		Mothers'Scor e for		Fathers' Score for		Mothers'	
Factors	Adolescents with BPDMean	SD	Adolescents with BPDMean	SD	Healthy Adolescents Mean	SD	Score for Healthy Adolescents	SD
Protecting	33.8500	6.33516	37.4500	7.50772	40.4500	6.17699	43.2000	4.59519
SymbolicPunishmen t	31.8000	9.39541	26.5000	6.82488	28.8500	9.25814	29.0500	8.41974
Rejecting	25.8500	8.06079	33.5500	5.93362	21.0500	6.66076	20.0000	5.89380
Object Punishment	24.0000	9.18236	24.6500	7.72061	19.4000	6.68384	18.2500	6.07735
Demanding	34.9000	7.95977	35.1000	5.93739	28.2500	8.53399	19.4000	6.68384
Indifferent	27.0500	5.89804	27.7000	4.35407	26.5500	6.09983	27.7000	4.35407
Symbolic Reward	30.4000	6.90842	30.6500	8.09987	35.2000	8.67301	34.7500	8.78321
Loving	31.3000	6.47343	36.9000	7.78595	32.4500	7.48665	39.1000	6.36520
Object Reward	25.9500	8.87026	25.6500	5.94957	31.5500	8.84650	32.4000	9.38868
Neglecting	25.0500	6.17699	25.6500	5.94957	20.1500	6.49109	21.0500	6.21098

Table 2: The data on table 2 shows the Significance of Statistical Output of the Variables on PCRS scale

Scale	Significance at .05	Significance at 0.01	Significance at .05	Significance at 0.01
	level	level	level	level
	(Father)	(Father)	(mother)	(mother)
Protecting	Significant	Not Significant	Significant	Not significant
Symbolic	Not Significant	Not Significant	Not Significant	Not Significant
Punishment				
Rejecting	Not Significant	Not Significant	Significant	Significant
Object Punishment	Not Significant	Not Significant	Significant	Not Significant
Demanding	Significant	Not Significant	Significant	Significant
Indifferent	Not Significant	Not Significant	Not Significant	Not Significant
Symbolic Reward	Significant	Not Significant	Not Significant	Not Significant
Loving	Significant	Not Significant	Significant	Significant
Object Reward	Not Significant	Not Significant	Significant	Significant
Neglecting	Significant	Significant	Not Significant	Not Significant

## **DISCUSSION**

Comparison of groups of subjects reveals significant differences across positive as well as negative dimensions of Perceived parent child relationship.

The findings indicate significant difference in offering protection by fathers and mothers of clinical and control group. As per child's perception mothers are more protecting in comparison to fathers in the context of defending attitude overtly expressed in the acts of guarding, sheltering and shielding children from situations or experiences perceived to be hostile, oppressing and harmful. With passage of time

emergence of androgyny role concept has turned paternal influence as important as maternal one during the phase of adolescence. Paternal Involvement has found to exert positive influence on adolescents' social, behavioral and psychological outcomes in healthy development (Sarkadi *et al.*, 2008). Absence of such paternal involvement might have negatively affected the adolescents' with BPD.

With respect to the dimension of 'Rejecting', mothers of BPD adolescents differ significantly from the healthy control which cites the evidence of parent's renunciation of the child in strong aversion creating impression of being disdainful and expressing strong refusal of the child. There is ample literature which

suggests that mothering signifies emotional support, interpersonal sensitivity and help (Farren and Ramseycaraig, 1977). Maternal rejection acts as a catalyst amidst impact of other etiologically important factors like trauma, abuse and others. Acceptance-Rejection theory (Rohner and Khaleque, 2002; Cournoyer;2005) postulates that parental rejection counter–rejection cycle yields a detrimental effect on one's self- image and mental representation of interpersonal relationship. Such findings and theoretical account corroborate with the current finding of higher score on perceived 'rejection' executed by mothers.

There is significant difference between the experimental and control group along the domains of 'Loving' and 'Neglect'. The score on the dimension of 'loving' has been found to be lower for both parents whereas parental neglect was found to be higher than the control group. This means that in comparison to healthy control the parents of the study group fail to exhibit fondness, devoted attachment and amiableness reflected to the adolescents with BPD. On the other hand, parents of adolescents with BPD manifest careless, inadequate treatment reflected through the habitual omission, deliberate disregard towards their offspring. Expression of love and warmth is imbedded in secure attachment style in contrast to disorganized, insecure attachment style as being evident in adolescents with BPD. Since the then time parenting has played a noteworthy role in one's developmental process. However, effect of parenting is not unidirectional but its bidirectional as cited by many research and theories. Negative behavior of parents and adolescents propels worsening of parent-child interaction and adolescents' negative externalizing behaviour problems yield decrement in parental warmth, hostile child rearing practices even in a previously nurturing parenting (Pardini, 2008; Huh et al., 2006).

The Experimental group differs significantly from the control group along the factor of "Demanding". The parents of adolescents with BPD stand on the higher end of expression of authority and claim with imperious command over children executed under the activities required for overall control. Controlling strategies like guilt and anxiety induction, personal attack are major contributors for negative development as it hinders the positive individual development due to lack of acceptance, involvement, restricted autonomy and inflexible reasoning (Steinberg, 2001; Barbar, 2002).

From the behavioral perspective reinforcement contingent on desired or undesired behavior plays a major role in an individual's development and there is evidence of stronger influence of rewards than the effect of punishment on human behaviour. The present study found significant difference in terms of higher level of object punishment offered by mothers of

adolescents with BPD and lower degree of symbolic as well as object reward from the fathers' and mothers' end respectively. It indicates that mothers of the referred group increasingly exhibit physical way of displaying punishment to express temporary annoyance with adolescents whereas no significant difference was there the domain of symbolic punishment. Significantly lower utilization of symbolic expression of appreciation for emotional and psychological security of the child is reflected in paternal context in adolescents with BPD whereas utilization of object reward in the form of physical, tangible, concrete actions of warmth is lower in maternal care of adolescents with BPD. It has been empirically found that rewards are more effective in modifying behaviour in comparison to punishment. Evident harsh parenting with preponderance of punishment and dearth of rewards (in comparison to healthy control group) might be the major contributor of pathology as discussed in the present study.

## CONCLUSION

The study can be concluded in the way that certain dimensions of parent- child relationship differ between parents of adolescents with BPD and parents of healthy control group such as offering protection and security, affection shown, provision of physical reward; showing dislike and rejection, over-controlling, neglect of their offspring. Adolescents with BPD encounter lower level of protection offered by parents than healthy control whereas Maternal rejection has been found to be high in adolescents with BPD yielding a vicious cycle of parental acceptance- rejection evoked in two way interaction of parents and their offspring. Lowered expression of love and higher degree of rejection may cause a detrimental effect on adolescents with BPD. Negativity in parenting is further contributed by higher extent of demandingness for controlling adolescents which generates hindrance in emotional, cognitive and self-development in phase of adolescents with BPD. Excess of maternal punishment offered in object form was there among adolescents with BPD. Lower degree of symbolic punishment from fathers and lower object reward offered by mothers leading to preponderance of punishment in contrast to limited utilization of overall reward may make the adolescents more vulnerable to pathology in comparison to healthy adolescents. However, the study has some limitations like small sample, unavailability of male adolescents with BPD, not precluding family type as study variable, sample drawn from different levels of socioeconomic status, personality style of parents and adolescents, relations between parents, longitudinal observation focusing on early developmental years and prospect of the affected adolescents. But these were beyond the scope of the study in hand. It can direct future research and it has significant implication like taking preventive and therapeutic measures of problematic parent- child relationship of today's blooming bud in current sociocultural arena.

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## REFERENCE

- 1. Ainsworth, M.D.S. (1978). The Bowlby-Ainsworth attachment theory. *Behav Brain Sci.* 1(3), 436-438
- Bandelow, B., Krause, J., Wedekind, D., Broocks, A., Hajak, G., & Rüther, E. (2005). Early traumatic life events, parental attitudes, family history, and birth risk factors in patients with borderline personality disorder and healthy controls. *Psychiatry research*, 134(2), 169-179.
- 3. Barbar, B.K. (2002). Intrusive parenting. Washington, DC: APA. 2002
- 4. Baumrind, D. (1978). Parental disciplinary patterns and social competence in children. *Youth Soc.* 9(3), 239-267
- 5. Bowlby, J. (1979). The Bowlby-Ainsworth attachment theory. *Behav Brain Sci.2*(4), 637-638.
- Cournoyer, L. (2005). The experience of parents in forming a relationship with their older adopted children from Russia or other former Soviet Union countries (*Doctoral dissertation*, Faculty of Education-Simon Fraser University).
- 7. Daley, S. E., Burge, D., & Hammen, C. (2000). Borderline personality disorder symptoms as predictors of 4-year romantic relationship dysfunction in young women: Addressing issues of specificity. *Journal* of Abnormal Psychology, 109(3), 451.
- 8. Derogatis, L. R. (1992). SCL-90-R: Administration, scoring & procedures manual-II for the (revised) version and other instruments of the psychopathology rating scale series. *Clinical Psychometric Research.*, 1-16.
- Farren, D., & Ramseycraigh, T. (1977). Child development: Infant day care and attachment behaviour towards mothers and teachers. Child Dev. 48, 1112-16
- 10. Frank, H., & Paris, J. (1981). Recollections of family experience in borderline patients. *Archives of General Psychiatry*, *38*(9), 1031-1034.
- 11. Guttman, H. A., & Laporte, L. (2000). Empathy in families of women with borderline personality disorder, anorexia nervosa, and a control group. *Family process*, 39(3), 345-358.
- 12. Hooley, J. M., & Hoffman, P. D. (1999). Expressed emotion and clinical outcome in borderline personality disorder. *American Journal of Psychiatry*, 156(10), 1557-1562.
- 13. Huh, D., Tristan, J., Wade, E., & Stice, E. (2006). Does problem behavior elicit poor parenting? A

- prospective study of adolescent girls. *Journal of Adolescent Research*, 21(2), 185-204.
- Johnson, J. G., Cohen, P., Gould, M. S., Kasen, S., Brown, J., & Brook, J. S. (2002). Childhood adversities, interpersonal difficulties, and risk for suicide attempts during late adolescence and early adulthood. Archives of general psychiatry, 59(8), 741-749.
- Kasen, S., Cohen, P., Skodol, A. E., First, M. B., Johnson, J. G., Brook, J. S., & Oldham, J. M. (2007). Comorbid personality disorder and treatment use in a community sample of youths: a 20-year follow-up. *Acta Psychiatrica Scandinavica*, 115(1), 56-65.
- 16. Kernberg, O. F. (1976). Technical considerations in the treatment of borderline personality organization. *Journal of the American Psychoanalytic Association*, 24(4), 795-829.
- 17. Khaleque, A., & Rohner, R. P. (2002). Perceived parental acceptance-rejection and psychological adjustment: A meta-analysis of cross-cultural and intracultural studies. *Journal of Marriage and Family*, 64(1), 54-64.
- 18. Klein, M. (1946). The Psychoanalysis of Children (Vol. 2).
- 19. Lavan, H., & Johnson, J. G. (2002). The association between axis I and II psychiatric symptoms and high-risk sexual behavior during adolescence. *Journal of Personality Disorders*, 16(1), 73-94.
- Mahler, M., Pine, F., & Bergman, A. (1975). The psychological birth of the human infant. New York: Basic Books
- Millon, T. (1993). Millon adolescent clinical inventory. Minneapolis, MN: National Computer Systems
- Pardini, D.A. (2008). Novel insights into longstanding theories of bidirectional parent
  – child influences: Introduction to the special section. *J. Abnorm. Child Psychol.* 36, 627
  – 631.
- 23. Pine, F (1985), Developmental theory and clinical process. New Haven, CT: Yale University Press
- 24. Rao, N. (1989). Parent child relationship scale. *Agra: National Psychological Corporation*.
- Reich, R. B., Vera, S. C., Marino, M. F., Levin, A., Yong, L., & Frankenburg, F. R. (1997). Reported pathological childhood experiences associated with the development of borderline personality disorder. *American Journal of Psychiatry*, 154(8), 11011106.
- 26. RohnerRP, Khaleque A. Parental acceptance-rejection and life-span development: A universal perspective. 2002; ORPC. 6(1): 1-10.
- 27. Sarkadi, A., Kristiansson, R., Oberklaid, F., & Bremberg, S. (2002). Fathers' involvement and children's developmental outcomes: a systematic review of longitudinal studies. *Acta paediatrica*, 97(2), 153-158.
- 28. Serman, N., Johnson, J. G., Geller, P. A., Kanost, R. E., & Zacharapoulou, H. (2002). Personality

- disorders associated with substance use among American and Greek adolescents. *Adolescence*, *37*(148), 841-855.
- 29. Skinner, B.F. (1971). Operant conditioning. The encyclopedia of education. 1971. 7; 29-33.
- 30. Steinberg, L. (2001). We know some things: Parent- adolescent relationship in retrospect and prospect. *J. Res. Adolesc. 11*, 51-71.
- 31. Westen, D., Shedler, J., Durrett, C., Glass, S., & Martens, A. (2003). Personality diagnoses in adolescence: DSM-IV axis II diagnoses and an empirically derived alternative. *American Journal of Psychiatry*, 160(5), 952-966.