Borderline personality disorder (BPD)

Explains borderline personality disorder (BPD), also known as emotionally unstable personality disorder (EUPD). Includes what it feels like, causes, treatment, support and self-care, as well as tips for friends and family.

If you want to contact us with any feedback, email contact@mind.org.uk.

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What is borderline personality disorder (BPD)?

Borderline personality disorder (BPD) is a type of personality disorder. You might be diagnosed with a personality disorder if you have difficulties with how you think and feel about yourself and other people. And if these difficulties make it hard to cope day to day.

Experiences of BPD are different for different people. You may experience emotions that are very intense, overwhelming or changeable. You may also experience difficulties with relationships or your sense of identity. Our section on experiences of BPD has more information on what it's like living with BPD.

“BPD is like the emotional version of being a burn victim. Everything hurts more than it seems to for everyone else, and any ‘thick skin' you're supposed to have just isn't there.”

You may hear other names for BPD, such as:

- Emotionally unstable personality disorder (EUPD)
- Emotional intensity disorder (EID)
- Borderline pattern personality disorder (borderline pattern PD)

It's your choice which term, if any, you use. People have very different views on BPD and there are ongoing debates about the diagnosis of personality disorders. Some people find a BPD diagnosis helpful or validating. Some find it unhelpful or stigmatising.

There's no right or wrong way to understand or describe your experiences. The important thing to remember is that you deserve support and understanding.

When is BPD diagnosed?

You might be given a diagnosis of BPD if you experience at least five of the following things. And if they've lasted for a long time and have a big impact on different parts of your daily life:

- Feeling very worried about people abandoning you, and like you'd try very hard to stop that happening
- Having intense emotions that last from a few hours to a few days and can change quickly (such as feeling very happy and confident to suddenly feeling low and sad)
- Feeling insecure about who you are, with your sense of self changing significantly depending on who you're with
- Finding it really hard to make and keep stable relationships, and often viewing relationships as completely perfect or completely bad
Feeling empty a lot of the time

Acting impulsively and doing things that could harm you, such as binge eating, using drugs and alcohol, or driving dangerously

Using self-harm to manage your feelings or feeling suicidal

Feeling intense anger, which can be difficult to control

Experiencing paranoia or dissociation in moments of extreme stress

“The worst part is the insecure relationships. When I'm attached, they're my whole world – it's crippling. I care so deeply about how long they take to reply or their tone, because I'm so afraid of losing them.”

Different views on diagnosis

Because you only need to experience five of these difficulties to be given a diagnosis of BPD, it can be a very broad diagnosis which includes lots of different people with very different experiences.

Those of us who've been diagnosed with BPD have different views on whether the label is helpful. Some of us find it useful to have a diagnosis because we feel it explains and helps us to understand our difficulties, or gives us a sense of relief and validation. It may also be helpful for accessing treatment or support. Or to put a name to our experiences and connect with others.

“Even though I haven't been offered much support, just having a diagnosis helps me feel my suffering is validated.”

On the other hand, some of us don't find our diagnosis helpful. We may find it stigmatising and feel it suggests that there's something wrong with who we are. It can also sometimes be a barrier to getting the support we need.

Then there are also some of us who disagree entirely with the current system of diagnosing personality disorders and prefer not to describe our experiences as medical problems. We may see them more as a response to trauma, difficult life events or problems in our society.

Our resource on why personality disorder is a controversial diagnosis has more information.

“I don't tell people I have BPD because I don't like labelling myself. I just say I have depression / anxiety. But I know I have BPD. I feel things so intensely sometimes that I lose control of my senses. It's one of the worst feelings, but I've learnt to cope.”
What's it like to live with BPD?

Your experience of living with BPD is unique to you, but this section describes some common experiences that you might recognise.

“My experience is that I have to keep my emotions inside, because I get told I'm overreacting. So I end up feeling like I'm trapped inside my body screaming while no one can hear me.”

If you feel unable to keep yourself safe, it's a mental health emergency.
Get emergency advice

Difficult feelings and behaviour towards yourself

How you might think or feel

- Lonely
- Overwhelmed by the strength of your emotions and how quickly they change
- Like there's something inherently wrong with you, and that it's your fault if bad things happen to you because you deserve them
- Like you're a bad person, or not a real person at all
- That you don't know what you want from life, or what you like or dislike
- Empty, numb or like you have no purpose
- Like your feelings are impossible to understand or describe
- Like you're a child in an adult world

How you might behave as a result

- Self-harming or attempting suicide
- Overspending or binge eating
- Using recreational drugs, alcohol or smoking to try to cope with your emotions
- Quitting just before achieving something, or avoiding activities where you think you might fail or be disappointed
- Often changing jobs, hobbies, goals or plans
- Keeping very busy so you're never alone
“My BPD affects every part of my life – relationships, identity, career choices, moods. I changed my name twice by deed poll. It's a terrible, painful feeling not knowing who you are. A real struggle some days to battle everything.”

**Difficult feelings and behaviour towards others**

**How you might think or feel**

- That friends or partners will leave you forever if they're angry or upset with you
- That people are judging or thinking badly about you
- Like no one understands you, or you’re not like other people and will never be able to understand them
- That people are either completely perfect and kind, or bad and hurtful, and there’s no middle ground (this is sometimes called ‘splitting’, or black-and-white thinking)
- Wanting to be close to others but also feeling scared of close relationships
- Like the world is a scary and dangerous place, and you want to run away and hide

**How you might behave as a result**

- Getting very angry or frustrated with people
- Struggling to trust people
- Having unrealistic expectations of people or contacting them very frequently
- Wanting to be close to people but worrying they’ll leave or reject you, and so avoiding or pushing them away
- Spending a lot of time thinking and worrying about things that other people say or do
- Asking for lots of reassurance or testing people’s commitment or opinion of you
- Distancing yourself from people or ending relationships with friends or partners because you think they might leave you
- Anxiously looking out for signs that people might reject you

See our resource on [self-care for BPD](#) for some ideas on how to cope with difficult feelings.

“It's like there's something missing inside me. And no one understands when I try to explain how I feel.”
Problems with drugs or alcohol

Some people with BPD might be more likely to misuse drugs and alcohol as a way of trying to cope with the difficult emotions they experience.

You can find more information, including where to get support, on our resources on recreational drugs and alcohol. You can also find confidential advice about drugs and alcohol on the FRANK website.

“BPD can be exhausting. My mind is a constant rollercoaster of emotions. When the emotions are happy and exhilarating it's the best feeling in the world.”

BPD and other mental health problems

It's common to experience other mental health problems and experiences alongside BPD, which could include:

- Anxiety and panic attacks
- Depression
- Eating problems
- Dissociative disorders
- Psychosis or hearing voices
- Bipolar disorder
- Post-traumatic stress disorder (PTSD) or complex PTSD
- Sleep problems

“It took a long time to get my BPD/EUPD diagnosis, because of also having other disorders. But I'm at a happy place in life now thanks to a variety of factors.”

Facing stigma about BPD

Because BPD is a complex diagnosis that not everyone understands well, you might find some people have a negative image of it, or have misconceptions about you.

This can be very upsetting and frustrating, especially if someone who feels this way is a friend, colleague, family member or a health care professional.

Some people, even health professionals, can view BPD as something which is untreatable or makes people ‘difficult’ to help. This is unfair and untrue. You may have experienced mistrust, judgement, or a lack of empathy from people in the past. If you’ve been treated in this way, it’s understandable you may be worried about seeking help or telling people about your diagnosis.

“For me, BPD is a label which acts as a disadvantage in life. It knocks my confidence.”
It's important to remember that you aren't alone, and you don't have to put up with misconceptions. Here are some options for you to think about:

- **Show people this information.** This could help them better understand what your diagnosis means.

- **Get more involved in your treatment.** Our resources on seeking help for a mental health problem provide guidance on having your say in your treatment, making your voice heard, and overcoming barriers.

- **Know your rights.** Our resources on legal rights have more information, including how you can complain about your care.

- **Take action with Mind.** See our campaigning resource for details of the different ways you can get involved with helping us challenge stigma.

“The stigma is the worst part for me. I'm a caring and empathic soul who'd do anything for the people I love.”

**What causes BPD?**

There's no clear reason why some people experience difficulties associated with BPD. Women are given this diagnosis more often than men – more research needs to be done to understand why this is. But it can affect people of all genders and backgrounds.

“One of the things I struggled with was a feeling of 'why me' – I felt others had experienced far worse and could deal with it so why couldn't I. Over time I've realised that lots of low level issues are as valid a reason for struggling as a few bigger traumas.”

Researchers think that BPD is caused by a combination of factors, including:

**Stressful or traumatic life events**

If you get a BPD diagnosis you're more likely than most people to have had difficult or traumatic experiences growing up, such as:

- Often having felt afraid, upset, unsupported or invalidated

- Family difficulties or instability, such as living with a parent or carer who experienced an addiction

- Sexual, physical or emotional abuse or neglect

- Losing a parent

Difficult childhood experiences may cause you to develop particular coping strategies, or beliefs about yourself and other people. These can become less helpful in time and cause you distress. You might also be struggling with feelings of anger, anxiety and depression.
You might also experience BPD without having any history of traumatic or stressful life events. Or you might have had other types of difficult experiences.

If you already experience some of these difficulties, then experiencing stress or trauma as an adult could make things worse. Our resources on how to manage stress and post-traumatic stress disorder have some tips on how to cope.

“Because I don't have many memories of healthy emotional behaviour or relationships I feel totally at sea dealing with these things. When I get let down, it just reinforces my belief that the world is full of bad people who won't be kind – like my parents.”

Genetic factors

You're more likely to get a diagnosis of BPD if someone in your close family also has one. This suggests that genetic factors could contribute to BPD. But we also know that the environment we grow up in and our early relationships can impact the way we think, feel and behave as adults. So it's difficult for researchers to know exactly how much of a role genes play.

It's possible that a combination of factors could be involved. Genetics might make you more vulnerable to developing BPD. Whereas stressful, difficult or traumatic life experiences could then trigger these vulnerabilities. More research is needed to understand this area.

“I saw my parents and family members regularly behave in out-of-control ways and I thought that was normal.”

Can children and young people be diagnosed with BPD?

It's very hard to diagnose BPD in children and young people because you go through so many changes as you grow up. But you might be given the diagnosis as a teenager if your difficulties have lasted for long enough and BPD is the diagnosis that best matches what you're experiencing.

You may also hear the term ‘emerging borderline personality disorder’. YoungMinds has more information about BPD and emerging BPD for young people.
Misdiagnosis

Challenges with getting a BPD diagnosis

There are many reasons why you may experience challenges with getting a BPD diagnosis, including get the wrong diagnosis. The symptoms of BPD are very broad, and some can be similar to or overlap with other mental health problems, such as:

- Bipolar disorder
- Complex post-traumatic stress disorder (C-PTSD)
- Depression
- Anxiety
- Psychosis
- Antisocial personality disorder (ASPD)

Unfortunately, there are lots of assumptions and misunderstandings around BPD. Not every doctor or health professional understands it. And there are lots of disagreements about how BPD should be described, diagnosed or treated. You may experience BPD and other mental health problems at the same time.

We also don't all experience or express our pain in the same ways. So this can make it harder for someone to understand what's going on for us, and which diagnosis or support best fit what we need.

Because of this, you might:

- Not get a diagnosis of BPD when you feel you should have one
- Get a diagnosis of a different mental health problem which you don't agree with
- Get a BPD diagnosis when you feel you should have a different diagnosis
- Get a BPD diagnosis when you feel you shouldn’t have a diagnosis at all

“I had the wrong diagnosis for nearly 30 years. I felt like a freak because, when reading up about the diagnosis I was given, there was no mention of my other symptoms.”

What can I do if I disagree with my diagnosis?

If you're worried that your diagnosis doesn't fit the way you feel, it's important to discuss it with a mental health professional so you can make sure you're getting the right support to help you.
See our resources on seeking help for a mental health problem for information on how to make sure your voice is heard, and what you can do if you’re not happy with your doctor.

What treatments can help?

Talking therapies

Talking therapies are thought to be the most helpful treatment for BPD, although more research is needed into the types of treatments that are most effective.

The National Institute for Health and Care Excellence (NICE) – the organisation that produces guidelines on best practice in health care – suggests that the following kinds of talking treatments may be helpful:

- **Dialectical behaviour therapy (DBT)** – uses individual and group therapy to help you learn skills to cope with difficult emotions. So far, NICE has recommended this treatment for women with BPD who often self-harm, and it’s also thought to be helpful for other groups. See our resources on DBT for more information.

- **Mentalisation-based therapy (MBT)** – aims to help you recognise and understand your and other people’s mental states, and to examine your thoughts about yourself and others. You can read more about MBT for DBT on the NHS website.

My DBT journey

“I see a future for myself now that I didn't see before the therapy.”
Read this blogger's story.

NICE says that other types of talking therapy could potentially be helpful too, including:

- **Cognitive behavioural therapy (CBT)** – aims to help you understand how your thoughts and beliefs might affect your feelings and behaviour. See our resource on CBT for more information.

- **Cognitive Analytic Therapy (CAT)** – combines CBT’s practical methods with a focus on the relationship between you and your therapist. This can help you look at how you relate to people, including yourself, and what patterns have developed for you.

- **Other talking therapies** – such as schema-focused cognitive therapy, psychodynamic therapy, interpersonal therapy or arts therapies. See our resources on talking therapies and arts and creative therapies for more information.
**Mentalisation-based therapy**

“I identified with 3 strangers in a way that I had never been able to with anyone else. Ever.”

[Read Jessica's story](#)

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**Therapeutic communities**

Therapeutic communities are specially designed programmes where you work with a group of other people experiencing mental health problems to support each other to recover. You might live together some or all of the time, or meet up regularly.

Activities can include different types of individual or group therapy, as well as household chores and social activities. [The Consortium for Therapeutic Communities](#) provides a directory of therapeutic communities in the UK.

“I've educated myself about emotions. I've learned from books, therapy, psychologists, friends. The most important thing is that it's never too late to learn.”

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**Medication**

NICE doesn’t recommend using [medication](#) to treat the ongoing symptoms of BPD. This is because there aren't any drugs that are known to be effective.

But we know that in practice doctors often do prescribe medication for people diagnosed with BPD. This could include [antidepressants](#), [antipsychotics](#) or [mood stabilisers](#).

You might also take this medication for other mental health problems you're experiencing. Or you may be given medication to help you manage specific symptoms.

In a crisis situation, your doctor might prescribe you a [sleeping pill or minor tranquilliser](#) to help you feel calmer. But they shouldn’t prescribe these for longer than a week.

Your doctor should give you information about any drug you take. This information should be in a format that you can access and understand. They should also give you regular check-ups to review your medication. So if this isn’t happening and you'd like to talk about your medication, make an appointment to discuss it with your doctor.

“I've found the right medication regime for me and try to keep my life structured. It's not easy, but recovery is possible.”

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Medication really helps some people but isn't right for others. Before deciding to take any drug, it's important to make sure you have all the facts you need to make an informed choice.
How can I get treatment?

To get treatment on the NHS you should visit your GP, who can refer you to your local community mental health team (CMHT) for an assessment.

If you receive NHS treatment, it should be in line with NICE guidelines. These say that:

- Anyone with possible BPD should have a structured assessment with a specialist in mental health before being given a diagnosis.
- You should have a say in the type of treatment you're offered. If you're not getting the type of treatment you think would most help you, it could help to talk to an advocate.

You can read the full guidelines and additional recommendations for BPD in English or Welsh on the NICE website. For details of specialist services in the UK, see the UK Department of Health's personality disorder website.

Will I get the help I need in a crisis?

Unfortunately, you might find that services in your area aren't always able to provide the best possible care to support you.

We know how frustrating and difficult it can be to cope with services that don't provide the exact help you need, exactly when you need it. That's why we're campaigning to improve crisis care across the country.

Learn more about our crisis care campaign, and about the different ways you can take action with Mind.

Can I go private?

Waiting times for talking treatments on the NHS can be long. And specialist services aren't always available on the NHS. Because of this, you may consider going private. Unfortunately, this can be expensive so may not be possible.

Some private therapists offer a sliding scale of payment though, depending on your circumstances. So it may be worth checking their website or contacting them to see if this is something they can do. See our resource on private sector care for more information.

“I was helpless and hopeless for a long time. But when I finally got my head around the fact that only I could make a difference and that there was no magic wand, something clicked.”
Where else can I get support?

Treatment for BPD can be very limited and may vary depending on your circumstances. If you're struggling to access the support you need through the NHS, it might be worth looking into charities or other third sector organisations. Your local Mind may be able to help or suggest other local services. And see our resource on third sector services for more information.

Or you could consider trying peer support. This could be through an online community, like Mind’s Side by Side. Or through a local support group. For advice on what to do when you're struggling to access the support you need, see our resource on facing barriers to seeking help.

“It began changing when one hospital said there was a way forward, that I didn't have to feel so broken forever. It wasn't plain sailing, but realising there was hope and that other people had gone on to achieve amazing things inspired me.”

What can I do to help myself cope?

You might feel like every day is a struggle. But there are lots of things that could help. This section covers tips for what you can do right now to help yourself, and what you can try in the longer term.

If you feel unable to keep yourself safe, it's a mental health emergency. Get emergency advice

How can I help myself right now?

If you're feeling overwhelmed, it might help to focus on one feeling at a time. Here are some ideas that you could try to see if they work for you.

Different things work at different times for different people, so try to be kind to yourself if some things don’t work for you. Over time, you might develop your own tips to add to this list too.

Here are some tips on how to help yourself.

“What helps when I’m having a bad time is more 'practical' than emotional. Delaying my emotions a little until I feel more able to cope.”
If I'm feeling angry, frustrated or restless

You could:

- Rip up some paper
- Hit a pillow
- Do some exercise
- Listen to loud music
- Do a practical activity like gardening or woodwork

See our resource on how to manage anger for more tips.

If I'm feeling depressed, sad or lonely

You could:

- Wrap up in a blanket and watch your favourite TV show
- Write all your negative feelings on a piece of paper and tear it up
- Listen to music that you find uplifting or soothing
- Write a comforting letter to the part of yourself that is feeling sad or alone
- Let yourself cry or sleep
- Cuddle a pet or a soft toy

See our resource on self-care for depression for more tips.

If I'm feeling anxious, panicky or tense

You could:

- Make yourself a hot drink and drink it slowly, noticing the taste and smell, the shape of the mug and its weight in your hand
- Take 10 deep breaths, counting each one out loud
- Write down everything you can think of about where you are right now, such as the time, date, colour of the walls and the furniture in the room
- Take a warm bath or shower – this can help change your mood by creating a soothing atmosphere and a distracting physical sensation

See our resource on self-care for anxiety and panic attacks for more tips.

If I'm feeling dissociative or spaced out

You could:
• Chew a piece of ginger or chilli
• Clap your hands and notice the stinging sensation
• Drink a glass of ice-cold water

See our resource on [self-care for dissociative disorders](#) for more tips.

**If I want to self-harm**

You could:

• Rub ice over where you want to hurt yourself
• Stick sellotape or a plaster on your skin and peel it off
• Take a cold bath or shower

See our resource on [helping yourself cope with self-harm](#) for more tips.

“If I’m feeling very bad but can't put into words how I feel or why, I wear a particular bracelet. My closest friends/family know that this means I'm having a rough time and might need some TLC.”

**How can I help myself in the longer term?**

**Talk to someone**

It can be hard to reach out when you’re not feeling well, but it might help to share difficult thoughts. If you don’t feel you can talk to the people around you, you could try contacting a helpline.

For example, you can talk to Samaritans for free on 116 123 or [jo@samaritans.org](mailto:jo@samaritans.org) about anything that's upsetting you. See our resource on [helplines and listening services](#) for more information about different helplines.

“Although it can sometimes be triggering, going online and talking to people who also have BPD is useful. It's supportive and reassuring that I'm not really alone.”

**Keep a mood diary**

Recording your moods in a diary could help you spot patterns in what triggers difficult experiences for you. Or notice early signs when they're beginning to happen.

Try noting down difficult thoughts or feelings. This might help get them out of your head and make them feel less overwhelming. You can then reflect on them when you feel calmer or talk about them with someone you trust.

You could also make a note of what's going well. It's really important to be kind to yourself and recognise difficult steps you’ve taken, or new things you've tried. These
don’t need to be big things. They could be things like having a shower, going for a walk or sending someone a text. Or managing a difficult situation in a slightly different way.

**Plan for difficult times**

If you’re feeling less well you might not be able to tell people what help you want, so it could be helpful to plan ahead.

The [National Institute for Health and Care Excellence (NICE)](https://www.nice.org.uk) – the organisation that produces guidelines on best practice in healthcare – recommends that everyone with BPD has a crisis plan. This should include possible triggers, self-help strategies and details for getting support, and should be shared with you and your GP.

See our resources on [planning for a crisis](https://www.mind.org.uk/mental-health-and-wellbeing/crisis-planning) and [making a support plan](https://www.mind.org.uk/mental-health-and-wellbeing/support-plan) for more information.

“With time, you do learn to cope better with BPD. I’ve struggled for 15 years, but every year I seem to get stronger and better at coping with it.”

**Make a self-care box**

You could put together some things that might help you when you’re struggling – a bit like making a first aid kit for your mental health.

For example:

- Favourite books, films or music
- A stress ball or fiddle toy
- Helpful sayings or notes of encouragement
- Pictures or photos you find comforting
- A soft or weighted blanket
- Cosy slippers
- Something comforting to smell or taste, like a lavender bag or mints

Or you could make a [digital self-care kit](https://www.mind.org.uk/mental-health-and-wellbeing/self-care-kit). You could save this on your phone so you can look at it anytime. You could save photos, music, videos, messages or sayings that you find helpful. Or notes to remind yourself how to manage difficult situations.

**Try peer support**

[Peer support](https://www.mind.org.uk/mental-health-and-wellbeing/peer-support) brings together people who’ve had similar experiences. Some people find this very helpful.

There are lots of ways to find peer support. You could:

- See our [peer support directory](https://www.mind.org.uk/mental-health-and-wellbeing/peer-support-directory)
- Ask your local Mind about peer support
- Try an online peer support community like Mind’s Side by Side

**Focus on what matters to you**

Sometimes when we’re given a mental health diagnosis, it can feel like this defines us as a person. But this isn't true.

Try to focus on the things that matter to you. Or things you value about your character, or which make you happy. This could be your values, interests, opinions or passions. It might help to write them down or say them out loud. Some people find it helpful to express themselves creatively.

And if you don’t know yet what matters to you or what you value about yourself that’s ok too – take your time. It can sometimes be difficult to have a sense of what we enjoy and why we matter when we're feeling low or unwell. Especially if we've been treated badly by others.

See our resource on improving your self-esteem for more information.

**Look after your physical health**

Looking after your physical health can make a difference to how you feel emotionally. For example, it can help to:

- **Try to improve your sleep.** Sleep can help give you the energy to cope with difficult feelings and experiences. See our resources on coping with sleep problems for more information.

- **Think about what you eat.** Eating regularly and keeping your blood sugar stable can make a difference to your mood and energy levels. See our resources on food and mood and eating problems for more information.

- **Try to do some physical activity.** Exercise can be really helpful for your mental wellbeing. See our resources on physical activity for more information.

- **Spend time outside.** Spending time in green space can boost your wellbeing. See our resources on nature and mental health for more information.

- **Be careful with alcohol or drug use.** While you might want to use drugs or alcohol to cope with difficult feelings, in the long run they can make you feel a lot worse and may prevent you from getting the support you need for your mental health. See our resources on recreational drugs, alcohol and addiction for more information on what to do if you’re struggling with drugs and alcohol use.

**Find specialist support for contributing factors**

If you’ve experienced other issues that have contributed to your problems, it could be helpful to explore the help out there for these too.
For example:

- **Abuse or bullying.** If you've been abused in childhood, the National Association for People Abused in Childhood (NAPAC) is there to support you, and our resources on abuse and useful contacts for PTSD list many more organisations that could help.

- **Racism.** Our resources on racism and mental health have information about the impacts of racism, as well as options for support. This also includes information on racism within the mental health system. And advice on overcoming barriers to getting support.

- **Money problems.** Our resources on money and mental health have information about the links between money worries and mental health. This includes advice about managing your money when you're unwell. And options for support with debt, benefits or other financial concerns.

“How sometimes I have good periods where my symptoms don't really trouble me – other times they're overwhelming. It's hard not to beat myself up for the relapses, but that's something I need to keep working on. It's ok to struggle.”

**How can other people help?**

This information in this section is for friends and family who want to support someone with BPD.

If someone you care about is diagnosed with BPD you might sometimes find it hard to understand their feelings or behaviour, or to know how to help. But there are lots of positive things you can do to support them.

“One thing I find helps is when others validate my emotions, as I often feel guilty for having them.”

**Be patient**

If your loved one is struggling to deal with their emotions, try not to get involved in an argument in the heat of the moment. It could be better to wait until you both feel calmer to talk things through.

**Don't judge**

It can be difficult if you don't understand why someone is feeling or behaving in a certain way. Especially if their reactions seem upsetting or unreasonable. But try to remember that you're not in their head and there may be things going on for them that you don't understand. Try to listen, and acknowledge their feelings, rather than judging their reactions.
Be calm and consistent

If your loved one is experiencing a lot of overwhelming emotions, this could help them feel more secure and supported and will help in moments of conflict. If you feel yourself becoming angry or upset, try taking some time alone or going for a walk if you can.

Remind them of their positive traits

When someone you care about is finding it hard to believe anything good about themself, it can be reassuring to hear all the positive things you see in them.

Set clear boundaries

Practising good boundaries and expectations can make a big difference. If your loved one is feeling insecure about being rejected or abandoned, or seems worried about being left alone, it can help to clarify what you can expect from each other and to communicate about this calmly and patiently if things become unclear.

Plan ahead

When the person you're supporting is feeling well, ask them how you can help them best when things are difficult. See our resources on supporting someone who feels suicidal, and supporting someone who is self-harming for more information.

Learn their triggers

Talk to your loved one and try to find out what sort of situations or conversations might trigger negative thoughts and emotions. Understanding their triggers could help you avoid difficult situations, and feel more prepared when they have strong reactions to certain things.

Provide distractions

Sometimes helping to distract someone from difficult feelings can be really useful. Try suggesting activities or tasks, such as watching a film or tidying up. Or you could start something and let them know they're welcome to join in when they feel ready.

Learn more about BPD

BPD is a complicated diagnosis, and your loved one might sometimes have to deal with other people's misconceptions on top of trying to manage their mental health problem. Educating yourself can also help you to challenge stigma. Our about BPD and experiences of BPD resources contain more information.
Help them seek treatment and support

See our resource on supporting someone to seek help for more information about how to help someone get the support they need, including what you can do when someone doesn't want help. And see our resource on advocacy in mental health for guidance on how to help them find an advocate.

Take care of yourself

Looking after someone else can sometimes be difficult and stressful. It's important to remember that your mental health is important too. See our resources on coping when supporting someone else, managing stress and improving your wellbeing for more information on how to look after yourself.

“I have a friend who goes for hot chocolate with me every week. To know there is somebody who cares and has time for you, even when you're not sure who you are, that means the world.”

Useful contacts

Mind's services

- Mind's helplines provide information and support by phone and email.
- Local Minds offer face-to-face services across England and Wales. These services include talking therapies, peer support and advocacy.
- Side by Side is Mind's support online community for anyone experiencing a mental health problem.

Other organisations

Borderline Arts

borderlinearts.org
Uses the arts to raise awareness of borderline personality disorder and reduce stigma.

The Consortium for Therapeutic Communities

therapeuticcommunities.org
Online directory of therapeutic communities across the UK.
FRANK

0300 123 6600
talktofrank.com
Confidential advice and information about drugs, their effects and the law.

Harmless

harmless.org.uk
User-led organisation that supports people who self-harm, and their friends and family.

The National Association for People Abused in Childhood (NAPAC)

0808 801 0331
support@napac.org.uk
napac.org.uk
Supports adult survivors of any form of childhood abuse. Offers a helpline, email support and local services.

National Institute for Health and Care Excellence (NICE)

nice.org.uk
Produces guidelines on best practice in healthcare.

NHS UK

nhs.uk
Information about health problems and treatments, including details of local NHS services in England.

Papyrus HOPELINEUK

0800 068 41 41
07860039967 (text)
pat@papyrus-uk.org
papyrus-uk.org
Confidential support for under-35s at risk of suicide and others who are concerned about them. Open daily from 9am–midnight.

Personality Disorder
personalitydisorder.org.uk
Website commissioned by the UK department of health. Includes information and details of local services in England.

**Samaritans**

116 123 (freephone)
j@samartians.org
Freepost SAMARITANS LETTERS
samartians.org
Samaritans are open 24/7 for anyone who needs to talk. You can visit some Samartians branches in person. Samaritans also have a Welsh Language Line on 0808 164 0123 (7pm–11pm every day).

**Shout**

85258 (text SHOUT)
giveusashout.org
Confidential 24/7 text service offering support if you're in crisis and need immediate help.

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References are available on request.