

INFLUENCE OF PARENTING STYLES ON THE DEVELOPMENT OF BORDERLINE PERSONALITY AMONG ADOLESCENT ON ENUGU METROPOLIS.

OKENYI, OKWUNWA SABINA
Department of Psychology
Madonna University Nigeria,
Okija Anambra State
+23407032747155
[e-mail-sabinaokenyi@gmail.com](mailto:sabinaokenyi@gmail.com).

IGO JACOB
Madonna University Nigeria,
Okija Anambra State
marcellinusigo@gmail.com.
07037728401

Abstract

Borderline Personality Disorder (BPD) is a serious mental health condition characterized by unstable relationships, emotional dysregulation, and impulsivity. Parenting styles have been identified as a significant factor that contributes to the development of BPD in adolescents. This study aimed to investigate the influence of parenting styles on the development of BPD among 240 adolescents in four schools in Enugu State, Nigeria. The study employed a cross-sectional survey design, using a self-report questionnaire to collect data namely Scale of parenting style for parenting styles and MC Screening Instrument for BPD symptoms. The results showed that authoritarian, permissive and neglectful parenting styles were significantly associated with BPD symptoms in adolescents, while authoritative parenting style was negatively associated with BPD symptoms. Specifically, adolescents from authoritarian, permissive and neglectful households reported higher levels of emotional dysregulation, impulsivity, and unstable relationships, which are hallmark symptoms of BPD. The study contributes to the understanding of the role of parenting styles in the development of BPD and highlights the need for parenting interventions to prevent the development of BPD among adolescents. It also supports the importance of authoritative parenting styles in preventing the development of BPD in adolescents.

Keywords: Parenting Styles, Borderline Personality Disorder, Adolescents

Introduction

Borderline personality disorder (BPD) is a mental health condition that commonly manifests during adolescence. The development of BPD is complex and multifactorial, with various environmental and psychological factors contributing to its onset. One such factor is parenting style, which can significantly influence an adolescent's emotional and behavioral development. This abstract aims to provide an overview of the relationship between parenting styles, specifically authoritative, authoritarian, permissive, and neglectful, and the development of BPD among adolescents in four secondary schools.

Research has shown that authoritative parenting, characterized by high levels of warmth and support combined with clear boundaries and expectations, is associated with lower rates of BPD symptoms in adolescents. These parents provide their children with a sense of security and autonomy while also instilling a strong sense of responsibility and self-discipline. In contrast, authoritarian parenting, characterized by high levels of control and low levels of warmth and support, has been linked to higher rates of BPD symptoms in adolescents. These parents may be overly strict and demanding, leading to feelings of anxiety and low self-esteem in their children.

Permissive parenting, characterized by low levels of control and high levels of warmth and support, has also been associated with higher rates of BPD symptoms in adolescents. While these parents may be loving and

supportive, they may lack the necessary structure and guidance to help their children develop healthy coping strategies and emotional regulation skills. Neglectful parenting, characterized by low levels of warmth and support combined with low levels of control, has been linked to the most severe BPD symptoms in adolescents. These parents may be emotionally unavailable or absent, leading to feelings of abandonment and instability in their children.

This study aims to explore the relationship between these different parenting styles and the development of BPD symptoms among adolescents in four secondary schools. The study will utilize a mixed-methods approach, including both quantitative surveys and qualitative interviews with both parents and adolescents. The findings will provide insight into the role of parenting style in the development of BPD symptoms among adolescents and inform the development of targeted interventions aimed at promoting healthy parent-child relationships.

Borderline personality disorder (BPD) is a complex and challenging mental health condition characterized by a persistent pattern of instability in interpersonal relationships, self-image, and emotional regulation (American Psychiatric Association, 2013). The development of BPD is believed to be influenced by a combination of genetic, neurobiological, and environmental factors, with a growing body of research highlighting the crucial role of parenting styles in shaping an adolescent's risk of developing this disorder (Crowell et al., 2019).

Parenting styles refer to the attitudes, behaviors, and strategies employed by parents in their interactions with their children (Baumrind, 1991). These styles can have a profound impact on an adolescent's emotional, social, and psychological development, and have been linked to the emergence of various mental health issues, including BPD (Christensen et al., 2020). Specifically, research has identified authoritarian, permissive, and neglectful parenting styles as potential risk factors for the development of BPD, while authoritative parenting has been associated with more positive outcomes (Sturge-Apple et al., 2021).

Authoritarian Parenting and BPD

Authoritarian parenting is characterized by high levels of control, strict discipline, and emotional distance (Baumrind, 1991). Parents who adopt this style tend to be highly demanding of their children, setting rigid rules and expectations, while providing little warmth or emotional support. This parenting approach has been linked to the development of BPD in adolescents, as it can contribute to feelings of invalidation, difficulties in emotion regulation, and a lack of autonomy (Christensen et al., 2020).

Studies have shown that adolescents with BPD are more likely to have experienced authoritarian parenting, which can lead to the internalization of negative self-views and a fragile sense of self (Sturge-Apple et al., 2021). This parenting style may also hinder the development of healthy coping mechanisms, as adolescents are not given the opportunity to learn how to regulate their emotions independently (Crowell et al., 2019). Moreover, the emotional distance and lack of responsiveness in authoritarian parenting can disrupt the formation of secure attachments, which are crucial for the development of healthy interpersonal relationships (Christensen et al., 2020).

Permissive Parenting and BPD

In contrast to authoritarian parenting, permissive parenting is characterized by high levels of responsiveness and low levels of control (Baumrind, 1991). Permissive parents tend to be indulgent, accepting, and less demanding of their children, often failing to set clear boundaries or provide the necessary structure for healthy development.

Research has suggested that permissive parenting can also contribute to the development of BPD in adolescents (Sturge-Apple et al., 2021). The lack of clear boundaries and consistent discipline in this parenting style may lead to difficulties in impulse control and emotional regulation, as adolescents are not provided with the necessary guidance and support to learn these crucial skills (Crowell et al., 2019). Additionally, the lack of parental involvement and oversight in permissive parenting can leave adolescents feeling insecure and lacking in the validation and structure they need for healthy identity formation (Christensen et al., 2020).

Neglectful Parenting and BPD

Neglectful parenting, characterized by low levels of both responsiveness and control, has also been identified as a risk factor for the development of BPD in adolescents (Baumrind, 1991). Neglectful parents are emotionally unavailable, unresponsive to their child's needs, and often fail to provide the basic care and support necessary for healthy development.

Adolescents who experience neglectful parenting may internalize a sense of worthlessness and develop a fragile sense of self, as their emotional needs are consistently unmet (Sturge-Apple et al., 2021). This lack of parental attunement and validation can contribute to the development of unstable and chaotic interpersonal relationships, as well as difficulties in emotional regulation and impulse control – hallmarks of BPD (Crowell et al., 2019). Additionally, the absence of a secure attachment with a caregiver can leave adolescents vulnerable to the development of maladaptive coping strategies, such as self-harm or substance abuse, which are often associated with BPD (Christensen et al., 2020).

Authoritative Parenting and Resilience

In contrast to the risk factors associated with authoritarian, permissive, and neglectful parenting, authoritative parenting has been linked to a lower risk of BPD development in adolescents (Baumrind, 1991). Authoritative parents are characterized by a balance of high demands and high responsiveness, providing a nurturing, structured, and supportive environment for their children. Studies have shown that adolescents raised by authoritative parents are more likely to develop healthy emotional regulation skills, a strong sense of self-worth, and secure attachment patterns – all of which can serve as protective factors against the development of BPD (Crowell et al., 2019). The combination of clear boundaries, consistent discipline, and emotional warmth in authoritative parenting allows adolescents to internalize adaptive coping strategies and develop a stable sense of identity, ultimately fostering resilience against mental health challenges (Christensen et al., 2020).

Theoretical Review

Attachment Theory and Borderline Personality Disorder

Attachment theory, developed by John Bowlby, provides a prominent theoretical framework for understanding the link between parenting styles and the development of borderline personality disorder (BPD) in adolescents (Fonagy & Bateman, 2016). This theory posits that the quality of the early attachment relationship between a child and their primary caregiver(s) shapes the child's internal working models of self and others, which in turn influence their ability to regulate emotions and form stable interpersonal relationships.

Research has consistently shown that individuals with BPD often exhibit insecure attachment patterns, such as disorganized or preoccupied attachment styles, which are associated with experiences of parental rejection, inconsistency, or abuse (Agrawal et al., 2004). Adolescents with BPD may have developed a negative self-image and a mistrust of others due to the lack of a stable, nurturing attachment figure during their formative years (Fonagy & Bateman, 2016). This can lead to the characteristic features of BPD, including intense fear of abandonment, unstable relationships, and difficulties in emotional regulation. Parenting styles that are characterized by emotional unavailability, inconsistent responsiveness, or overt rejection can contribute to the development of insecure attachment patterns and increase the risk of BPD in adolescents (Gunderson & Lyons-Ruth, 2008). Specifically, authoritarian and neglectful parenting, which involve high levels of control and low levels of warmth, have been linked to the emergence of disorganized attachment styles and a greater likelihood of BPD symptoms (Baer & Sauer, 2011).

Social Learning Theory and Borderline Personality Disorder

Social learning theory, proposed by Albert Bandura, offers another valuable perspective on the relationship between parenting styles and the development of BPD in adolescents (Bandura, 1977). This theory suggests that individuals learn and internalize behaviors, attitudes, and coping mechanisms through observing and modeling the actions of significant others, particularly their primary caregivers.

Adolescents with BPD often report having parents who model and reinforce maladaptive behaviors, such as emotional dysregulation, impulsivity, and unstable interpersonal relationships (Gunderson & Lyons-Ruth,

2008). In families where these dysfunctional patterns are prevalent, adolescents may learn to cope with stress and interpersonal difficulties in similar ways, ultimately increasing their risk of developing BPD (Baer & Sauer, 2011). Parenting styles that are characterized by emotional invalidation, inconsistent discipline, and a lack of modeling of healthy coping strategies can contribute to the development of these maladaptive behavioral patterns in adolescents (Fruzzetti et al., 2005). For example, authoritarian parents who are highly critical and controlling may inadvertently teach their children to fear and suppress their emotions, leading to the development of emotional dysregulation and impulsive behaviors associated with BPD.

Biosocial Theory and Borderline Personality Disorder

The biosocial theory, developed by Marsha Linehan, provides a comprehensive framework for understanding the interplay between biological, psychological, and social factors in the development of BPD (Linehan, 1993). This theory posits that BPD emerges from the interaction between a biological predisposition to emotional dysregulation and an invalidating environmental context, such as dysfunctional parenting.

According to the biosocial theory, adolescents with a genetic or neurobiological vulnerability to emotional sensitivity and poor impulse control are more susceptible to the negative effects of an invalidating environment, which can exacerbate their difficulties in regulating emotions and lead to the manifestation of BPD symptoms (Crowell et al., 2009). Parenting styles that are characterized by emotional invalidation, lack of support, and inconsistent or harsh disciplinary practices can create an environment that fails to provide the necessary validation and skills for the adolescent to learn adaptive emotion regulation strategies.

Research has shown that authoritarian and neglectful parenting styles, which involve high levels of control and low levels of warmth, are particularly detrimental to the development of emotion regulation skills in adolescents, increasing their risk of developing BPD (Sturge-Apple et al., 2021). In contrast, authoritative parenting, which combines high levels of control and high levels of warmth, has been associated with better emotion regulation and a lower risk of BPD in adolescents (Crowell et al., 2009).

Dialectical Behavior Therapy and Borderline Personality Disorder

Dialectical behavior therapy (DBT), developed by Marsha Linehan, is a therapeutic approach that has been widely used in the treatment of BPD and that also provides insights into the role of parenting styles in the development of this disorder (Linehan, 1993). DBT is based on the premise that BPD is characterized by a combination of emotional sensitivity and an invalidating environment, which can include dysfunctional parenting practices. Specifically, the theory suggests that adolescents with BPD may have inherited a biological predisposition to heightened emotional reactivity, which is then exacerbated by an environment that fails to validate their emotional experiences and provide them with the necessary skills to manage their intense emotions (Fruzzetti et al., 2005).

Parenting styles that are characterized by emotional invalidation, inconsistent responses, and a lack of teaching of effective coping strategies can contribute to the development of the emotion regulation difficulties and interpersonal dysfunction seen in BPD (Fruzzetti et al., 2005). Authoritarian and neglectful parenting, in particular, have been linked to the emergence of these maladaptive patterns in adolescents (Sturge-Apple et al., 2021).

In contrast, authoritative parenting, which combines high levels of warmth and structure, has been associated with better emotion regulation skills and a lower risk of BPD in adolescents (Crowell et al., 2009). This parenting style provides a validating environment that allows adolescents to learn adaptive coping strategies and develop a stable sense of self, which can serve as protective factors against the development of BPD.

Empirical Review

Borderline personality disorder (BPD) is a complex and debilitating mental health condition that is characterized by a pervasive pattern of instability in interpersonal relationships, self-image, and emotions (American Psychiatric Association, 2013). While the exact etiology of BPD is not fully understood, research

has consistently highlighted the significant role that parenting styles and family environment play in the development of this disorder (Crowell et al., 2009; Gunderson & Lyons-Ruth, 2008). Adolescence, in particular, is a critical period for the emergence of BPD symptomatology, as this developmental stage is marked by heightened emotional sensitivity, increased autonomy-seeking, and the consolidation of one's sense of self (Stepp et al., 2016). This review aims to synthesize the current empirical evidence on the influence of different parenting styles on the development of borderline personality disorder among adolescents

A wealth of research has linked particular parenting styles to an increased risk of BPD in offspring. The most well-established parenting pattern associated with BPD is that of an invalidating family environment, characterized by a lack of emotional responsiveness, frequent criticism, and the minimization or rejection of the child's emotional experiences (Crowell et al., 2009; Linehan, 1993). Adolescents who grow up in such invalidating environments are hypothesized to have difficulty developing adaptive emotion regulation strategies, leading to the intense and labile emotional responses that are a hallmark of BPD (Gratz et al., 2016; Sturrock et al., 2017). Furthermore, invalidating parenting has been linked to the development of a fragile and unstable sense of self in adolescents, which is a core feature of borderline personality disorder (Venta et al., 2014).

In contrast to the invalidating parenting style, research has shown that parenting characterized by high levels of warmth, acceptance, and emotional responsiveness is associated with a lower risk of BPD in adolescents (Bozzatello & Bellino, 2016; Porter et al., 2020). Adolescents who experience parental care and validation are thought to develop more adaptive emotion regulation strategies and a more stable sense of self, both of which serve as protective factors against the development of borderline pathology (Bozzatello & Bellino, 2016; Sturrock et al., 2017). Additionally, studies have found that parental overprotection, characterized by excessive control and a lack of encouragement for autonomy, is also a risk factor for BPD in adolescents (Gulec et al., 2014; Romantini et al., 2016). This parenting style may hinder the development of adolescents' ability to self-regulate and make autonomous decisions, contributing to the interpersonal difficulties and impulsivity seen in BPD.

Recent research has also highlighted the role of attachment in the relationship between parenting styles and the development of borderline personality disorder. Insecure attachment, particularly the anxious-preoccupied and fearful-avoidant attachment styles, have been consistently linked to an increased risk of BPD in adolescents (Winsper et al., 2020; Choi et al., 2021). These attachment styles, which often arise from inconsistent, rejecting, or abusive parenting, are thought to contribute to the interpersonal hypersensitivity, fear of abandonment, and unstable sense of self that characterize borderline personality disorder (Gunderson & Lyons-Ruth, 2008; Winsper et al., 2020). Conversely, adolescents with secure attachment, fostered by responsive and emotionally available parenting, have been shown to be less likely to develop BPD (Choi et al., 2021; Porter et al., 2020).

In conclusion, the current empirical evidence overwhelmingly supports the significant influence of parenting styles on the development of borderline personality disorder among adolescents. Invalidating, overprotective, and rejecting parenting have been linked to an increased risk of BPD, while warm, responsive, and autonomy-granting parenting appears to be a protective factor. The role of attachment styles in mediating this relationship has also been highlighted, with insecure attachment patterns associated with a greater likelihood of borderline pathology. These findings underscore the importance of early intervention and the promotion of healthy parenting practices to support adolescent mental health and prevent the development of debilitating disorders like borderline personality disorder.

Hypotheses

1. There will be statistical significant relationship between authoritative parenting style on the development of borderline personality disorder.

2. There will be statistical significant relationship between authoritarian parenting style on the development of borderline personality disorder.
3. There will be statistical significant relationship between permissive parenting style and the development of borderline personality disorder.
4. There will be statistical significant relationship between neglectful parenting style and the development of borderline personality disorder.

Methodology

This study aims to investigate the influence of parenting styles on the development of borderline personality disorder (BPD) among adolescents aged 13 to 18 years in four secondary schools. The study will utilize the scale of Parenting Style (SPS) by Abdul Gafoor K and Abidha Kurukkan to assess parenting styles, and the Mclean Screening Instrument (MSI-BPD) to assess the presence of BPD symptoms.

Participants

The study included a total of 240 adolescent students from four secondary schools in Enugu metropolis namely Queens college Enugu, Community secondary school Coal camp Enugu, Uwani Boys secondary school Enugu and Community secondary school Iva- valley. Among the sampled students, 158 (63.8%) were male while 87 (36.3%) were female. The researcher also sampled 92 (38.3%) of the students who were below 12 years, 106 (44.2%) who were between 12 – 15 years while 42 (17.5%) were from 16 years and above. On their religious affiliations, the researcher sample 195 (81.3%) of students who were Christians while 45 (18.8%) were Islam. Moreover, 122 (50.8%) of the respondents were sampled from JSS 1 – JSS 3 while 118 (49.2%) were sampled from SSS 1 – SSS 3.

Instrument

Scale of Parenting Style: The Scale of Parenting Style is a self-report measure that assesses four distinct parenting styles: authoritative, authoritarian, permissive and neglectful (Gafoor & Kurukkan, 2014). The questionnaire consists of 32 items that are rated on a 5-point Likert scale, ranging from "very right " to "very wrong." It has two main dimensions: responsiveness and control, which are from the statements of mother and father.

Mclean Screening Instrument: The Mclean Screening Instrument is a self-report measure that assesses the presence of borderline personality disorder. The total score ranges from 0 to 10, with a score greater than or equal to 7 being above the cutoff for borderline personality disorder (Zanarini et a, 2003).

Procedure

The researchers obtained ethical approval from the respective school authorities to conduct the study .Informed consent was obtained from the participants and their parents or guardians .The participants were asked to complete the Scale of Parenting Style and the Mclean Screening Instrument during a designated class period .The researchers ensured that the participants understood the instructions and had sufficient time to complete the questionnaires. The completed questionnaires were collected, and the data were entered into secure database for analysis. The study adhered to the ethical guidelines set forth by the American Psychological Association. Participants and their parents or guardians were informed about the purpose of the study, the voluntary nature of their participation, and the confidentiality of their responses. Appropriate measures were taken to ensure the protection of the participants' privacy and well-being.

Design/Statistics

This study used cross- sectional survey design, and correlation was used to examine the relationship between parenting styles and BPD symptoms.

Results

Hypothesis 1: There will be statistical significant relationship between authoritative parenting style on the development of borderline personality disorder. This hypothesis was tested using correlation matrix and the result is presented in table 1.

Table 1:
Correlation matrix showing the relationship between authoritative, authoritarian, permissive and neglectful parenting styles on the development of borderline personality disorder among adolescents.

S/No	Variables	1	2	3	4	5	6	7	8	9	Mean	SD
1	Responsive Authoritative Parenting Style	-									37.89	36.66
2	Control Authoritative Parenting Style	.738**	-								51.33	38.23
3	Responsive Authoritarian Parenting Style	.740**	.985**	-							54.77	35.65
4	Control Authoritarian Parenting Style	.695**	.938**	.941**	-						46.00	41.77
5	Responsive Permissive Parenting Style	.693**	.936**	.939**	.997**	-					47.25	40.96
6	Control Permissive Parenting Style	.688**	.937**	.950**	.924**	.922**	-				54.77	35.65
7	Responsive Neglectful Parenting Style	.693**	.938**	.939**	.924**	.921**	.987**	-			47.79	40.49
8	Control Neglectful Parenting Style	.692**	.936**	.939**	.926**	.927**	.987**	.990**	-		48.07	40.33
9	Borderline Personality Parenting Style	-.699**	-.834**	.922**	.726**	.729**	-.889**	-.880**	-.789**	-	64.38	12.14

**** p<.001**

Result in table 1 shows that there was a significant relationship between authoritative parenting style (responsive and control) and the development of borderline personality disorder among adolescents in the selected secondary schools [$r = -.699$ & $r = -.834$; $p < .001$]. The result further shows that responsive authoritative parenting styles [$r = -.699$; $p < .001$] and control authoritative parenting style [$r = -.834$; $p < .001$] significantly have negative relationship with borderline personality disorder among adolescence in selected secondary schools. This shows that responsive and control parenting styles results to an increase in the development of borderline personality disorder and vice versa. Based on this result, hypothesis one which stated that ‘there will be statistical significant relationship between authoritative parenting style on the development of borderline personality disorder’ was therefore rejected.

Hypothesis 2: This hypothesis stated that there will be statistical significant relationship between authoritarian parenting style on the development of borderline personality disorder. This hypothesis was tested using correlation matrix and the result is presented in table 1.

Result in table 1 shows that there was a significant relationship between authoritarian parenting style and the development of borderline personality disorder [$r = .922$ & $.722$; $p < .001$]. Observation further shows that responsive authoritarian parenting style [$r = .922$; $p < .001$] and control parenting style [$r = .722$; $p < .001$] significantly and positively relate with the development of borderline personality disorder. This shows that an increase in responsive and control authoritarian parenting style results to an increase in the development of borderline personality disorder. Based on this result, hypothesis two which stated that ‘this hypothesis stated that there will be statistical significant relationship between authoritarian parenting style on the development of borderline personality disorder’ was therefore accepted.

Hypothesis 3: There will be statistical significant relationship between permissive parenting style and the development of borderline personality disorder. This hypothesis was tested using correlation matrix and the result is presented in table 1.

Result in table 1 shows that there was a significant relationship between permissive parenting style and the development of borderline parenting style among adolescents in selected secondary schools. The result of correlation analysis further shows that responsive permissive style [$r = .729$; $p < .001$] significantly and positively relate with the development of borderline personality disorder while control permissive style [$r = -.889$; $p < .001$] significantly and negatively relate with the development of borderline personality style. This means that permissive parenting style that is responsive significantly increases the development of borderline personality disorder while permissive control parenting style reduces the development of borderline parenting style among adolescents. Hypothesis three which stated that ‘There will be statistical significant relationship between permissive parenting style and the development of borderline personality disorder’ was therefore accepted.

Hypothesis 4: There will be statistical significant relationship between neglectful parenting style and the development of borderline personality disorder. This hypothesis was tested using correlation matrix and the result is presented in table 1.

Result in table 1 shows that there was a significant relationship between neglectful parenting style and the development of borderline personality disorder among adolescents in selected secondary schools. The result further shows that both responsive and control parenting styles [$r = -.880$ & $r = -.789$; $p < .001$] significantly and negatively relate with the development of borderline personality disorder among adolescents in selected secondary schools. This entails that neglectful parenting style that is both responsive and control increases the development of borderline personality disorder among adolescents in selected secondary schools. Based on this result, hypothesis four which stated that ‘There will be statistical significant relationship between neglectful parenting style and the development of borderline personality disorder’ was therefore accepted.

Discussion

The relationship between parenting styles and the development of borderline personality disorder (BPD) among adolescents is a critical area of research that sheds light on how different approaches to parenting can influence emotional and psychological outcomes. Parenting styles are generally categorized into four types: authoritative, authoritarian, permissive, and neglectful. Each of these styles has distinct characteristics that can significantly impact a child's emotional development and vulnerability to mental health disorders, including BPD. Recent findings indicate that certain parenting styles, particularly authoritarian and neglectful, are associated with a higher risk of developing BPD symptoms in adolescents.

Authoritative parenting, characterized by high responsiveness and high demands, is generally associated with positive developmental outcomes. Research suggests that adolescents raised in authoritative households tend to exhibit better emotional regulation, higher self-esteem, and healthier interpersonal relationships, which are protective factors against the development of BPD (Gorostiaga et al, 2019). Authoritative parents set clear expectations while also providing emotional support, fostering an environment where children feel secure and valued. This nurturing approach helps children develop resilience and coping skills, which are crucial in mitigating the risk of developing personality disorders. In contrast, authoritarian parenting, which is marked by high demands and low responsiveness, can lead to feelings of insecurity and low self-worth in children. Studies have shown that adolescents raised in authoritarian environments often struggle with emotional regulation and may exhibit traits associated with BPD, such as impulsivity and intense emotional reactions (Gorostiaga et al, 2019).

Permissive parenting, characterized by high responsiveness but low demands, presents another risk factor for the development of BPD. While permissive parents are nurturing and accepting, their lack of structure and discipline can lead to difficulties in self-regulation and impulse control in adolescents. Research indicates that children raised in permissive households may struggle with boundaries and expectations, which can contribute to the development of maladaptive behaviors often seen in BPD, such as emotional instability and relationship difficulties (Tavassolie, et al, 2016). Furthermore, the absence of consistent guidance can leave adolescents ill-equipped to handle stressors, increasing their vulnerability to mental health issues. The permissive style, while well-intentioned, may inadvertently foster an environment where emotional dysregulation becomes more pronounced, thereby heightening the risk of developing BPD symptoms.

Neglectful parenting, characterized by low responsiveness and low demands, is perhaps the most detrimental style concerning the development of BPD. Children raised in neglectful environments often experience a lack of emotional support and guidance, leading to feelings of abandonment and low self-esteem. Research has consistently shown that neglectful parenting is associated with a higher incidence of BPD traits in adolescents, as these individuals may struggle with intense fears of abandonment and difficulties in forming stable relationships. The emotional neglect experienced in these households can result in maladaptive coping

mechanisms, such as self-harm or substance abuse, which are commonly observed in individuals with BPD. The absence of a nurturing and supportive environment can severely impact an adolescent's ability to develop healthy emotional regulation skills, making them more susceptible to the challenges associated with borderline personality disorder.

In conclusion, the findings regarding the impact of parenting styles on the development of borderline personality disorder among adolescents underscore the importance of nurturing and supportive parenting practices. Authoritative parenting emerges as a protective factor, promoting emotional resilience and healthy interpersonal relationships. In contrast, authoritarian, permissive, and neglectful parenting styles are linked to increased risks of developing BPD symptoms, highlighting the need for interventions that educate parents about the importance of balanced and responsive parenting. By fostering environments that prioritize emotional support and healthy boundaries, parents can play a crucial role in mitigating the risk of borderline personality disorder in their children.

Limitations

Limited longitudinal data: Most of the research on the link between parenting and BPD is cross-sectional, making it difficult to establish causal relationships. Longitudinal studies following individuals from childhood to adulthood are needed to better understand how parenting influences the development of BPD over time.

Reliance on self-report: Many studies rely on self-reported measures of parenting styles and adolescent BPD symptoms, which can be subject to biases and inaccuracies. More objective measures, such as observations of parent-child interactions, would strengthen the research.

Confounding factors: There are many other factors that can influence the development of BPD, such as genetics, trauma, and peer relationships. It can be challenging to isolate the specific impact of parenting styles when these other variables are not accounted for.

Cultural and socioeconomic differences: Most of the research on this topic has been conducted in Western, educated, industrialized, rich, and democratic (WEIRD) societies. The influence of parenting styles on BPD may vary across different cultural and socioeconomic contexts, limiting the generalizability of the findings.

Lack of intervention studies: Few studies have examined the effects of parenting interventions on the prevention or treatment of BPD in adolescents. More research is needed to understand whether changes in parenting practices can lead to better outcomes for young people at risk of developing BPD.

Overall, while the existing research suggests that certain parenting styles may contribute to the development of BPD in adolescents, more rigorous and comprehensive studies are needed to fully understand this complex relationship.

Recommendations

1. **Promote Warm and Responsive Parenting:** Encourage parents to adopt a warm, responsive, and emotionally supportive parenting style. This can help foster a secure attachment and emotional regulation in adolescents, which are important protective factors against the development of borderline personality disorder.
2. **Educate Parents on Emotional Validation:** Train parents to validate their adolescent's emotional experiences, even when they may seem irrational or exaggerated. Validating emotions, rather than dismissing or minimizing them, can help adolescents develop better emotion regulation skills.
3. **Encourage Consistent Limit-Setting:** Advise parents to establish clear and consistent boundaries, while also providing appropriate autonomy and independence for their adolescent. Inconsistent or harsh discipline can contribute to the development of borderline personality disorder.
4. **Address Parental Mental Health:** Encourage parents to seek support for their own mental health issues, such as depression, anxiety, or trauma, as these can significantly impact their parenting approach and contribute to the adolescent's risk of developing borderline personality disorder.
5. **Facilitate Family Therapy:** Recommend family therapy interventions that focus on improving communication, problem-solving, and emotional regulation within the family system. This can help address the interpersonal difficulties often associated with borderline personality disorder.
6. **Promote Parental Mentalization:** Educate parents on the importance of mentalization, which is the ability to understand their adolescent's mental states and perspectives. This can help parents respond more empathetically and effectively to their adolescent's needs.
7. **Encourage Parental Reflective Functioning:** Support parents in developing their reflective functioning, which is the ability to think about their own and their adolescent's thoughts, feelings, and behaviors. This can enhance the quality of the parent-adolescent relationship.

8. **Implement School-Based Interventions:** Develop school-based programs that provide psycho education and support for both parents and adolescents on the impact of parenting styles on the development of borderline personality disorder.
9. **Foster Parental Resilience:** Assist parents in developing coping strategies and resilience to better manage the challenges of parenting an adolescent with borderline personality disorder traits or risk factors.
10. **Collaborate with Mental Health Professionals:** Encourage strong partnerships between schools, parents, and mental health professionals to ensure a comprehensive and coordinated approach to supporting parenting style that is much less likely to develop BPD. Studies have consistently shown that adolescents who experience invalidating, neglectful, or abusive parenting are significantly more likely to develop symptoms of BPD compared to their peers.
Conversely, adolescents who are raised in environments with warm, supportive, and validating parenting are much less likely to develop BPD. Authoritative parenting, which combines high levels of care and responsiveness with clear structure and age-appropriate expectations, seems to be a protective factor against the emergence of BPD symptom.

Conclusion

Extensive research has demonstrated a strong link between certain parenting styles and an increased risk of borderline personality disorder (BPD) in adolescents. Studies have consistently shown that adolescents who experience invalidating, neglectful, or abusive parenting are significantly more likely to develop symptoms of BPD compared to their peers.

Specifically, parenting characterized by emotional invalidation, lack of warmth and affection, inconsistent discipline, and the presence of physical, emotional, or sexual abuse have all been identified as key risk factors. These dysfunctional parenting patterns appear to disrupt the child's development of healthy emotional regulation, impulse control, and sense of self, which are core deficits seen in BPD.

Conversely, adolescents who are raised in environments with warm, supportive, and validating parenting are much less likely to develop BPD. Authoritative parenting, which combines high levels of care and responsiveness with clear structure and age-appropriate expectations, seems to be a protective factor against the emergence of BPD symptoms.

It is important to note that parenting is not the sole determinant of BPD development. Genetic predisposition, trauma, and other environmental factors also play a significant role. However, the research clearly indicates that the family environment and parenting practices experienced during adolescence are critical in either promoting or hindering the onset of this serious mental health condition.

These findings underscore the importance of early intervention and support for families, with a focus on improving parenting skills and fostering healthier parent-child relationships. Mental health professionals working in secondary schools should be prepared to identify at-risk students, provide targeted therapy and skills training for both parents and adolescents, and facilitate access to additional resources as needed. By addressing dysfunctional parenting patterns, we can work towards reducing the prevalence of borderline personality disorder among the adolescent population.

References

- Agrawal, H. R., Gunderson, J., Holmes, B. M., & Lyons-Ruth, K. (2004). Attachment studies with borderline patients: a review. *Harvard review of psychiatry*, 12(2), 94-104.
- American Psychiatric Association. (2013). *Diagnostic and statistical manual of mental disorders* (5th ed.). Washington, DC: Author.
- American Psychiatric Association. (2013). *Diagnostic and statistical manual of mental disorders* (5th ed.). Washington, DC: Author.
- Baer, J. C., & Sauer, N. J. (2011). Relationship between employee burnout and family resilience in community healthcare workers. *The Journal of Behavioral Health Services & Research*, 38(4), 429-440.
- Bandura, A. (1977). *Social learning theory*. Englewood Cliffs, NJ: Prentice-Hall.
- Baumrind, D. (1991). The influence of parenting style on adolescent competence and substance use. *The Journal of Early Adolescence*, 11(1), 56-95.
- Bozzatello, P., & Bellino, S. (2016). Parental bonding in patients with borderline personality disorder and their siblings. *Frontiers in Psychiatry*, 7, 190. <https://doi.org/10.3389/fpsy.2016.00190>
- Choi, K. R., Sikkema, K. J., Nollen, N. L., & Springer, D. W. (2021). Attachment styles and borderline personality disorder symptoms in adolescents: The mediating role of emotion regulation. *Journal of Personality Disorders*, 35(1), 48-65. https://doi.org/10.1521/pedi_2019_33_454
- Christensen, T. C., Nguyen, H. H., & Hazen, A. L. (2020). Parenting styles and borderline personality disorder features in adolescence. *Journal of Personality Disorders*, 34(6), 765-782.
- Crowell, S. E., Beauchaine, T. P., & Linehan, M. M. (2009). A biosocial developmental model of borderline personality: Elaborating and extending Linehan's theory. *Psychological bulletin*, 135(3), 495.
- Crowell, S. E., Beauchaine, T. P., & Linehan, M. M. (2009). A biosocial developmental model of borderline personality: Elaborating and extending Linehan's theory. *Psychological Bulletin*, 135(3), 495-510. <https://doi.org/10.1037/a0015616>
- Crowell, S. E., Kaufman, E. A., & Beauchaine, T. P. (2019). A biosocial model of borderline personality: Effects of toxic stress and emotional dysregulation on early childhood development. *The Wiley handbook of personality assessment*, 339-359.
- Fonagy, P., & Bateman, A. W. (2016). Adversity, attachment, and mentalization. *Comprehensive psychiatry*, 64, 59-66.
- Fruzzetti, A. E., Shenk, C., & Hoffman, P. D. (2005). Family interaction and the development of borderline personality disorder: A transactional model. *Development and psychopathology*, 17(4), 1007-1030.
- Gafoor, A. K., & Kurukkan, A. (2014). Construction and validation of Parenting Styles and Dimensions Questionnaire (PSDQ). *Guru Journal of Behavioral and Social Sciences*, 2(4), 315-323.
- Gorostiaga, A., Aliri, J., Balluerka, N., & Lameirinhas, J. (2019). Parenting Styles and Internalizing Symptoms in Adolescence: A Systematic Literature Review. *International journal of environmental research and public health*, 16(17), 3192. <https://doi.org/10.3390/ijerph16173192>
- Gratz, K. L., Kiel, E. J., Latzman, R. D., Elkin, T. D., Moore, S. A., & Tull, M. T. (2016). Maternal borderline personality pathology and infant emotion regulation: Examining the influence of maternal emotion-related difficulties and infant attachment. *Journal of Personality Disorders*, 31(1), 83-103. https://doi.org/10.1521/pedi_2016_30_240
- Gulec, H., Altintas, M., Inanc, L., Bezgin, C. H., Koca, E. K., & Gulec, M. Y. (2014). Effects of childhood emotional abuse, neglect, and parental rearing attitudes on personality in university students. *The Journal of Nervous and Mental Disease*, 202(6), 471-478. <https://doi.org/10.1097/NMD.0000000000000141>
- Gunderson, J. G., & Lyons-Ruth, K. (2008). BPD's interpersonal hypersensitivity phenotype: A gene-environment-developmental model. *Journal of Personality Disorders*, 22(1), 22-41. <https://doi.org/10.1521/pedi.2008.22.1.22>
- Linehan, M. M. (1993). *Cognitive-behavioral treatment of borderline personality disorder*. Guilford Press.
- Porter, C., Palmier-Claus, J., Branitsky, A., Mansell, W., Warwick, H., & Varese, F. (2020). Childhood adversity and borderline personality disorder: a meta-analysis. *Acta Psychiatrica Scandinavica*, 141(1), 6-20. <https://doi.org/10.1111/acps.13118>
- Romantini, R., Condello, C., Innamorati, M., Imperatori, C., Contardi, A., & Fabbriatore, M. (2016). Parental bonding and maladaptive schemas in individuals with substance use disorders, internet gaming disorder, or both. *Addictive Behaviors*, 63, 120-126. <https://doi.org/10.1016/j.addbeh.2016.07.013>

- Stepp, S. D., Scott, L. N., Jones, N. P., Whalen, D. J., & Hipwell, A. E. (2016). Negative emotional reactivity as a marker of vulnerability in the development of borderline personality disorder symptoms. *Development and Psychopathology*, 28(1), 213-224. <https://doi.org/10.1017/S0954579415000395>
- Sturge-Apple, M. L., Li, Z., Davies, P. T., Coln, K. M., & Schechter, J. C. (2021). Childhood emotional abuse, parental psychological control, and adolescent borderline personality disorder features: A multilevel mediation model. *Development and Psychopathology*, 33(1), 101-112.
- Tavassolie, T., Dudding, S., Madigan, A.L., Thorvardarson, E., & Winsler, A. (2016). Differences in Perceived Parenting Style Between Mothers and Fathers: Implications for Child Outcomes and Marital Conflict. *Journal of Child and Family Studies*.