# What do we know about how children develop when they have a parent with BPD?

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Presentation for NEA-BPD on March 4, 2018





#### A little bit about me....

- Assistant professor at the University of Oregon
- Licensed psychologist
- Interested in children whose parents have mental health issues; emotion regulation, dialectical behavior therapy



#### Borderline Personality Disorder

- Prevalence of BPD is estimated to be between 1-6% of the population. And yet individuals with BPD comprise:
  - 20% of all patients on psychiatric inpatient units
  - 40% of mothers referred to CPS have BPD symptoms

A single symptom of BPD can cause considerable impairment for the individual

#### A context of high risk for children



## Children's psychopathology in the context of maternal BPD/ symptoms

- Recent systematic review identified 11 studies that have examined childhood and adolescent psychopathology outcomes in the context of maternal BPD/BPD symptoms
  - Children had higher rates of internalizing and externalizing problems
    - Even compared to children of mothers diagnosed with other disorders

## Traditional Clinical Formulations of BPD Symptoms

#### Interpersonal Chaos Affective Instability Behavioral Identity Dysregulation Disturbance

#### More Modern formulations

- Difficulties with...
  - Executive functioning
  - Theory of mind
  - Emotion regulation

#### Some definitions...

- Executive functioning: our ability to plan, organize, and pay attention in order to achieve a goal
- Theory of Mind: our ability to know or infer what other people may think, feel, or desire
- **Emotion Regulation:** our ability to change our emotions or emotional expressions in a given context

Transdiagnostic features of BPD

Developmental Tasks of the preschool period

**Emotion** 

Regulation

Emotion Regulation

Theory of

Theory of Mind

Executive Functioning

Mind

Executive Functioning

Difficulties predict later mental health symptoms in children

#### A recent study we completed...

- □ I) Examined the relation between preschoolers' executive functioning and maternal BPD symptoms.
- II) Examined the relation between preschooler's theory of mind and maternal BPD symptoms.
- □ III) Examined the relation between preschooler's emotion regulation and maternal emotion dysregulation.

#### Participants

68 mother-child dyads

0-1 2-4 5-9 BPD Symptoms 27% 24% 49%

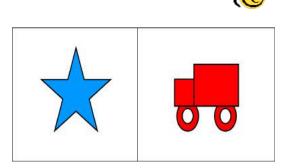
- All children were 3 or 4
- Predominately low income sample
- 63% of children were white

#### Maternal Measures

- Borderline personality disorder symptoms
  - Personality Assessment Inventory-Borderline Subscale
  - 30% mothers scored +1SD mean
  - 15% mothers scored above the clinical cut-off
- Emotion Dysregulation
  - Difficulties in Emotion Regulation Scales
- Depression symptoms
  - Center for Epidemiological Studies-Depression
  - $\blacksquare$  M=15.5 (16 is cut-off for those at risk for clinical depression)

## Child measures: Executive functioning

- Cognitive Inhibitory Control (Day/Night)
- Behavioral Inhibitory Control (Bear/Dragon)
- Attention Shifting & Focusing (Card Sort)
- Delay Ability (Delay of gratification)



#### Child Measures: Theory of Mind

- Location False belief
- Content False Belief
- Affect Perspective Taking
- Emotion Knowledge



#### Child Measures: Emotion Regulation

#### Locked Box Task

 Preschoolers asked to work alone for 2 minutes to retrieve a toy using an incorrect set of keys



#### Results

■ Before we review results, are there any guesses to which areas may be compromised in children whose mothers have elevated BPD symptoms?

#### Aim I results

- Examine the relation between preschoolers' executive functioning and maternal BPD symptoms.
- Magnitude of direct associations (r)

Maternal BPD with	Cog. Inh Control	Beh. Inh. Control	Attn. Shifting & Focusing	Delay Ability
	31*	09	35**	23

#### Aim I results continued

Executive Functioning	Cognitive Inhibitory Control		Behav Inhib con	itory	Shiftir	Attention Shifting and Focusing		Ability
	β	95% CI	β	95% CI for B	β	95% CI	β	95% CI
Income	.13	13 - .38	.12	09 - .32	.12	07 - .31	.16	10 - .41
Age	.03	24 - .25	.44**	.24 - .64	.20	01 - .40	.13	14 - .40
Cognitive Ability	.33*	.04 - .62	.20	04 - .43	45**	.25 - .66	01	30 - .28
Maternal Depression Symptoms	.16	15 - .47	.16	08 - .40	.01	22 - .24	.12	19 - .43
Maternal Borderline Personality Disorder Symptoms	05	37 - .27	27*	52 - 02	18	41 - .06	27 <sup>t</sup>	58 - .04
$R^2$	~		.47	**	.50**			12

All DV's entered simultaneously

#### Aim II results

- Examine the relation between preschooler's theory of mind and maternal BPD symptoms.
- Magnitude of direct associations (r)

Location False belief	False Belief		Emotion Knowledge
12	.11	32**	11

#### Aim II results continued

Theory of Mind	Location False			t False	Affect		Emotion	
	Belief		Belief		Perspective		Knowledge	
					Tal	king	ing	
Income	.22*	.01 -	.16	04 -	.11	11 -	.00	24 -
		.44		.36		.32		.24
Age	.17	07 -	.40**	.19 -	.43**	.22 -	.23	01 -
		.40		.60		.64		.48
Cognitive Ability	.46**	.23 -	.34**	.12 -	.11	13 -	.35**	.09 -
		.69		.60		.36		.60
Maternal Depression	.03	23 -	.17	07 -	.02	24 -	.07	21 -
Symptoms		.30		.41		.29		.36
Maternal Borderline	.10	18 -	06	31 -	23 <sup>t</sup>	50 -	09	38 -
Personality Disorder		.37		.19		.04		.21
Symptoms								
$R^2$	.45**		.38	** .2		<u></u> **	.36**	

All DV's entered simultaneously

Table 1. Standardized regression coefficients (β) and proportion of variance explained at the final (full) model step: associations of maternal emotion dysregulation and observed child ER

.04 .07 .07 .19 1	19 70 91 13	S	.164 .146 .365*		nger 168 347* 173		nxiety .093 .218		
.07 .19 1	70 91 13		.146 .365*	(	347*				
.19	91 13		.365*				.218		
1	13				172				
			- 1 -		175		046		
1	75		219		242		.215		
			219		.248		.070		
	Actions								
Defiance	Proble	m Solve	Distract	Self-S	oothe	Play Activity	Talk		
.169	.1	46	.098	.14	16	.194	.046		
190	(	006	.164	0	79	026	049		
172	2	90*	.123	.33	1*	.397**	.163		
.193	.Û	.012		0	91	.337*	.063		
.449**	1	178	.052	0	95	.077	.104		
Emotion-Action Sequences									
Anxiety-PS	Anger-PS	Sad-PS	Happy-PS	Happy-Talk	Sad-Talk	Anxiety-Talk	Sad-Distract		
.204	.004	.081	.157	.033	.254	.478	.221		
.487	001	.022	.124	051	156	627	.301		
.096	042	020	031	.112	450*	138	.368		
195	.060	.311	078	.160	550**	.435	228		
238	.049	.109	379	.100	.124	.352	214		
	.169 190 172 .193 .449** Anxiety-PS .204 .487 .096 195	.169 .119001722 .193 .0 .449**7  Anxiety-PS Anger-PS .204 .004 .487001 .096042195 .060	.169 .146190006172290* .193 .012 .449**178  Anxiety-PS Anger-PS Sad-PS .204 .004 .081 .487001 .022 .096042020195 .060 .311	Defiance         Problem Solve         Distract           .169         .146         .098          190        006         .164          172        290*         .123           .193         .012        199           .449**        178         .052           Emotion-A           Anxiety-PS         Anger-PS         Sad-PS         Happy-PS           .204         .004         .081         .157           .487        001         .022         .124           .096        042        020        031          195         .060         .311        078	Defiance         Problem Solve         Distract         Self-S           .169         .146         .098         .14          190        006         .164        0          172        290*         .123         .33           .193         .012        199        0           .449**        178         .052        0           Emotion-Action Sequen           Anxiety-PS         Anger-PS         Sad-PS         Happy-PS         Happy-Talk           .204         .004         .081         .157         .033           .487        001         .022         .124        051           .096        042        020        031         .112          195         .060         .311        078         .160	Defiance         Problem Solve         Distract         Self-Soothe           .169         .146         .098         .146          190        006         .164        079          172        290*         .123         .331*           .193         .012        199        091           .449**        178         .052        095           Emotion-Action Sequences           Anxiety-PS         Anger-PS         Sad-PS         Happy-PS         Happy-Talk         Sad-Talk           .204         .004         .081         .157         .033         .254           .487        001         .022         .124        051        156           .096        042        020        031         .112        450*          195         .060         .311        078         .160        550**	Defiance         Problem Solve         Distract         Self-Soothe         Play Activity           .169         .146         .098         .146         .194          190        006         .164        079        026          172        290*         .123         .331*         .397**           .193         .012        199        091         .337*           .449**        178         .052        095         .077           Emotion-Action Sequences           Anxiety-PS         Anger-PS         Sad-PS         Happy-PS         Happy-Talk         Sad-Talk         Anxiety-Talk           .204         .004         .081         .157         .033         .254         .478           .487        001         .022         .124        051        156        627           .096        042        020        031         .112        450*        138          195         .060         .311        078         .160        550**         .435		

Abbreviation: PS = Problem Solve

#### Discussion of overall findings

- There were not widespread deficits in children's EF and ToM as related to maternal BPD symptoms
- Rather, the domains of EF and ToM that were significantly related to maternal BPD symptoms appeared to be localized and resembled actual BPD symptoms
  - Behavioral control problems (Impulsivity)
  - Affect perspective taking (Interpersonal ups-and-downs; affective instability)

### Comparing findings to other contexts of risk

- ☐ The magnitude of correspondence between maternal BPD symptoms and children's EF and ToM was similar to other contexts of risk:
  - Poverty
  - Foster care/maltreated samples
- Further supports the idea that having a mother with elevated BPD symptoms is a significant risk factor for various aspects of psychosocial development

#### Limitations and Future Directions

- Cross-sectional design
  - Future work should focus on growth patterns in children as related to emerging psychopathology
- Modest sample size
  - Larger and more diverse samples needed
- Treatment development efforts are needed to help these dyads

#### Acknowledgements

- 2013 Victoria S. Levin Grant for Early Career Success in Young Children's Mental Health Research
- University of Oregon

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Questions?