Associations of Maternal Borderline Personality Disorder Symptoms with Parenting Stress, Maternal Warmth, and Child Externalizing Problems

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INTRODUCTION

Borderline personality disorder (BPD) is a psychological disorder characterized by impulsivity, negative affect, and emotional and interpersonal dysregulation, all of which can directly impact the experience of being a parent. Mothers exhibiting symptoms of BPD are at risk of experiencing higher levels of parenting stress and may show reduced levels of warmth towards their children¹. Elevated levels of BPD symptoms², high levels of parenting stress³, and low levels of maternal warmth⁴ have all been associated with higher levels of externalizing behavior problems in children. The purpose of this study was to further understand the pathway through which elevated symptoms of maternal BPD are associated with higher levels of externalizing problems in their children.

Specifically, we hypothesized:

- 1. Elevated symptoms of BPD in mothers will be a) associated with higher levels of parenting stress and b) associated with lower levels of warmth towards their children.
- 2. Elevated symptoms of BPD in mothers will be associated with higher levels of behavior problems in children.
- 3. Maternal BPD symptoms will indirectly influence child behavior problems through their associations with a) parenting stress and b) maternal warmth.

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METHODS

Sample

68 mother-preschooler dyads

M = 48 months, SD = 7.6 months; Mothers with BPD symptoms were oversampled

Self-Report Questionnaires

Personality Assessment Inventory, Borderline Subscale

Parental Stress Scale Range = 21-68M = 38.78, SD = 10.20 Child Behavior Checklist, Externalizing Subscale Range = 0-43

M = 16.28, SD = 9.49

Range = 0-56M = 22.12, SD = 12.41

Maternal Warmth

Observer ratings during a 7-minute task where the mother was verbally coaching her child on constructing a difficult figure out of Legos. Range = 4.57-9.86 on a 10-point scale

Positive Affect

Behavioral and verbal expressions of happiness, comfort, connection, and warmth towards the child

Interactiveness

Frequency of verbal and non-verbal engagement with the child

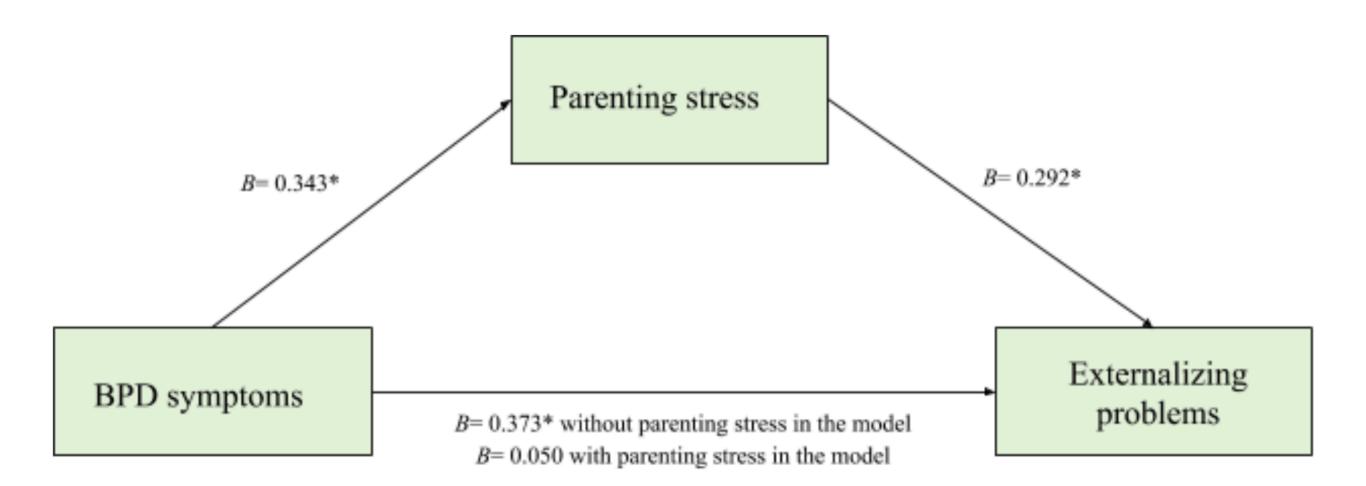
RESULTS

A series of parallel regression analyses were conducted to analyze the direct relationships between levels of maternal BPD symptoms, parenting stress, maternal warmth, and child externalizing problems. The results support that:

- 1. Elevated maternal BPD symptoms are significantly associated with increased levels of parenting stress (B= 0.343, 95%CI [0.141, 0.545], t(64)= 3.395, p= 0.001).
- 2. Elevated maternal BPD symptoms are not significantly related to levels of maternal warmth (B= -0.019, 95%CI [-0.048, 0.009], t(59)= -1.334, p=0.187).
- 3. Elevated maternal BPD symptoms are significantly associated with increased levels of child externalizing problems (B= 0.373, 95%CI [0.202, 0.544], t(62)= 4.358, p< 0.001).
- 4. Increased levels of parenting stress are significantly associated with increased levels of child externalizing problems (B= 0.292, 95%CI [0.080, 0.504], t(62)= 2.753, p= 0.008).

A bias corrected bootstrapping method of 5,000 samples was then used to test the indirect pathway of elevated maternal BPD symptoms on child externalizing problems, through their influence on parenting stress levels. The results support that this pathway is nonsignificant (B= 0.050, 90%CI [-0.0307, 0.1250]).

See below for a representation of the relationships discussed above.



SUMMARY

- Elevated levels of maternal BPD symptoms are associated with increased levels of parenting stress, as well as with increased levels of externalizing problems in children.
- However, parenting stress does not mediate the relationship between elevated BPD symptoms and externalizing problems.
- Additionally, levels of maternal warmth were not significantly associated with maternal BPD symptoms, meaning that these mothers were still able to demonstrate warm, high quality parenting to their children.
- This information can inform future clinical interventions, which could benefit from directly targeting maternal BPD symptoms or children's behaviors.

