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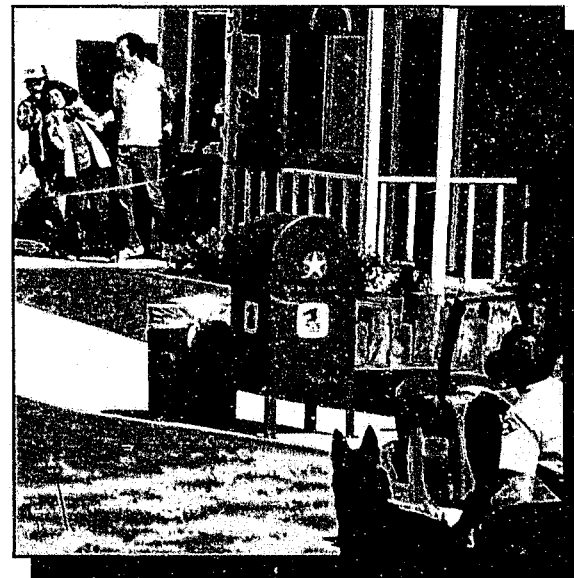
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*Cover: This issue focuses on the demands and challenges that hostage negotiations place on law enforcement professionals.*

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# The Borderline Personality Negotiation Strategies

By  
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Since the 1970s, negotiation has been considered an effective first response to hostage and barricade situations. However, the volatility and complexity of these incidents require a planned and prepared response. Effective negotiation training courses include a focus on the psychological classification of the hostage taker. This classification allows negotiators to understand the "style" and motivation of the subject, and therefore, choose a negotiation strategy appropriate for the situation.

Research indicates that mentally disturbed subjects are involved in over 50 percent of all hostage-taking incidents.<sup>1</sup> The actual figure may be much higher because hostage takers with mental disorders frequently exhibit the characteristics of more than one classification and may be classified according to the circumstances of the situation.<sup>2</sup> For example, a subject with an antisocial personality disorder (a sociopath) who takes hostages during a failed armed robbery attempt may be classified as a "criminal trapped



during the commission of a crime" rather than a mentally disturbed hostage taker.

A growing wealth of knowledge concerning negotiation strategies for paranoid schizophrenics and persons with inadequate or antisocial personalities exists.<sup>3</sup> However, discussion of subjects suffering from *borderline* personality disorder (BPD) has been limited. This article discusses the *borderline* per-

sonality disorder and focuses on negotiation strategies for dealing with "borderlines" involved in crisis situations.

## DEFINITION

The American Psychiatric Association (APA) describes a personality disorder as a collection of long-term character traits that significantly interfere with an individual's ability to relate to others

or function in a job. These traits are "inflexible and maladaptive" and generally cause considerable personal discomfort and anxiety.<sup>4</sup>

Persons suffering from borderline personality disorder live "on the edge" between the worlds of rational and irrational behavior. While they may exhibit normal characteristics and appear at times to be well-adjusted, their personalities do not adapt well to external stimuli or situations they find threatening. Hence, they live in or near a constant state of crisis.

## IDENTIFYING BORDERLINES

Because their reactions often involve actual or threatened violence (either directed at themselves or significant others in their lives), borderlines generally have frequent contact with law enforcement. This may be in the form of domestic disturbance calls or in response to suicide threats. And since substance abuse tends to be common among individuals suffering from borderline personality disorder, they may possess illicit drugs. They may also have a history of recurrent shoplifting. Some borderlines may even be involved in self-degrading criminal activity, such as prostitution.

The key traits of persons suffering from BPD include manipulative behavior, rapid mood swings, frequent suicide threats or gestures, and an extreme dependence on others. These individuals generally dwell within destructive interpersonal relationships, and although they may appear adult, in many ways they behave as angry, manipulative adolescents. BPD is diagnosed more frequently in females.



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## FEATURES OF BPDs

According to the Diagnostic and Statistical Manual of Mental Disorders (DSM-III), the essential feature of borderline personality disorder is a "pervasive pattern of instability of self-image, interpersonal relationships, and mood, beginning by early adulthood and present in a variety of contexts."<sup>5</sup> The disorder encompasses several aspects.

### Unstable Self-image

Individuals suffering from borderline personality disorder have significant difficulty maintaining a solid sense of their own identity. They consistently demonstrate uncertainty concerning important life issues, such as personal values, career choices, and long-term goals. This uncertainty extends to their relationships with others; they often exhibit uncertainty about the types of friends or lovers they wish to have. As adults, they may even question their sexual orientation.

Their self-perception, as well as the image that they present to others, constantly shifts. As a result, they cannot control or direct their energies toward achieving any specific goal or purpose.

Instead, they remain scattered and impulsive. Typically, longstanding feelings of emptiness and boredom accompany this instability. Again, the comparison to adolescence applies here. As adults, they still struggle with the basic adolescent questions: "Who am I?" "What am I?" "What should I do?"

An additional component of this unstable sense of identity manifests as an intense and frightening dependence on others. Negotiators should be familiar with the two primary features of this dependence.

The first is a constant need for support and reassurance from others. For example, during crisis negotiations, they repeatedly ask to be reassured that "everything will be all right," or for validation of their viewpoint with such statements as, "I am right, aren't I?"

The second feature involves an overwhelming fear of separation, loss, or abandonment. The anxiety is so strong that borderlines may perceive rejection even when no such message is intended. However, borderlines also resent those on whom they become dependent, since this dependency exposes their own weaknesses. When fears of abandonment or loss are triggered, the resulting reaction may range from idealization of the person they fear losing to intense anger or self-destructive behavior.

### Unstable Interpersonal Relationships

Understandably, interpersonal relationships cause considerable confusion for persons suffering from borderline personality disorder. In addition to the factors mentioned above, borderlines tend to seek out others who *need* them in order to decrease the likelihood of desertion. However, the anxiety from these fears of abandonment continues to build and must eventually be released.

The first sign of this release is typically a sulking depression wherein the borderline broods to retaliate against those who have not provided "enough" support and reassurance. This usually results in forcing others to assume the burden of taking care of them, while simultaneously being made to feel considerable guilt.

Gestures or threats of suicide, as well as explosive outbursts of rage, may be secondary signals that borderlines feel scared or threatened. They want others to compensate for not demonstrating sufficient concern.



It is during this stage that borderlines often come to the attention of law enforcement through barricaded suicide attempts and domestic hostage taking or through complaints from neighbors. Demands and statements generally focus on reconciling relationships, child custody, or exacting revenge on others. Borderlines may make such statements as, "I want him to go through the same hell that he's been putting me through." Borderline subjects may even threaten their children if they believe they will not be allowed to retain custody.

In this way, borderlines rely extensively on manipulation to achieve desired results. Predictably, therefore, their relationships are intense and unstable. As in other areas of their lives, borderlines alternate between extremes in relating to others. They may idealize someone at one moment and then devalue and loathe the person the next.

### Unstable Mood

In addition, borderline subjects cannot maintain a neutral or normal mood. Their emotional states remain very fragile and highly sensitive. Borderlines do not cycle between highs and lows, nor do they show regular mood swings. Rather, their moods shift rapidly and intensely. Typically, a somewhat depressed disposition dominates, with interspersed displays of anger, anxiety, irritability, and euphoria. Emotions tend to be quite confusing for borderlines, and they may simultaneously experience thoughts and feelings that directly contradict one another. This proves especially true with feelings of love, guilt, or anger.

Borderlines also exhibit very poor control over their emotions and impulses. Consequently, they often engage in potentially self-damaging or high-risk activities. These may include sexual promiscuity, shoplifting, substance abuse, excessive spending, binge eating, or persistent reckless driving. Intense self-derogation creates a high risk for suicidal or self-mutilating behavior.

### Additional Traits

In addition to these primary clinical features, background examinations of these subjects generally reveal a history of poor achievement in pursuits related to academics, marriage, and career. Often, failure in these endeavors occurs despite the subject's actual level of intelligence or ability (which may be quite high). Borderlines generally appear to cause their own difficulties.

Early family background will probably reflect a history of emotional, physical, and/or sexual

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abuse. In addition, their histories may include brief periods of psychotic behavior or a loss of contact with reality.<sup>6</sup>

## LAW ENFORCEMENT RESPONSE

As stated, borderlines usually come to the attention of police through barricade or domestic hostage incidents. During crisis negotiations, their demands tend to focus on gaining the attention of others, especially family members or lovers. Given their instability, they may even demand personal attention from prominent personalities, such as the mayor, the chief of police, or well-known members of the media.

However, their real needs are more expressive than material. In other words, borderlines bargain for support and recognition rather than material items, such as money or vehicles.

Hostage incidents arising from interrupted criminal activity may be an exception. Here, borderlines may begin by making unreasonable demands for material items or for unconditional release. As negotiators gather more intelligence, however, traits distinguishing the subject as borderline emerge. In these situations, negotiators can typically provide support and empathy—thus responding to the *real* needs of the subject—and eventually resolve the incident by making nominal concessions.

However, during barricade situations, especially those involving suicidal threats, borderlines tend to be more direct about their needs for the attention of significant others. Depending on the type of crisis, borderlines may actually desire some-

one else to “make up” for having hurt them, or they may be in a self-degrading mode in which they continually ask for forgiveness. In this regard, borderlines resemble persons suffering other mental disorders—most notably the inadequate personality. However, borderline personality disorder is much more severe, and subjects suffering from this condition generally behave less predictably and in a more unstable manner.

## NEGOTIATION GUIDELINES

Because of the unstable and unpredictable nature of persons with borderline personality disorder, extreme caution must be exercised when negotiating with these subjects. Borderlines tend to transfer the hostility and dependency they

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harbor in their own personal relationships directly to negotiators, who then become targets of pent-up anxiety and emotion.

When faced with crisis situations involving persons with borderline personality disorder, negotiators should monitor their own stress levels and emotional responses. Borderline subjects can effectively evoke in others the very emotions that they experience. At least two negotiators (or a psycho-

logical consultant) should be present to ensure objective feedback about the stress level and emotional state of the negotiation team.

Monitoring the subject's suicidal risk is also critical. Borderline subjects remain high risks for suicide throughout the negotiation process. When in doubt, negotiators should question the subject directly regarding any suicidal intentions.

Negotiators also need to exercise caution when allowing the subject to vent. Often, allowing borderlines to freely express intense anger actually makes them feel *less* in control of themselves. If possible, subjects should be directed to vent another emotion instead of rage. When apparent that anger levels are rising, negotiators may intervene by using distraction techniques or by redirecting the subject to another area of discussion.

Rather than express empathy for the intense anger, anxiety, or depression displayed by borderline subjects, negotiators must remain empathetic concerning any breakdown in the mechanisms that subjects use to protect themselves from negative emotions. For example, in response to an angry outburst, negotiators might respond by saying, “It must have been hard to keep all those angry feelings bottled up inside for such a long time.”<sup>7</sup>

Above all, negotiators must remain alert to psychotic symptoms. The extreme instability of their personalities often cause borderline subjects to experience episodes of transient psychotic symptoms, such as bizarre behavior, extreme moods, or delusions. The delusions (false beliefs that persist despite clear evidence to the contrary) typically focus around morbid themes or

# Police Practices

## Keeping Kids in School

The Phoenix, Arizona, Police Department created a School Resource Officer (SRO) Program in 1983 with funds provided by a Federal grant. The program started as an effort to reduce the number of truants, thereby keeping students off the streets and hopefully out of trouble. Since its inception, the program succeeded in its original objective.

By the end of the 3-year grant period, the truancy rate at two pilot schools decreased by 73 percent, and crimes committed on campuses and in surrounding neighborhoods significantly decreased. In addition, the number of child abuse and neglect cases reported to the police and social service agencies rose dramatically.

In fact, the Phoenix SRO Program became so successful that when the grant expired, both school districts elected to continue the project by paying 75 percent of each School Resource Officer's salary. Today, 17 School Resource Officers provide services in 36 schools throughout Phoenix. The program primarily targets students in sixth, seventh, and eighth grades.

### The Officers

All officers in the SRO Unit volunteer for the assignment, which they consider to be a

imagined persecution by others (paranoia).

As in dealing with psychotic subjects, negotiators should avoid arguing with borderlines about the content of their delusions. At the time, the beliefs appear quite real to them, and negotiators should express an understanding of how the hostage taker views the situation, even though the negotiator does not agree. Again, these types of episodes are usually transient and relatively brief for borderline subjects, unlike the more longstanding psychotic patterns experienced by schizophrenics.

Negotiators should keep the borderline subject as calm as possible by reducing stress in the situation. This includes using a reassuring voice and monitoring escalation of the subject's emotions. Excess activity within or around the scene, such as fluctuating bright lights, should be eliminated. Any intentional manipulation of conditions or stress levels should be introduced gradually, with negotiators continually monitoring the effects of these tactics on the subject.

That is why it is important to provide structure for the situation. Negotiators must remember that borderlines may have difficulty appropriately gauging the gravity of a situation. In a negotiation-tactical confrontation, the subject may be overwhelmed, confused, and highly unpredictable. Negotiators should provide structure by describing each phase of any planned interaction. The consequences should be outlined in a clear, direct, but nonthreatening, manner. This predictability, however, should not compromise the integrity of any tac-

tical operations; subjects should not be informed of surprise assaults or unobtrusive tactical movement.

### CONCLUSION

Due to the high degree of instability exhibited by persons suffering from borderline personality disorder, situations involving these subjects often become very volatile. Negotiators should provide structure for subjects in order to maintain stability in hostage or barricade situations.

The guidelines provided here offer assistance to negotiators, but given the general instability of these subjects, flexibility in response should be maintained. In addition, departments that lack negotiators with experience in handling borderline subjects may consider requesting the assistance of clinical psychologists as consultants to resolve these high-risk confrontations. ♦

### Endnotes

<sup>1</sup> G. Dwayne Fuselier, "A Practical Overview of Hostage Negotiations," *FBI Law Enforcement Bulletin*, 56, 1981, 2-6/10-15.

<sup>2</sup> I. Goldaber, "A Typology of Hostage Takers," *The Police Chief*, 46 (2), 1979, 21-22.

<sup>3</sup> See T. Strentz, "Negotiating with the Hostage-Taker Exhibiting Paranoid Schizophrenic Symptoms," *Journal of Police Science and Administration*, 14, 1986, 12-16; T. Strentz, "The Inadequate Personality as a Hostage Taker," *Journal of Police Science and Administration*, 11, 1983, 363-368; F. Lanceley, "The Antisocial Personality as a Hostage Taker," *Journal of Police Science and Administration*, 9, 1981, 28-34.

<sup>4</sup> *Diagnostic and Statistical Manual of Mental Disorders*, 3d ed. (rvd.) (Washington, DC: American Psychiatric Association, 1987).

<sup>5</sup> *Ibid.*

<sup>6</sup> T. Millon, "Disorders of Personality," *DSM-III: Axis II* (New York: John Wiley and Sons, 1981), 348.

<sup>7</sup> J. Blackman, internal communications, Virginia Beach, Virginia, Police Department, 1988.