CARE & CONTAINMENT OF PERSONALITY DISORDERS

- Don't Panic
  - Non-judgmental stance
  - Non anxious presence
- Maintain situational awareness
  - Meets and bounds
  - Transference dynamics
  - Who's needs are being met
  - Your own affective field
- Stance of respect, interest and– if necessary– awe.
- Consider a workshop on cognitive behavioral therapy (CBT).

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- Go with the resistance.
  - Do not get snookered into futile conflict
  - Avoid the bottomless and infinite
- Aggressively listen for spiritual themes
  - Dust off your Pruyser, Hopewell, Fowler or whoever you use

•Sense of the sacred •Significance •Grace •Joy	•Punishment •Shame •Providence •Competence	•Justice •Faith •Relatedness •Safety	•Repentance •Journey •Sacrifice •Grief

Care & Containment of Personality Disorders

- Ask for clarification on "acting out"
- Spin the disorder for good
  - Manage strengths
- Set and maintain limits on time and role
  - Design access to prevent problems
- Don't blame the victim.
  - Remember that the patient *learned* their behavioral responses from inadequate or inappropriate bonding, if not outright abuse.

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- Revert to chaplain of the milieu (community of healing) in staff splitting.
  - Monitor and consultant to clinical head(s)
  - Support cultural norms reflective of
    - Transference and counter-transference feelings being acceptable, envititable, and valuable for the team and the patient.
    - Idealization and devaluation being something less than reality.
    - Non-sarcastic humor may help.

Care & Containment of Personality Disorders

- **Remember who you are**
  - ***Vincit qui se vincit*** **(he conquers who conquers himself)**
  - **Keep you pastor's hat on.**
  - **You have the primary responsibility to keep the relationship safe and sustainable.**
  - **If you allow the patient to irreparably scare, anger, or burn you out, you have failed as a steward of your calling.**
- **Get consultation. Yes, you. Now.**