



National Education Alliance for
Borderline Personality Disorder

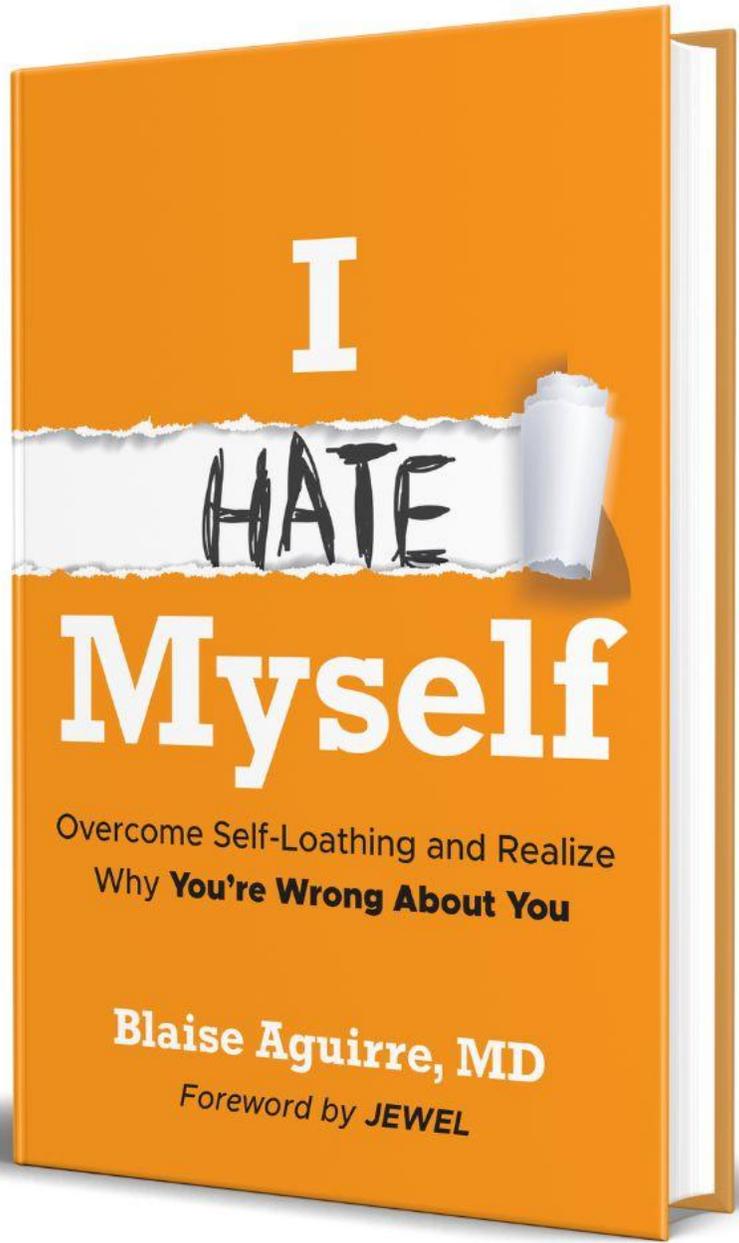
**SELF-HATRED:
From Genesis to
Self Compassion**

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A Personal Reflection

Of all the symptoms that I see in the people I treat, perhaps the one that elicits the most enduring suffering in them and sadness in me is their articulation of self-hatred.

Treatments like DBT address externalizing behaviors. There is to-date no robust or reliable therapeutic way to address the symptom of self-loathing and so these slides represent my reflections based on my clinical experience and my review of the literature, and a consideration for a path forward.

Objectives

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- Learn to identify the origins and signs of self-hatred
 - Understand the connection between self-hatred and suicidal behavior as well as to co-occurring disorders like borderline personality disorder and depression
 - Discover effective strategies for transforming self-loathing into self-compassion

One Person's Reflection

I am going through a very bad time. When I feel this bad, I hate myself even more than ever. My journals are filled with how much I hate myself. I am heading into a bad state where it starts a spiral and gets worse. Yup, I decide that no one only does not care about me, but it must be because I am a terrible person, which means that everyone hates me, and that everyone would be better off if I was dead. Self-harm is a relief, and yes it makes me feel worse, but then again, I deserve to feel worse.

I know you want specifics, so here they are: Every little negative thing, or what I perceive as negative, makes me feel worse. Like if my friend is in a bad mood -> it's my fault and I caused it. If something bad happens at work -> I am terrible at my job and my coworkers hate me. If my mom doesn't call back after I text her -> My brother and sister are more important to her than I and she is too busy for me.

I can feel OK that I have depression and anxiety and see them as illnesses, but I can't with BPD. I think it's because others treat me like it's my fault, and all the terrible things people say about me while I'm exhibiting symptoms. They say that I'm aggressive and too needy; who could love someone like that?

The Nature And Presentation Of Self-Hatred

-
- Self-loathing is the enduring experience that “I am just not good.” It can be that the person feels that they are “not good enough,” or “not good at _____,” or simply “not good at anything.”
 - It can be subtle, with habitual comparisons to other people, marked with self-criticism.
 - People can constantly find fault in themselves, putting themselves down and doing so as if they deserve to be put down.
 - It can be listening to an enduring critical inner voice which scolds and berates us, telling us how embarrassing, stupid, or insensitive we are and then because we believe this narrative to be true, and then we cannot, or we refuse to challenge the narrative.

Imagine

Living this way all the time and feeling that you have no control over that experience!

Or Imagine
someone
you love
Saying:

-
- I am a terrible person
 - I hate myself
 - Why was I even born?, The world would be better off without me.
 - I will never find someone to love me because I am unlovable.
 - I'm a failure.
 - I can't do anything right.
 - "I'm not good enough."
 - "I'll never get better."

Compounded
by the
Thought:

If I have so many good things in my life, what right do I have to complain about anything? If I am still dissatisfied it must be that I am a real failure.

Now Think About Your Loved One with BPD

➡ How often do you metaphorically roll your eyes at their behavior?

- Judge them, differently from other people?

- Feel strong dislike for them?

- Feel that you personally are being targeted or attacked by them?

- Can you love such a person? Can you teach them to love themselves? If they experience disdain from our profession, one that ought to deliver compassionate care, where will they learn to experience love and self-love?

Self-Hatred: Related Concepts

-
- Self-loathing
 - Self-criticism
 - Self-disgust
 - Self-blame
 - Self-contempt

A Possible Definition

Self-hatred is the experience of enduring dislike of the self, feelings of inadequacy, guilt, self-blame and low self-worth.

In this context: The person typically compares themselves to others, perceive only the negative and ignore the positive, and frequently experiences the thought that that they will never be "good enough." This experience comes with the conclusion that they need to do behaviors to punish themselves for their shortcomings, or to remove themselves completely by suicide.

Turnell et
al. 2019

“Self-hate represents an enduring dysfunctional and destructive self evaluation, characterized by attributions of undesirable and defective qualities, and failure to meet perceived standards and values leading to feelings of inadequacy, incompetency, and worthlessness.”

High levels of self-hatred are marked by low self-esteem, shame, self-blame or guilt, as well as a mental state of agitation, creating an experience of substantial, often unbearable, psychological and emotional turmoil.”

Why it Matters: BPD and suicidal thoughts and behaviors (STBs)

People suffering from BPD are at elevated risk for suicidal thoughts and behaviors (STBs), but this well-described and clinically important association is not well-understood.

Prior research suggests that STBs often function as an attempt to escape aversive affect, and that people with BPD experience stronger emotion reactivity and greater discomfort with emotion than those without BPD.

The association between negative affective states (e.g., abandonment, desperation, guilt, hopelessness, loneliness, rage, self-hatred, and upset), and severity of suicidal thinking was stronger among those with BPD than among those without BPD. (Mou 2018)

Interpersonal -Psychological Theory of Suicide

According to the IPTS, suicidal desire is driven by the simultaneous presence of two distinct, but related, interpersonal constructs:

1) thwarted belongingness (unmet psychological need for social connectedness) and is composed of *loneliness* and *absence of reciprocally caring relationships*.

2) perceived burdensomeness, or the idea that one is a burden or drain on significant others and is composed of two facets: *feeling like a liability* (i.e., “My death is worth more than my life to others”) and *self-hatred*.

Effects of IPTS Constructs

Research (Turnell)

A) Thwarted belongingness does fully predict suicidal ideation (6%)

B) Perceived burdensomeness more so (36%–41%)

Given the multifaceted nature of perceived burdensomeness Turnell et al, set out to determine the salient aspects of this construct and determined that self-hatred was most likely to predict suicidal ideation and developed a scale.

Measuring Self Hate

The Self Hate Scale

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- The following 7 items distinguished self-hate from other constructs.
 - I hate myself
 - I am a failure
 - I feel disgusted when I think about myself
 - I am ashamed of myself
 - I do not deserve to be loved
 - I have no value
 - I wish I could escape from myself
-
- Each item scored 1-7 so total score is 7-49



ANY RESEARCH?

Related to SH?



Research into Treatment

A MEDLINE, PsycINFO and CINAHL literature search using the key words 'borderline personality disorder' and 'self-loathing, self-hatred, self-contempt, self-disdain or shame' did not reveal any outcome studies specifically targeting and measuring self-loathing.

In other words, one of the constructs most associated with suicide and self-injury, has not been specifically targeted!

Shame as a Precursor to Self-Hatred?

- Other than self-hatred, shame is a specific emotional precursor of both suicidal behaviors and NSSI among people with BPD.
- Women with BPD experience higher levels of shame-proneness on various measures of shame, compared with non-psychiatric controls and controls with social phobia (Rüsch, 2007)
- Another study found that women with BPD and PTSD did not show greater shame proneness compared with women with BPD who did not have PTSD (Rüsch, 2007 (2)). Heightened shame-proneness is more specific to BPD than other disorders, and is not related to trauma symptoms per se.
- Some researchers have even conceptualized BPD as a chronic shame response – the intense feeling that one will never be good enough (Crowe, 2004).
- Then, when global self-evaluation of shame becomes extreme, this can lead to self-hatred and then self-punishment and suicide attempts.

The background is a solid blue color with a diagonal stripe of a darker shade of blue running from the top-left to the bottom-right. The text is centered in white.

How Does Someone Get to Hate
Themselves?

To Paraphrase Nelson Mandela

- **“No one is born hating another person because of the color of his skin, or his background, or his religion. People must learn to hate, and if they can learn to hate, they can be taught to love, for love comes more naturally to the human heart than its opposite.”**

- I would suggest that:

- No one is born hating themselves because of who they are. A person must learn to hate themselves, and if they can learn to hate themselves, they can be taught to love themselves, for love comes more naturally to the human heart than its opposite.

Typical Development

-
- Babies are born into the world entirely at the mercy of others.
 - They have no natural strength or intelligence they cannot fight or complain.
 - Their survival depends almost solely on their ability to charm their parents from their cribs.
 - That's their superpower: Their ability to attract care in such a way that they will be fed and clothed, protected and kept alive.

The Transaction

- Young children readily admire their caregivers unconditionally.
- Many parents remember wonderful interactions with their young kids.
- Babies and young children are in awe of their parents. They are in awe of their caregivers.
- When they are young, they have no desire nor need to question their authority figures.
- Because of this, small children are hugely sensitive to ensuring that they have their beloved protectors on their side.
- If they feel loved, they go about their natural ways.

However

And this is particularly true in a highly sensitive child, when a parent does not or cannot provide validating care, or if there is anger, or despair, or fighting or exhaustion, this impacts the development of the child's sense of being in a safe world.

When this happens, encoded in human biology, the child then works a lot harder. It redoubles its efforts to charm, to be good, to smile, to be admired. In late childhood and early adolescence, we see kids then wondering what is wrong with them that their caregivers don't seem to be approving. Eventually they conclude that it must be because of their own character.

Before We Go On

There is NO singular cause for self-hatred.

All research points to a significant interaction between environmental factors and a highly sensitive child.

Many parents who have more than one child use very similar styles of parenting with their other kids, and for some of their other kids, “tough parenting” and “tough love” really does work.

The Evolution of Self-Loathing:

- The child experiences being chronically hurt, rejected or invalidated
- As they get older, they conclude that this must be because they are a bad person (karma)
- That then because they are bad, that the things they do are bad
- They feel ashamed for many of their behaviors, ones they cannot at times control
- That then as punishment for doing bad things, bad things happen to them
- Then if they are bad, then no one will ever love them
- Then if no one can love them, they are eternally unlovable
- If they are unlovable, then they cannot love themselves

The Related Concept of Self-Criticism

Extensive research shows that the experience of early childhood bonds have a significant effect on the child's future relationships and their sense of self

Excessively, self-critical thoughts often have their roots in negative experiences with caregivers in childhood.

We find that when parents give children gradual autonomy, encourage them to attempt things for themselves, and allow them to make mistakes without censure, children are more likely to develop self-confidence and grow up with a sense of security regarding their own choices.

Yes,
Parents/Caregivers
Play a Role AND
yet:

- ~~Having~~ Having a self-critical child was not their intention.
- There was rarely malevolence.
- Parenting is almost always done with compassion.
- Parents often did not realize the impact of invalidation, especially in their highly sensitive child
- Their parenting style worked with your other kids.

- There is NO BLAME here. Everything is caused and a sensitive child is who they are. The question is, what now?

Impact on the Sensitive Child

Chronic or excessive self-criticism contributes to depression, social anxiety, body image concerns, perfectionism, self-harm or feelings of worthlessness.

A tendency to blame oneself when things go wrong can lead to feelings of failure, and depression.

People who are highly self-critical often feel guilty or ashamed when something goes wrong, believing the fault lies with them.

The image features a solid blue background with a central, slightly darker blue diagonal band. The text "DIGGING DEEPER" is centered horizontally and vertically within the darker band, rendered in a clean, white, sans-serif font.

DIGGING DEEPER

The Self-Concept

Self-concept refers to a person's mental representation of their own attributes, traits, physical characteristics, social roles, past experiences and future goals (Bhar and Kyrios, 2016).

In contrast, interpersonal constructs refer to the relationships or actions between individuals. Therefore, an individual could feel that they are a burden or liability on others without necessarily hating themselves, or vice versa.

I Hate My SELF

-
- What is the self that you are hating?
 - What if we removed all the parts that you did not hate?
 - What would be left?
 - Can we challenge our patients to challenge or clarify this statement?
 - I hate my thoughts
 - I hate my actions, reactions, and behaviors?
 - I hate my emotions?

What Makes Up The SELF

-
- Your bones
 - Your muscles
 - Your tissues
 - Your fluids
 - Your thoughts
 - Your emotions
-
- Which of these do you hate?

What Does The Self Need to Evolve and Develop?



Without The Cr@p



Self-Loathing Makes No Logical Sense As A Conclusion

-
- It makes sense how it develops
 - It makes sense that a person feels the way they do

 - **HOWEVER**

 - It is built on a series of false premises, often ones that people who experience self-loathing, cannot see as false

A woman with short, reddish-brown hair is shown from the chest up. She is wearing a blue denim button-down shirt and a chunky necklace made of several strands of pearls. Her expression is one of confusion or uncertainty, with a furrowed brow and a slightly open mouth. Her hands are raised in a shrugging gesture, palms facing up. The background is a plain, light gray color.

TREATMENT?

What to do?

YOU HAVE TO START BY ASKING!!!

How often do you include questions of self-worth, self-compassion, self hatred in your initial clinical evaluation?

What Can Be Done?

There is no evidence-based
approach to targeting
self-loathing in BPD

Ultimately, only a Patient Can Take Away Their Self-Loathing

-
- Marsha Linehan teaches: “You may not have caused all your problems, but they are yours to solve anyway.”
 - Whatever the reason for why a person does not like themselves, it is their task to change this.
 - Other’s role is to create an environment where a person can enduringly see their worth.
 - Nevertheless, others cannot remove self-hatred.
 - Focusing on blaming others is an exercise in staying stuck in perpetual suffering and abdicating autonomy.
 - Finally, a patient CANNOT stop hating themselves by hating somebody else.

Research

- Self-compassion was negatively associated with STBs and NSSI, and the effect size of self-compassion was larger for STBs than NSSI. (Suh 2021)

- The authors theorized that NSSI was essentially “a behavioral problem with emotional distress instigating this self-destructive behavior.” And concluded that attending to emotion dysregulation is important and learning behavioral techniques to distract the action of NSSI is equally as important.

- It’s hard to find self-compassion when you are dysregulated!

So:

-
- People with significant self-hatred are at high risk for suicide and suicide behaviors and
 - People who practice self-compassion have lower suicidal thoughts and behaviors
-
- Can we simply get people to practice self-compassion?

Concept Paper:
Behavioural
treatment of
chronic, severe
self-loathing in
people with
borderline
personality
disorder.

By Roy Krawitz: Treating severe chronic self-loathing in people with borderline personality disorder can be challenging for client and clinician alike, with standard approaches often being ineffective. **Assessment of reinforcers of the locked-in downward spiral of self-loathing will guide interventions for clients to interrupt this vicious cycle.**

The Problem With Standard Approaches

-
- Standard behavioral interventions and therapists' well-meaning encouragements often work for less self-loathing patients. These are ineffective with severe chronically self-loathing patients and might even cause a worse experience of self-loathing through perceived invalidation.
 - **Standard change-focused behavioral approaches** addressing low self-esteem are often perceived by patients as evidence of their unacceptability and thereby serve as a stimulus for further self-loathing.

The Problem With Standard Approaches

-
- **Standard acceptance-focused behavioral interventions** can be equally problematic. Patients with BPD with severe chronic self-loathing often find therapists' well-meaning encouragement of self-care, self-acceptance and self-soothing as superficial, facile, glib, ineffective or even aversive.
 - People can find such self-acceptance and self-care extremely challenging as it can create a self-perception of being undeserving or even triggering a more vigorous experience of self-loathing.

It's Difficult

- **Skills training:** Focus on skill deficits might reinforce the thoughts that they are defective as they don't have the skills that others have
- **Cognitive modification:** Focus on 'irrational' thinking might cue self-construct of being fundamentally flawed, providing 'evidence' of being fundamentally flawed.
- **Exposure:** People cannot engage in an exposure treatment to decrease suffering if they believe that suffering is justified.
- **Patient self-reinforcers:** Difficult for patients to engage in behaviors that will promote a life of quality if they believe that they are not deserving of such a life.
- **Mindful acceptance of internal experience:** Mindfulness may cue an increase in distressing symptoms in patients previously practiced in avoiding emotional experiencing or may trigger thoughts of undeservedness.

What To Do: Step 1) As therapists, Target it! (as loved ones, be curious)

-
- Get a clear map of the construct for the patient. Focus on the immediate antecedents and consequences of self-loathing.
 - Target the reinforcers: Understanding the reinforcers for self-loathing will be important in looking for reinforcers of alternative healthier behaviors that might interrupt the self-loathing
 - None of us (loved ones or therapists) want to validate the unhealthy self-loathing self-construct and so we need to find alternatives to validate.
 - Without doing so, the treatment of self-loathing can remain stuck. The challenge is to help people find something that they can self-validate while not beating themselves up for their self-loathing.

Targeting Avoidance

Often there is an isness to self-loathing which the person believes won't or can't change. Think of self-loathing as avoidance of unbearably painful emotions, ones that patients do not know how to deal with can enable them to begin to empathize with and validate their experience.

This can be done in a non-blaming way. In this way, self-loathing can be validated as having served as an adaptive way of surviving, while at the same time consider other, healthier ways of doing so in the present moment.

Learning Anew: Encourage the Person to:

- Support the person .in focusing on the elements in their life that they do well.
- Take interest to the extent that you can, as a form of validation
- Try not to lose interest, frequent repetitions, with regular engagement enhances the belief of the value of their interest.

Opposite Action To Self-Hatred

From a DBT perspective, opposite action to self-hatred is self-compassion and so a person has to target any willfulness that shows up in practicing self-compassion.

What It Is
Self-Compassion NOT:
Where
people can
get stuck.

-
- A form of narcissism
 - A form of selfishness
 - Weakness
 - Complacency
 - Self-pity

Research In BPD

- Small study (2017) of 32 patients with BPD randomized patients into a loving-kindness and compassion meditation (LKM/CM) or mindfulness continuation training (control group). Patients in the LKM/CM group showed greater changes in acceptance and reduction in self-criticism compared with the control group.

- A small study (2018) study of 19 patients showed a strong positive correlation between self-compassion and recovery and a strong negative correlation between self-criticism and recovery.

- **However, neither study looked at self-hatred**

Encourage the Person to be Precise. What Can You Change?

-
- “I hate myself.” Is less of a precise statement
HOWEVER you can work on:
 - “I should not have stayed up late last night.”
 - “I should have waited until the morning to respond to the text.”
 - “I watched too many episodes of my binge show and didn’t study for my exam. I must stop that behavior.”
 - “I yelled at my partner this afternoon. I need to be more regulated when I explain what my concerns are.”
 - “If I keep spending money on stuff that I want, I won’t have the money I need to be able to move out of home. I need to start saving more.”
 - These statements focus on a particular aspect of behavior that a person wants to change.

In Summary

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- Self-loathing and related concepts are extremely painful experiences, particularly in conditions like BPD
 - Self-hatred is highly correlated with suicidal thoughts and behaviors
 - Its cause is complicated and involves biology and environment
 - Blaming any person or any one factor is not an approach that helps
 - The conclusion of self-loathing, although understandable, is not valid
 - It is a learned construct, and although difficult, can be defanged, and replaced with healthier self constructs, including self-compassion and even self-love

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