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Peer Relationships and Fear of Abandonment in Adolescents with Borderline Personality Disorder

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Abstract. Recent years have witnessed a significant rise in the negative influence of psychological diseases on adolescents' mental health, highlighting the emergency for scientists and caregivers to understand the underlying mechanisms and behaviors. This essay explores how fear of abandonment impacts peer relationships among adolescents with borderline personality disorder (BPD), focusing on three core behavioral patterns. First, excessive reassurance-seeking, which involves repeated demands for confirmation, often leads to peer exhaustion and relational breakdown. Second, preemptive behavior pushes adolescents to cut off relationships preemptively based on imagined threats, reinforcing isolation. Third, impulsive actions triggered by fear of abandonment produce intense guilt and shame, forming a vicious cycle that deepens the original fear. According to clinical evidence and real-life examples, the discussion highlights how these behaviors, while serving short-term self-protection, ultimately damage peer bonds and worsen BPD symptoms. The essay also concludes that earlier identification of these patterns can support therapeutic engagement, help adolescents break the cycle, and improve relationship outcomes.

Keywords: Borderline Personality Disorder, Adolescents, Fear, Abandonment, Peer

1. Introduction

In recent decades, the pace of modern life has accelerated, leading to a considerable rise in the rate of psychiatric disorders, especially among adolescents aged 10 to 19, whose neurological maturity remains immature and incomplete. According to the data from the World Health Organization, approximately 14.3% of adolescents suffer from a psychiatric disorder. This essay focuses on the adolescent population, who possess unique developmental characteristics, to examine their specific behavior under a psychiatric disorder background, discovering the underlying mechanism, system of emotional dysregulation, and real-life examples.

Noticeably, in this digital era, a tendency has been declared that adolescents are likely to be connected more with their peers rather than parents under online conditions, strengthening peer relationships. This strong and intimate bond between adolescents seems to be beneficial, as it carries loads of merits for individuals and society. However, the closeness of patients with BPD may contribute to significant interpersonal difficulties, as this disorder undermines a person's capacity to form and maintain stable relationships [1].

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Patients with borderline personality disorder tend to be emotionally dysregulated and can become frantic easily, caused by a negligible simple trigger. Remarkably, adolescent patients with BPD face greater difficulties in regulating their behaviors as the disorder is further exacerbated by their developmental stage.

Moreover, this essay aims to discuss further one of its core symptoms, which is fear of abandonment. This sense of fear is ubiquitous among adolescents who have BPD, which symbolizes the overwhelming anxiety they have [2].

This topic carries considerable importance for BPD adolescents, their related parents, and broader society. By discussing the behavioral patterns that patients expressed in peer contexts, this essay aims to present a deeper understanding of behaviors related to BPD, enabling an earlier identification and positive responses. As for adolescents truly under this situation, the built-up awareness of BPD understanding serves as a foundation for help-seeking and therapeutic engagement afterwards.

The essay explores how fear of abandonment affects adolescents with BPD when facing peer relationships, declaring that the behaviors that parents might deem as excessive intensity during adolescence can be a feature of a psychiatric disorder that has a deep mechanism lying under. The following discussion will be organized around three main behaviors, which are excessive reassurance seeking, preemptive behavior, and the cycle of guilt and shame.

2. Three behavioral patterns

2.1. Excessive reassurance seeking

Adolescent BPD patients express a sign of excessive reassurance seeking, especially in peer relationships. Reassurance seeking is the process of an individual confirming if he or she is acceptable, loved, or needed by others around, which is the opposite of being abandoned, feeling distrust [3]. This behavior is ubiquitous and highly prevalent when someone feels unsafe with his or her social relationship, symbolizing one's showcase of fear of abandonment, trying to find out his or her meaning of existing in society [4]. However, the main difference in reassurance seeking between the ordinary population and BPD patients is the frequency. As the discussion above says, the ordinary population only seeks reassurance when they need strong emotional support, representing the frequency is "seldom". In contrast, BPD patients show an excessive reassurance seeking in daily life, so that the frequency for them is "often". Besides, the BPD population's extent of the reassurance symptom, illustrating its strong and intensive feature, can influence the patients' daily living routine and may also spread bad impact on people around the patients, which is significantly deeper than the extent in the ordinary population. Under a BPD background, the meaning of the behavior mentioned above is not simple, but with a deep mechanism hidden behind it, which is a signal of why BPD patients excessively react like that. The excessive reassurance seeking symbolizes their consuming fear of abandonment, the core symptom of this disorder.

Moving on to the mechanism and hidden reasons, driven by fear of abandonment, adolescent BPD patients lose their understanding of their own value, developing a fragmented and predominantly negative sense of self-worth. Different from adult BPD patients, individuals with an immature mindset and unstable social circle are more likely to feel uncertainty during adolescence, so that this excessive reassurance-seeking symptom for adolescents is more severe than in the adult population. Generally speaking, from a short-term perspective, the behavior brings several benefits to the patients. It can release their anxiety of being abandoned, relaxing both mentally and physically. Besides, the assurance of relationship with peers (different from kinship, peer

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relationships are not completely stable, especially for BPD adolescents) can let the patients feel comfortable and gain certainty in social situations, which plays an essential role in BPD's recovery. Nevertheless, there are demerits brought by excessive reassurance seeking. As for the patients themselves, they become more dependent, relying on others all the time. For the receiving side-peer, repeated reassurance seeking can trigger emotional exhaustion, leading to interpersonal frustration. It is called "accommodation fatigue" when it appeared in the literature. The dynamic phenomenon can erode the quality and sustainability of peer relationships, causing the real abandonment ultimately [5].

There are several research papers that support this paragraph's idea. For the basic information part, Elena and her team's research investigated that "Secure attachment predicts and promotes the creation of affective relationships with peers and friends based on communication" [6]. This declaration not only gives the reason why BPD adolescents want to confirm the peer relationship, which is to make the connection secure and affective, but also helps predict that one way of reassurance seeking is through excessive communication. Relatively, another research pointed out "Linked to this is a strong need for reassurance, often expressed as demanding or intrusive requests for proof of helpfulness", which reinforces the previous idea about what adolescents with BPD look forward to under fear of abandonment triggered by their peers.

According to the development of the digital era, the website and social media have provided completely new channels for peers, creating a platform where excessive reassurance seeking manifests. Adolescent BPD patients may maintain a highly active presence on social media, compelling their peers to give immediate responses simultaneously. The absence can be easily seen as a sign of rejection that leads to acute anxiety. The most obvious instance is that patients keep asking the peer, "Are we still friends?" after the other side has already confirmed the relationship numerous times. After that, BPD adolescents are likely to compel their peers to reply to the messages at once due to the fear of abandonment. The time for waiting to be replied to is hard and uncomfortable for them, yielding to the overwhelming anxiety, while it is easy and normal for the ordinary population to experience the waiting period. In addition, overinterpretation is endemic among the BPD population. In reality, after seeing the peer's simple change of facial expression, like getting bored, the patients who are influenced by fear of abandonment may overinterpret it as a symbolization of unconcern and the loss of love. The examples collectively demonstrate that excessive reassurance seeking brings considerable negative impact on peer relationships. Noticeably, the result of this behavior tends to be self-reinforcing, which is a vicious cycle mentioned in the following context.

In summary, excessive reassurance seeking caused by fear of abandonment, rooted in the center of BPD's symptoms, represents one of the most disruptive behavioral patterns in peer relationships for adolescents affected. It carries various disadvantages, both to the patients and people who care about them originally, spreading a bad impact among peer relationships.

2.2. Preemptive behavior

Preemptive behavior can be found in BPD patients, standing for stable and reliable to them, making adolescents with this disorder see it as an action to avoid threat. Preemptive behavior is to act in advance, before the event, imagined by someone, that may happen in the future. Under the BPD social relationship condition, this definition illustrates that the patients proactively cut off the connection with others before being "abandoned". There is a fundamental distinction between a normal relationship end and a preemptive one. In the normal situation, the ordinary adolescent population ends a friendship with peers when the other side truly does something harmful to them,

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or the relationship fades away due to personal growth and time. In contrast, even though the peers have not done anything yet, adolescent BPD patients preemptively terminate the relationship due to their own prediction of abandonment. The preemptive behavior that BPD patients exhibit, derived of fear, is motivated by fear, which is a way of defense for the affected population. Instead of getting hurt by others, patients choose to leave first, avoiding the "coming up threats".

The underlying mechanism of preemptive behavior centers on the fear of abandonment that characterizes BPD. Adolescents who suffer from this disorder have an extremely high sensitivity for discovering rejection clues, causing the perception of threats in ambiguous or even neutral signals, leading to the final defensive action. Moreover, the excessively highly sensitive BPD adolescents have difficulty recognizing rejection signal explains why they previously did something to cope. For instance, if the peer expresses a little bit indifferent which is not significant to the ordinary population, the patients may overinterpret it as they are going to be abandoned. Similarly, delayed responses from peers serve as a strong trigger for preemptive behavior. As the adolescents who have BPD experience the waiting process filled with anxiety and uncertainty.

Moving on to the impacts this behavior yields, there are some that carry the fake advantages, but more with irredeemable demerits. Under short-term conditions, the influences can be seen as temporarily positive. Its behavior helps BPD adolescents escape from "hurt and threats", transferring them from a passive to an active role psychologically, which helps patients regain a sense of control. However, under long-term conditions, the impacts obviously turn negative [7]. Over time, preemptive behavior reinforces the patients' belief that interpersonal relationships between peers are fundamentally unreliable. The negative results for preemptive behavior each time become pieces of evidence, confirming the BPD adolescents' expectation of abandonment, deepening the disorder's clutch, which is similar to excessive reassurance seeking. More importantly, it deepens and confirms the patients' expectation that they are possibly suffering from abandonment, reinforcing the fear.

Many previous studies have discussed the preemptive behavior, which supports the ideas this passage gives out. As Gamze team's research declared, "one should take preemptive action to avoid threats", reinforcing the behavior's defensive nature [8]. Besides, DSM-5 (Diagnostic and Statistical Manual of Mental Disorders, Fifth Edition), an authoritative and diagnostic manual widely used in the psychiatric field, points out BPD's main decisive symptom with the words "Frantic efforts to avoid real or imagined abandonment". The frantic efforts symbolize the preemptive behavior mentioned above.

In reality, adolescents with BPD, badly suffering from fear of abandonment, may exhibit the following possible behaviors while dealing with peer relationships. At the least severe end of the spectrum, an adolescent with BPD may abruptly end a conversation, although he or she remains emotionally attached to the receiving side. Then, BPD adolescents may not reply to the messages that their peers send to them for no reason, as their peers can understand. These two real-life behaviors happen when the disorder is not extremely serious. However, when BPD develops, the symptoms become more obvious and extreme. To say "Let us not be friends" while the relationship between peers is still on track shows the unreasonable preemptive behavior that BPD patients can exhibit. When this behavioral defense develops to the highest level, it is possible to find the patients delete their peers' contact without any explanation. These possible reactions referred to are all caused by fear of abandonment. Besides the motivation that triggers the preemptive behavior, the features of the actions show similar key points. Firstly, the other side (peers) does not express direct rejection. Secondly, the adolescent BPD patients' performance is based on their own prediction or imagination, not on facts. Together, the features indicate the cognition distortion's pattern, which causes patients to perceive threats as certainties, compelling the BPD individuals to act preemptively

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without considering the real provocation. In short, all the instances noted have passive effects in one's social circle, especially on peers, so that they may feel deeply hurt and confused.

All in all, the second response for BPD's fear of abandonment symptom is preemptive behavior, characterized by acting in advance to avoid anticipated threats and rejections. It causes the patients' peers to feel distrust about them, ruining the interpersonal relationship both directly and indirectly. It makes negative effect on BPD individuals, either. The self-doubt, yielded by the broken relationship, consolidates the patient's unconfident state of mind in their ability to maintain the connections between ordinary peers around them.

2.3. Vicious cycle

BPD Teenagers get into a sense of guilt and shame after their impulsive actions. Although the behavior is driven by fear of abandonment, it still leads to a vicious cycle, which is concerned as the emotional aftermath.

Impulse action (or impulse aggression) stands for behavior that individuals exhibit without consideration, mainly controlled by current strong emotion. These actions often contribute to regret and guilt after the person has calmed down, functioning as a counterproductive outcome that undermines the individual's original intent of self-protection. Under the BPD condition that patients are afraid to be abandoned, impulsive action specific represents the extreme behaviors BPD individuals take to prevent themselves from harm, but may finally yield negative impacts to others, together with a sense of shame and guilt after the action has happened. Different from ordinary impulse, actions derived of BPD impulsiveness have intensive frequency, high magnitude, and severe consequences. The distinct features of impulse action are caused by the BPD patients' inability to manage their emotions and immediate reactions. These distinctive features of impulse behavior are deeply rooted in BPD patients' weakened abilities for emotion regulation, which include difficulties adjusting the emotion responses under stressful situations, an impaired capacity to tolerate emotional distress, and an over-reliance on passive coping strategies. According to the fear of abandonment from BPD adolescents, patients are highly likely to act impulsively to complete self-protection. However, the imagined fear triggers endless impulse action and subsequent regret, building up a vicious cycle.

The vicious cycle contains a series of components, which show the underlying mechanism of this phenomenon. To start with, in the current situation, BPD patients feel threatened, unsafe, and uncertain from daily unnoticeable triggers, leading to the failure of emotion management, which is the most significant factor to push individuals to act impulsively. In addition, this phenomenon exists highly especially among adolescents. Their mind and brain are developing from immature to mature, so that the neurodevelopmental growth is incomplete, particularly in the prefrontal cortex. It takes responsibility for impulse control, decision-making, and emotional regulation. The incompletion renders adolescents highly vulnerable to heightened emotional reactivity and diminished self-regulatory ability. Continuously, after the impulse action happened, the BPD patients experience processes from calming down, self-reflection, to feeling shame and guilt. They rethink their impulsive behavior several times and realize they should not have acted rudely in the past situation. Instead of expressing other emotions like anger and depression, BPD adolescents show deep guilt, regret, and shame, because the patients know what actions can be seen as correct and proper, but they lack the skills to manage themselves.

Research from Jorgensen and Boye in 2024 investigated the significant position of shame or guilt, saying "Shame is an essential affect in many patients with borderline personality disorder (BPD) and can be associated with most of the BPD diagnostic criteria." They also found out that the

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image BPD adolescents saw themselves, "severe shame is a highly aversive emotion with concomitant beliefs about the self as deeply inferior, insignificant, disgusting, and unloved", which declared the passive influence of shame simultaneously [9].

There are various typical instances in BPD adolescents' daily life, illustrating the excessive reassurance seeking and preemptive behavior in some process. The cycle starts with a simple trigger, such as the peer not replying to texts from adolescent BPD patients immediately, which signals a direct and sharp "rejection" from the patients' perspective. Then, large amounts of messages, including inquiry and excessive reassurance seeking, will be sent by the patients, aiming to gain a sense of certainty or to terminate relationships with peers preemptively due to the fear of abandonment. However, instead of being dominated by strong emotions, while BPD adolescents calm down and become rational, they feel regret for continuing to bother and act badly to their peers, decreasing the confidence they originally had to face friends again, reinforcing social isolation [10]. Consequently, the young patients confirm and strengthen the prediction of being abandoned, feeling fear, and feeling helpless. Each session of this event is tightly related to other parts, leading to the worst result continuously, which is a vicious cycle.

In conclusion, adolescents with BPD, engaging in impulse action to peers, derived of the fear of abandonment, experience guilt and shame deeply. These self-doubting emotions bring negative impacts on BPD's recovery, forming a vicious cycle as a result.

3. Conclusion

This paper has examined how fear of abandonment manifests in peer relationships among adolescents with borderline personality disorder, focusing on three specific behavioral symptom patterns. First, BPD adolescents express a sign of excessive reassurance seeking within peer relationships by repeatedly asking for confirmation in daily social processes. Second, the young patients exhibit preemptive behavior to avoid anticipated abandonment, even though there are no actual rejections. Third, the impulsive behaviors mentioned above, as the first two symptoms driven by fear of abandonment, contribute to extreme guilt and shame, which create a vicious cycle and intensify the original fear. Several suggestions can be concluded from this paper, which stand in a position for practical implications. Clinically, psychologists responsible for treating adolescents with BPD should not only identify the fear of abandonment, but also assess the underlying behavioral patterns. Meanwhile, education in the psychological field should help adolescents with BPD recognize the vicious cycle and break it, not suffer from it. Moreover, parents or caretakers should understand the mechanism and try to gain the messages conveyed by the patterned behaviors. Ultimately, understanding these behaviors deeply provides more possibilities in interrupting the vicious cycle and improving peer relationship outcomes for adolescents who suffer from BPD.

References

[1] Bourvis, N., Cohen, D., & Benarous, X. (2023). Therapeutic and preventive interventions in adolescents with borderline personality disorder: recent findings, current challenges, and future directions. Journal of clinical medicine, 12(20), 6668.

[2] Palihawadana, V., Broadbear, J. H., & Rao, S. (2019). Reviewing the clinical significance of 'fear of abandonment'in borderline personality disorder. Australasian Psychiatry, 27(1), 60-63.

[3] Preti, E., Fanti, E., Di Pierro, R., & Frigerio, A. (2026). Clinicians' Perspectives on the Model of Trust Processes in Borderline Personality Disorder: A Qualitative Evaluation. Counselling and Psychotherapy Research, 26(1), e70076.

[4] Collins, M., & Grant, J. E. (2025). Social media addiction and borderline personality disorder: a survey study. Frontiers in Psychiatry, 15, 1459827.

DOI: 10.54254/2753-7048/2026.34117

[5] Katz Rotnitzky, D. (2026). Beyond Accommodation Fatigue? The European Court of Human Rights' Inclusion of Religious Diversity in Education. Religions, 17(3), 337.
[6] Delgado, E., Serna, C., Martínez, I., & Cruise, E. (2022). Parental attachment and peer relationships in adolescence: A systematic review. International journal of environmental research and public health, 19(3), 1064.
[7] Zeigler-Hill, V., & Vonk, J. (2023). Borderline personality features and mate retention behaviors: The mediating roles of suspicious and reactive jealousy. Sexes, 4(4), 507-521.
[8] Abramov, G., Kautz, J., Miellet, S., & Deane, F. P. (2022). The influence of attachment style, self-protective beliefs, and feelings of rejection on the decline and growth of trust as a function of borderline personality disorder trait count. Journal of Psychopathology and Behavioral Assessment, 44(3), 773-786.
[9] Jørgensen, C. R., & Bøye, R. (2024). "I am ashamed that I exist. I feel like apologizing for existing": The phenomenology of shame in patients with borderline personality disorder: A qualitative study. Personality Disorders: Theory, Research, and Treatment, 15(3), 181.
[10] Tariq, M., & Mishra, N. (2025). Hopelessness for Family Members of Individuals with Borderline Personality Disorder (BPD). Indian Journal of Health and Wellbeing, 16(1), 108-111.