We’ve always been borderline: Understanding Borderline Personality Disorder as the site of radical subjectivity
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Introduction
It has been argued that the unconscious is the site for revolutionary potential and that neoliberal subjectivity must be challenged at the level of unconscious desire (Skott-Myhre, 2014). In taking this perspective, a consideration must be given to those subjects which have an unconscious surplus, or an excess that is unable to be captured by late-stage capitalism or neoliberal discourses. French psychoanalyst, Jacques Lacan, offers a conceptualization of the feminine as outside of the phallic Symbolic register, which philosophers Deleuze and Guattari borrow and explore its utility in moving towards a radical subjectivity, which they refer to as becoming-woman. From this perspective, subjugated feminine positions in history can be understood as being ‘dangerous’ in their ability to undermine or overthrow the status quo.

I argue that the 21st century manifestation of this subject is the woman as Borderline, suggesting that biopolitics, psychoanalysis, and medical discourses have captured the feminine in a particular way as to produce this subject. Borderline Personality Disorder and the subjects it refers to, which hence force will be referred to as the Borderline subject, can then be explored for resonances and surpluses that are not quite captured within the diagnostic and scientific paradigm. It can then be argued that this surplus is best understood as the erotic, or eroticism, and can be uncovered across a selection of subjugated women throughout history as being that which disturbs the Symbolic status quo.

The Lacanian feminine subject
French psychoanalyst, Jacques Lacan, offers a perspective of the subject that can be used as a theoretical grounding in exploring the potential latent in the Borderline subject. As a practicing analyst from the 1930s until the late 1970s in Paris, Lacan argued for a return to the Freudian unconscious and desire. However, Lacan greatly modifies Freud’s theories by grounding them in language, arguing that it is through language that the subject is constituted as a response to the demands of the Other, and also through which it attempts to satisfy her desires (Lacan, 1966). Lacan’s major addition to psychoanalytic theory are the three unconscious registers which dictate subjectivity, the unconscious and the relationship to the Other. The Symbolic is the register in which we all function and participate in language. Lacan claims that this register is inherently phallic because we enter it through the language of the Other and language then becomes thing that we offer up as the cause of the Other’s desire. However, the Other’s desire is tied to a primal fantasy and can never be satisfied, and subsequently is inherently lacking.
This follows the Lacanian idea that no one, men or women, possesses the phallus, that is, the signifier that will perfectly correspond to the Other’s desire (Lacan, 1966).

In following Freud, feminists have claimed that in utilizing and maintaining theories such as penis envy and the Oedipus complex, Lacan reinforces patriarchal relations of power, without giving enough consideration to the formation of the feminine subject (Cixous, 1994; Irigaray, 1874). While it has been argued that Lacan developed his theory of the feminine subject throughout his entire career (Soler, 2003), it is not until Seminar XX in 1972 in which Lacan dedicates a considerable amount of time to this topic and claims that woman does not exist. To demonstrate this point further, he challenges woman to say more about their experience, suggesting that whatever the feminine experience might be, it will be inarticulable. Many feminists have reacted against such a claim (Irigaray, 1974; Cixous 1994), while others claim that Lacan has used psychoanalytic theory to explain what women have been suggesting about their role in the patriarchal order for years (Gosz, 1994; Braidotti, 2011). However, a careful examination of what Lacan claimed about women is important in order to argue for the borderline subject as a unique and potentially revolutionary instantiation of this idea.

By saying that woman does not exist, Lacan is not claiming that there is no female subject, but rather the very act of entering into language is inherently phallic as demonstrated in his logic, and explicated earlier. For Lacan, sexual differentiation occurs in relation to the Real, and not the Symbolic, as it is commonly argued in theories such as Butler’s (1990) gender performativity (Copgec, 1994). If the Symbolic functions as the realm of signifiers, the Real is the absence of such. The Real contains all that can’t be symbolized, and is best understood as undifferentiated drives, with no lack, unlike the Symbolic. It is the experience of the subject prior to becoming subjectified, and ultimately, separated from the primary caregiver. In entering the Symbolic through the language of the Other, the subject surrenders any chance of returning to this state and therefore must attain his pleasure through the exchange of phallic signifiers. However, because the phallic signifier is never a return to the Other, it is inherently lacking and thus we are condemned to a life of chasing something that we can never quite attain and the pleasure we derive from doing so is what Lacan referred to as phallic jouissance. Because language is lacking, as are we, this jouissance that is constituted as being pleasurable until it is too much is our means to make the confrontation with this lack bearable (Lacan, 1966). For women, because of the inability to represent their desires and experiences in the Symbolic due to its phallic (or patriarchal) nature, women cannot be fully subjectified in the Symbolic and therefore, there is a surplus remaining outside of language in the Real, or what he refers to as ‘not-all’ (Lacan, 1972: 35).

It is important to note that, for Lacan, women are not outside of the phallic order. Rather, they are frustratingly caught up in it as well, even if it fails to adequately signify for them. Attempts to lay claim to particular types of femininity or feminine identity are inherently phallic because of their reliance on signification, and the trading of signifiers in a phallic economy. Furthermore, men are not necessarily outside of this ‘not-all’ either, but rather they are more likely to progress through the Oedipus complex and be socialized in a way that accords to a fantasy that they in fact possess the phallus, and thus
have the ability to circulate it within the Symbolic. Lacan (1966) reminds us that this is not true, and that no one actually has the phallus, but for men to participate in a patriarchal society that prides them on something they do not have, it behooves them to comply with the fantasy. As Soler (2002) points out, ‘Thanks to discourse, boys begin life with a little more capital: having the phallic signifier’ (50). Women then, are left to contend with a double lack.

It is this double lack which allows women access to another type of jouissance, what Lacan (1972) specifically called ‘feminine jouissance’ and only began to work on at the end of his career. Because women are not adequately represented in the Symbolic, there are moments when they do not participate in this aforementioned fantasy, and because of this they are able to see what Bruce Fink (2002) referred to as ‘the fallibility of the phallic’ (37). In fact, Lacan also refers to this in the same seminar as ‘beyond the phallus’ (Lacan, 1972). Feminine jouissance is ‘a relation to the not-whole part of the Other that allows for what Lacan calls the ‘path of love’ (Barnard, 2002: 11). Feminine jouissance is the jouissance of the Other, that is, to be the jouissance of the Other, or to be enjoyed by the Other. This is likened to the experience of being the primary caregiver’s phallus in early infancy with no separation between the subject and the Other. Feminine jouissance has that same experience and this is why Lacan (1972) identified mystics as being caught up in feminine jouissance. It is tempting to associate the Lacanian feminine with psychosis due to its similar identification of the Other (Fink, 1999), however, unlike in Lacanian psychosis, the woman is castrated, hence why her experience is in the form of fleeting jouissance, as opposed to a subjective structure. Lacanian psychoanalysis, in conjunction with Deleuze and Guattari’s theory of becoming-woman, provides an interesting tool with which to untangle this conflation, however, and of particular interest to the current project.

**Becoming-woman through the feminine**

As a practicing Lacanian psychoanalyst and adamant Marxist, Felix Guattari was able to mine Lacanian theory for its radical edges, and in conjunction with Gilles Deleuze, they were able to develop an avant-garde approach for undermining capitalistic neoliberal subjectivity. In doing so, they advocate for an understanding of the subject as ‘becoming’ as opposed to ‘being,’ a term Deleuze uses throughout his career and develops in relation to psychoanalysis and the Lacanian subject with the help of Guattari (Deleuze and Guattari, 2004). Becoming is understood as a temporary union with other heterogeneous becomings, unnatural assemblages which challenge the overdetermined image of the body. They argue that this sort of approach challenges the neoliberal static subject which capitalism reifies through the proliferation of commodities marketed at and through ‘the self,’ by advocating for a subject that recognizes it is in a constant state of flux. Guattari (1989) attempts to make a practical explication of this notion in *Three Ecologies*, in which he argues for an ecosophical apprehension of the ‘components of subjectification’ (36) of the subject. In doing so, Guattari claims

‘I do not at present envisage ‘going beyond’ Freudianism [le fait Freudian] or breaking definitively with it, however I do want to reorient Freud’s concepts and practices to use them differently; I
want to uproot them from their pre-structuralist ties, from a subjectivity anchored solidly in the individual and collective past. From now on what will be the agenda is a ‘futurist’ and ‘constructivist’ opening up of the fields of virtuality. The unconscious remains bound to archaic fixations only as long as there is no investment [engagement] directing it towards the future. This existential tension will proceed through the bias of human and even non-human temporalities such as the acceleration of the technological and data-processing revolutions, as prefigured in the phenomenal growth of a computer-aided subjectivity, which will lead to the opening up or, if you prefer, the unfolding [dépliage], of animal-, vegetable-, Cosmic-, and machinic-becomings’ (38).

This long quotation simultaneously describes his relationship to psychoanalysis and the Freudian project, which I argue should perhaps be understood as the Lacanian project in this context, as well as how he will attempt to utilize it for his consideration of the subversive subject as a series of becomings. In another work entitled *Chaosmosis: An ethico-aesthetic paradigm*, Guattari (1995) suggests that the contemporary moment is fixated on reifying a subjective singularity, evidenced in ‘quarrels over language, autonomist demands, issues of nationalism and of the nation, which in total ambiguity, express on the one hand an aspiration for national liberation, but also manifest in what I would call conservative reterritorializations of subjectivity’ (Guattari, 1995: 3). He goes on to say that traditional psychoanalysis is not equipped to unlock the revolutionary potential of the subject because of its ‘habit for reducing social facts to psychological mechanisms’ (Guattari, 1995: 4).

Instead, he argues it would be beneficial to consider ‘a tranversalist subject, one which would permit us to understand both its idiosyncratic couplings (Existential Territories) and its opening onto value systems (Incorporeal Universes) with their social and cultural implications (Guattari, 1995: 4). Guattari identifies ways in which such a subject can be conceived in his work with Gilles Deleuze, and I argue that a Lacanian reading of difficult women in history, and of the contemporary borderline subject in particular, in conjunction with this Guattarian project, provides a means through which to mobilize such a subject.

It is in Deleuze and Guattari’s (2004) collaborative work that they discuss the importance of becoming-woman in moving towards a radically different subjectivity. It is here that Lacan’s understanding of woman, specifically woman is important. For Deleuze and Guattari, man is considered a molar identity, that is an overdetermined identity, or one which can be represented as having distinct edges or ‘statistical regularities of assemblages’ (King, 2012: 118). This follows Lacan’s assertion that the Symbolic is inherently phallic, which is where the circulation of such molar identities takes place. If the phallic Symbolic, denotes subjects and objects, and relies on Hegelian distinctions that separate and cut, it can be assumed that the molar identity ‘man’ rests on the assumption that woman is simply ‘not man.’ This echoes Lacan’s statement that women do not exist. However, it is because of this inability to be represented perfectly in the
phallic Symbolic that Deleuze and Guattari identify as a potential entry point in experimenting with alterity. O’Connor (2010), in his analysis of becoming-woman in horror films, states that becoming-woman opens on to radical alterity because it ‘exists outside ‘dualities,’ and it is completely unlike a timeless definition of feminine identity since it seeks to unmoor all essentialist concepts of being so as to maximize an individual’s capacities for virtual becoming’ (112). Furthermore, and of particular interest for the current research, he claims that becoming-woman cannot be equated with instability or insanity, (and indexing the aforementioned conflation between psychosis and the feminine) but rather as a site of creative production (O’Connor, 2010).

Becoming-woman through the Lacanian feminine allows for the beginning of experimentation with undifferentiated otherness. However, at the level of the Symbolic, it will be codified and relegated to the negatively charged side of a dichotomy, such as insane or deviant. This is why it is particularly interesting to investigate those women who have been perceived as transgressing in whatever spirit the times enables, such as witches, hysterics or borderlines. Though all of these cases may manifest differently, this is because of the signifiers available at the historical moment that rely on a phallic assertion to make an identity claim. However, what is interesting in all of these cases is the surplus or excess that cannot be codified, or brought into language, but is the very thing that threatens those phallic dichotomies of ‘man/woman’ or more importantly, ‘I/you.’

**Bataille’s erotism and the potential in erotic surplus**

French philosopher and literary figure George Bataille provides a theory on erotism and death which serves as a useful thread in the Lacan-Deleuze and Guattari feminine braid. While Lacan argued that the feminine was a state that could be experienced, rarely at that, Deleuze and Guattari’s (1987) understanding of desire as production allows for a slight adjustment and the feminine, or becoming-woman is then that which does not fit within the parameters of the phallic Symbolic. Holland (1999) explains that ‘for Deleuze and Guattari, Being is a delusion which traps desire in the snare of representation and thereby represses it: their goal is to release desire from Being so it can enter more freely into Becoming’ (11). If becoming-woman is the first step towards a radical becoming, an apprehension of the feminine as erotic allows for an identification of those openings in the Symbolic through which to experiment with Becoming. It is through Bataille’s theory of erotism, with an understanding of the Lacanian subject coupled with a Guattarian agenda, which provides a means through which to think the radical potential of the feminine.

Bataille (1957) identifies erotism as a distinctly human experience and distinguishes it from instinctual animal sexuality by factoring in the phenomenological experience of it and its reliance on imagination. For Bataille, erotism is inextricably linked to death because it as assertion of life in the face of the knowledge of one’s own death and to the point of death. He follows the existentialists and argues that humans are aware of their inevitable death and that that knowledge has implications for the ways in which they live their lives. He claims that humans navigate this through work, such as the creation and maintenance of civilizations, which produce taboos and transgressions, and
functions to shelter them from the violence of death, but which subsequently produces erotism. In using the incest taboo as a uniquely human experience, following Freud (1913) and Levi-Strauss, Bataille theorizes as to how the existence of a taboo immediately supposes its own transgression and demands desire for it, and how this may effect a society that relegates the knowledge of death to outside of its lived experience. Following this logic, it is clear then how Bataille formulated erotism and death are found within each other, not as a dichotomy or spectrum, but rather, implicated in one another.

As mentioned previously, Bataille identified a difference between the sexes in regards to taboo and as a result, erotism. He explains that, in a patriarchal capitalist society, women are circulated as objects, creating the community itself, and positioned as the foundational other. In this formulation, women are both the site of the originary taboo, as well as the means for transgression (Bataille, 1991). Much of this is in line with the Oedipus complex discussed by both Freud and Lacan in that the desire for the mother must be sublimated into either an identification with the father as a means for the boy to pursue his own woman, or for the young girl to turn her desires towards having a baby someday herself. Bataille does not give much consideration to the woman’s experience of taboo and erotism. For Freud and Lacan, the father, or at least the symbol/totem of the father, is necessary to prevent any transgression of the incest taboo on the part of the young boy. Lacan (1966) goes so far to explain how a subject will become psychotically structured if there is no ‘nom de pere’, or Name of the Father, present to intervene between mother and child, further suggesting that the child needs to be protected from the mother.

Lacan explains that this is needed in order to subjectivize the infant, so that she will come to see the split between herself and her mother, but the mother as indicative of a consuming threat is of particular interest here. If women are circulated within society as objects to buffer against the taboos of death and erotism, it can be argued, even to a point of irony, that they are the first victims of crossing the threshold their circulation marks. That is, for women, transgressing these taboos do not hold the same subjective stakes, and thus become an unsymbolized surplus. This is similar to what Lacan (1972) in regards to the feminine having access to outside of the Symbolic, however, Bataille’s (1957) notion of erotism allows for a discussion of it in a way that can begin to apply a variety of subjugated women and not just the mystics. It also allows for a discussion of these women as the site of the erotic in death and death in the erotic, and the potential this has on how subjectivity is understood.

(Excessive) women have always been borderline

It could be argued that in patriarchal cultures, in which women are deemed other, women that transgress their roles as gatekeeper of men’s erotism are subject to further ostracization. French philosopher, Michel Foucault (1975) refers to regulative discourses to discuss how ideas about what constitutes deviances circulate in a society, and subsequently creates the deviance and the punishment specific to the transgression. The regulative discourses that surround women have changed throughout history, and the methods of punishment have adjusted accordingly. However, a closer reading of these women and the practices they engaged in, as well as the punishment they received, with
an emphasis on erotic surplus in the Symbolic provides possible insight about contemporary subjugated women.

One of the longest running forms of patriarchal oppression against women has been to designate those who deviate from social norms as sick, corrupt or evil. One of the earliest forms of this began in the 4th century with St. Augustine in which he warned how easy it was for women to be seduced into witchcraft (Horowitz, 1977). Assuming that women became afflicted with various illnesses because of their assumed biology was not new, and in fact, the ancient Greeks and ancient Egyptians would treat women for what they believed to be a wandering uterus (Horowitz, 1977). However, by claiming that women are more susceptible to becoming witches, speculations were made about the constitution of a woman’s mind, specifically the minds of women who were outside of the traditional feminine roles of mother and wife. The *Malleus Maleficarum*, the witches handbook used during the Spanish Inquisition, identifies single or widowed women, and women without children as being at risk of being seduced by the devil (Hester, 1992). It was believed that women who were not occupied with a man or a child would be unable to control their own ‘female carnal lust’ (Hester, 1992, p.120) and religious officials were the only ones equipped to deal with them.

With the advent of the Renaissance and the proliferation of medical discourses at the expense of the previously held religious authority, the site of feminine deviation returned to the body in the form of physical ailment. Various theories were put forth and acted on, including Thomas Willis’s proposition that hysteria was caused by an excess of animal spirits, George Cheyne’s dietary cures, among other beliefs about vapours and general neurosis (Appiganesi, 2007, p.143). William Cullen asserted that hysteria was the result of the swelling of blood in the female genitalia (Appiganesi, 2007: 32). This was caused by the menstrual cycle, becoming a widow and ‘passions of the sensitive mind’ (Horowitz, 1977: 33).

During Cullen’s time, such problems were found in women who were also likely to be diagnosed with Nymphomania, leading medical doctors to classify the disease as ‘Hysteria Libidinosa’ (Horowitz, 1977: 33). Cullen goes on to say, ‘We may here observe, that though the seminal evacuation may in our sex prevent the attack of hysterics, it will not have that effect in females, for this reason: that by it the male purpose of the male economy is fulfilled: not so for the females; they are also destined for the breeding and bearing of children; and hence evidently we are to account for our diseases attacking young widows’ (Appiganesi, 2007: 143-144). Cullen believed that women’s excess sexuality was responsible for their ailments and those who were unable to achieve sexual release from a man were then more likely to be afflicted.

As the psychoanalytic turn in the late 19th century approaches, the focus is shifted back to women’s minds as the source of their aberrance. Phillipe Pinel, a French physician appointed to the Bicetre Institute in France began his own investigations on the nature of hysteria. To Pinel, nymphomania was considered an exaggerated form of hysteria, which was caused by ‘domestic discipline and a secluded homelife’ (Horowitz, 1977: 36). Women who masturbated encouraged the onset of hysteria. Furthermore, those
who were ‘physically and morally sensitive, abused sexual pleasure, had lively emotions, voluptuous reading and conversation; deprived of the pleasures of love after having experienced long satisfaction in that domain,’ as well as those who were nursing, were predisposed to becoming hysterical (Appiganesi, 2007: 144). Pinel broke hysteria down into three stages. The first stage is typically marked with depressive symptoms and restlessness. It is in the second stage in which female sexuality is called into question. The woman stops fighting her urges and disregards what is proper behavior for her sex. Her looks and gestures become provocative and are used as a means of soliciting male attention. If she is rejected, she displays indulgent emotions and makes threats.

Pinel describes the afflicted in the third phase as, ‘on fire without fever’ and takes on the symptoms of a manic condition (Horowitz, 1977: 37). Pinel’s later research elaborated that women who became violently hysterical did so because of different forms of sexual deprivation, such as an impotent husband or a socially undesirable lover (Horowitz, 1977: 37). Now sexuality was not only a problem that women had to control, but something that men had to prevent and cure. Bataille’s understanding of women’s role as gatekeeper of erotism is evident here, as the inability for women to perform their roles, or even act like men, is grounds for hospitalization, or in keeping with Bataille, taken out of circulation.

The theoretical perspectives on hysteria and hysterics did not change much throughout the 19th century, with various physicians suggesting different etiological reasons for its onset. Sigmund Freud however, found in hysteria another way of understanding subjects and formulated his theory of psychoanalysis, grounded in psychosexual development and repressed trauma. Freud believed that hysteria was not an exclusively feminine disorder, but rather that the symptoms which manifested were gendered, with women’s symptoms being erotically charged, whereas males were in the form of ambitious endeavours (Young-Bruehl, 1990). Freud also believed that a woman could be a hysteric did not necessarily have to present with the classic symptoms, but could be considered hysterical if she was sexually aggressive or would manipulate situations to satisfy her sexual urges (Young-Bruehl, 1990). In uncovering the repressed trauma, Freud believed that the hysteric could resolve the unconscious tension and return to normal functioning in the traditional passive feminine role.

It is from here that Lacan’s movement towards a neurotic structure organized around the question ‘what does the other want from me?’ and how he comes to ground Freudian analysis in language, becomes evident. For Lacan, this question gets reformulated under a particular neurotic structure. The hysteric’s question becomes ‘Am I man or woman?’ which also hints at this sexual aggression, the active versus passive feminine, Freud discusses. In recalling the role of the phallus in the primal fantasy, the hysteric’s question circulates around whether she has the phallus or if she is the phallus. Fink (2001) identifies the hysteric as typically woman because of this uncertainty and because there is not the same impetus during early socialization to claim to possess the phallus. For the hysteric subject position, the primal fantasy, whereby she comes to recognize the primary caregiver as lacking something, is understood as she being the thing which the Other lacks. She senses that her primary caregiver is incomplete without
her, and therefore relates to the Other’s lack, as opposed to her own. It is in this apprehension that she understands herself to be the phallus, as opposed to desiring one. However, when during the Oedipus complex, the young girl comes to identify with her mother, or the caregiver who is lacking, she is confronted with the fact that she does not have the phallus, while simultaneously believing herself to be the phallus. It is this conflict which produces the question ‘Am I man or woman?’ that Lacan argues is the essential question that is foundational to the hysteric structure (Lacan, 1969).

In each of these cases, exclusively chosen for their similarity to the borderline subject as will be discussed hereafter, there is an unmistakable sexual excess, or erotic surplus. In returning to Bataille briefly, it is important to remember that erotism should not be separated from its inherent horror. Bataille (1957) discusses how in acts of reproduction, beings become discontinuous, individuals are lost in one another. The loss of self, outside of the sexual situation, is violent, intrusive and anxiety provoking. Women, being the commodity, become erotic objects, and subsequently the site of ego dissolution, and essentially, the site of phallic ruin. In all of these aforementioned cases, these women are ones who are either unable or refuse to participate in their prescribed roles.

Because women have a foot in the feminine, as described by Lacan, the Symbolic is always at risk of failing to encapsulate them, and so the stringent feminine roles are a means to try and contain this excess, as is the punishment exclusive to the historical moment. In referring to this excess as erotism, Bataille provides an operational definition to work with in regards to this feminine situation that understands both the sensuality and the horror implicit in feminine jouissance, and locates it as traces in the Symbolic, as opposed to completely excised from it. Such a reading builds a scaffold towards an understanding of the borderline subject as a particular instantiation of this phenomenon with a unique potential to rupture the Symbolic for revolutionary means.

**The Borderline as a distinct subject**

The borderline subject is the captured subject within the diagnostic criteria of Borderline Personality Disorder. Deleuze and Guattari (2004) identify apparatuses of capture as those machines which trap or limit the flows of desire. Psychiatry is one such apparatus that attempts to regulate subjects’ desire by designating what is or is not abnormal, and then offering the only means through which to treat the deviance. Psychiatry, in cahoots with the pharmaceutical industry, has made millions off of offering the cure to an ever changing array of clinical diagnosis. In doing so, individuals are limited in the ways in which they can participate in their particular ecologies for fear of being labelled and pathologized and subjected to the regulatory discourses of the medical establishment. As mentioned earlier, women are in particular danger or this, as they are unable to be adequately represented in the Symbolic, and as a result, are already deviant and are expected to participate through their subservient roles.

The symptomology and etiology of Borderline Personality is what makes it a particularly interesting area of study for this line of research. The specifics will be further elaborated on, but what is important to note is that the subject who was been captured and
reified as borderline has been done so because she is already too much; she is essentially excessive. In following Bataille’s line of thought considering erotism, the ways in which she is excessive seem to be a clear manifestation of this erotism and its inherent dangers to Symbolic/phallic order. In arguing this, I do not wish to romanticize the suffering of individuals diagnosed with this particular disorder, or suggest that their symptoms are not serious to their health or way of life. Rather, I wish to look at those excessive parts or libidinal surface that could offer a way out of this capture that enforces habitual embodiment of that particular nexus of trapped flows and erotic force, which could open on to Deleuze and Guattari’s plane of experimentation through becoming-woman.

An introduction to Borderline Personality Disorder

Before it became a personality disorder, the term ‘borderline’ was used to denote individuals who seemed to be in between psychosis and neurosis, and thus has its origins, like most mental disorders, in psychoanalytic theory. The term was coined by Adolph Stern in 1938 but was not included in The Diagnostic and Statistical Manual of Mental Disorders (DSM) until the third edition in 1980 (Al-Ahem, and Omar, 2008). Upon its introduction, it has been classified as a Cluster B personality disorder by the American Psychiatric Association (APA), which also includes Narcissistic Personality Disorder and Antisocial Personality Disorder (American Psychiatric Association, 2013). The DSM-5 defines Borderline Personality Disorder as ‘a pervasive pattern of instability of interpersonal relationships, self-image and affects, and marked impulsivity beginning by early adulthood and present in a variety of contexts, as indicated by five (or more) of the following:

A. frantic efforts to avoid real or imagined abandonment;
B. a pattern of unstable and intense interpersonal relationships characterized by alternating between extremes of idealization and devaluation;
C. identity disturbance: markedly and persistently unstable self-image or sense of self;
D. impulsivity in at least two areas that are potentially self-damaging (e.g., spending, sex, substance abuse, reckless driving, binge eating);
E. recurrent suicidal behavior, gestures, or threats, or self-mutilating behavior;
F. affective instability due to a marked reactivity of mood (e.g. intense episodic dysphoria, irritability, or difficulty controlling anger (e.g. frequent displays of temper, constant anger, recurrent physical fights) transient, stress-related paranoid ideation or severe dissociative symptoms (American Psychiatric Association, 2013).

While the National Institute of Mental Health is reporting that there is no gender or racial bias in the epidemiology of Borderline Personality Disorder, the American Psychiatric Association (2000) was claiming a 3:1 ratio for diagnosis in women up until the most recent publication of the DSM. Researchers claim that earlier reports of gender bias may be the result of clinicians’ biases, rather than a gender bias inherent in the criteria for the disorder (Sansome and Sansome, 2011). Sansome and Sansome (2011) do
also suggest that men are more likely to be diagnosed with a Substance Abuse Disorder or Antisocial Personality Disorder than women or than be diagnosed with Borderline Personality Disorder. Despite claims of gender neutrality made by the APA, research such as the aforementioned study by Sansome and Sansome (2011) suggest that there are particular symptoms that can be expected from women patients, that are either not present as frequently in males, or are not cause for concern when demonstrated by males, and therefore not symptomatic. Furthermore, the claim that the previous gender bias was caused by clinician bias does not merit a dismissal of previous statistics on demographics, as we cannot assume that clinicians have overcome this bias in the last 4 years, and it is the clinicians who are interpreting the criteria, as opposed to the criteria being an objective truth that can be utilized without the intervention of a human third party. It is also important to consider that the DSM is written collaboratively by clinicians and researchers, and because of this claiming clinician bias does not exclude bias from the text itself. Finally, it is worth noting that the DSM, nor the clinicians and their patients exist outside of a culture that not only perpetually represents the Borderline personality as distinctly feminine, but that it also prospers financially to do so, as suggested in the myriad recapitulation of the femme fatale motif in film and literature.

The borderline subject and erotic surplus

The symptomology listed for Borderline Personality Disorder is of interest because of what it attempts to signify as deviant, excessive or pathological. At first glance, it would appear that such symptoms are indeed indicative of a mental disturbance, especially those which emphasize an identity disturbance or self-harming behaviors. In film portrayals of Borderline Personality Disorder, such as the character Alex Forrest played by Glenn Close in Fatal Attraction (1987), self-harm and unstable personality are glamorized. However, these symptoms can be read as a particular substantiation of trapped erotism. Such a perspective attempts to mine those behaviors for their potential towards a subjectivity not trapped in fascist discourses of psychiatry and psychopharmacology. Of the criteria listed, those which deal with identity disturbance or dissociative symptoms, and recklessness or self-harming behaviors will be considered from this perspective, although an in depth analysis of each of the symptoms, as well as the ways in which they function together, is needed.

One of the more disturbing behaviors listed in the criteria for Borderline Personality Disorder, and that which typically drives individuals to treatment is the suicidal gestures or self-harming behaviors, typically in the form of cutting. Such acts tend to induce anxiety in those the individual is close to, as it is assumed that the individual wants to kill herself. However, research done with individuals who have engaged in acts of self-harm repeatedly remark that they have no desire to commit suicide, but rather feel something (Strong, 1998). They remark that through cutting they are able to feel something. A traditional neuropsychological approach would likely cite the role of adrenaline or endorphins released in the body in response to pain as being the cause of the feeling that they individuals remark. This research does not seek to dispute that, but rather attempts to problematize the choice to engage in self-harm, or any other reckless behavior listed in the symptomology, as being nothing more than demonstrative of behaviorist principles of operant conditioning.
Through a Lacanian lens, the skin is an envelope and is what becomes to be understood as the site of separation between the self and others, specifically the Lacanian Other (Lacan, 1966). The fact that women are overrepresented in Borderline diagnosis is important in this consideration, because if they are not fully castrated or barred from the Other, harming the skin or putting the self in a position to be destroyed begs contemplation. Rather than being a series of conscious decisions made towards cutting, individuals remark being drawn to it, or it dawning on them in a moment of desperation (Strong, 1998). This suggests an unconscious desire to act at the level of the border between self and other, one already less tangible for women. In doing so, they are confronted with a feeling that is at once pleasurable, and only tangentially painful, and at the level of the body, suggesting that, at least momentarily, there is a confrontation with feminine jouissance. It is the erotic experience of being enjoyed by the Other that cannot be distinguished from the death of the self. In doing so, there is the unconscious attempt to re-connect to the Other and to a greater ecological apprehension.

The second criterion that is considered in the contemporary research is that of identity disturbance. For this particular research, I classify criteria A, B, C, F, and G as being indicative of identity disturbance, specifically because of their relationship to another. It is typically remarked that individuals with Borderline Personality Disorder are difficult to work with in a therapeutic environment because they tend to be perceived as highly manipulative and seductive. Clinicians warn of getting caught up in the relational games borderlines are said to be playing. Because of this, Lacanian psychoanalysis tends to regard the borderline as being a hysterically structured subject with exacerbated symptoms (Soler, 2003).

However, I argue that the woman has been hystericized in a society that fails to represent her Symbolically. She is forever caught in the whims of the phallic order, and continually forced to ask what the Other wants from her, only to be rejected or further penalized when she attempts to be or do what is demanded of her. It is in a clinical intervention, a classical Obsessional neurotic project that disavows the existence of the other (Fink, 1995), in which she is asked to solve the source of her suffering through an obsessional compromise, that is, through disavowing the Other as well, in the favor of objectivity and empirical science. The situation then is a woman, who is not fully castrated and thus has access to the jouissance of the Other, hystERICized in a patriarchal society that structures her as being the cause of the Other’s desire, to then heal herself by asserting there is no Other. Symptoms of identity disturbance and unstable interpersonal relationships, not to mention complaints of manipulation and seduction, are evidence of an inability to adequately carry out the demands being made of her.

While this situation is inevitably maddening, and I argue the cause of the exacerbation of hysterical symptoms, it is also the site of radical subjective potential, specifically in regards to those claiming to feel threatened by the borderline subject. The surplus erotism in this case is in her ability to pull the clinician, therapist, lover, etc. into a liminal space of subjective uncertainty, which they can later qualify as manipulation or seduction. However, the very nature of being manipulated or seduced, is to lose track of
one’s self, and to be uncertain about who was causing the individual to act. There is a sense of a loss of control over one’s behavior and cognitions. It is in these moments that the individual is able to access an outside to the phallic Symbolic through confrontation with a subject that is frequently on the edge of falling out of it. As mentioned earlier, to be enjoyed by the Other is to lose the self, and we are once again thrown into the sensual-death of erotism.

The borderline subject can be understood as a nexus point to an outside of the Symbolic that has the potential to radically alter the ways in which subjectivity is constructed, understood and lived. Her ability to induce this through simple contact is the reason in which she is handled so severely by psychiatric discourses. They demarcate her as dangerous, similar to those women mentioned earlier that were seen as consorting with the devil or being the site of man’s ruin. However, as capitalism continues to harvest the unconscious as a means to commodify it and reify the neoliberal subject, the borderline as the site of the Lacanian feminine may be the location for further subjective experimentation. In doing so, individuals with egos manifested of the signifiers from the phallic capitalist Symbolic will begin becoming-woman and subsequently experience a process of ego dissolution. From there, an ecological apprehension of the various contingencies and assemblages can become open to the unconscious once more.

References


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