

Russia's Borderline Personality

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Abstract: Russia behaves in a fundamentally different way. The authors compare Russia's international behavior with the clinical diagnoses of Borderline Personality Disorder. They describe various traits of this disorder with an emphasis on handling those suffering from it.

Keywords: Borderline Personality Disorder, codependence, countermoves, inferiority complex, interpersonal sensitivity, insularism, limit-setting, maladaptive traits, Manichaeism, mirroring, narcissism, neurosis, projection, projective identification, rationalization, situational competence, split cultural identity, sponging, syncretism, undefined boundaries, unstable identity, victimization

Any outsider who comes in contact with Russia soon realizes that it behaves in a fundamentally different way. Sometimes Russia reminds us of people we know, leading us to speculate that it must somehow have a collective personality, which makes it all the more challenging and alluring. We speak of Russia's mysterious "deep soul" (even "slave soul") gleaned by reading Fyodor Dostoevsky or listening to Aleksandr Skryabin. Fyodor Tyutchev famously remarked that Russia cannot be understood with the mind, only emotionally. Winston Churchill even more famously regretted that Russia "is a riddle wrapped in a mystery inside an enigma." A Gorbachev supporter once praised the former Soviet leader as a master psychoanalyst who knew how to change Russia whereas others would have failed.¹ A leading Western Sovietologist, Fiona Hill, once mentioned that Russia "resembles a paranoid individual."² Another one, Peter Rutland, warned that any attempt to dissect Russia's enigmatic personality is bound to raise more questions than answers. "Expect the unexpected," he advised.³

The observation that nations behave as individuals is anecdotal yet widespread, not really grounded academically, though both the realist and liberalist schools of international

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relations to some extent assume it. Development economists and even political scientists speak of whether a country has “matured.” Using Sigmund Freud’s psychoanalytic theories, Arthur Koestler spoke of the “political neuroses” of Germany, France, and the United Kingdom before, during, and after World War II.⁴ Russian analysts routinely use these tools to describe Russia, as have some Western specialists.⁵ Ambassador George F. Kennan in his 1946 “Long Telegram” and 1947 “X” article—probably the most influential early Cold War documents—spoke about “psychological analysis” in his attempt at dissecting the complex interactions of elites, history, and peoples that produced the Kremlin’s “neurotic” views and actions.⁶

In this spirit, we propose that Russia’s behavior has a striking resemblance to what is known as Borderline Personality Disorder (BPD), which is one of the ten personality disorders recognized by the psychological and psychiatric academy. Whether this resemblance is purely coincidental or the result of some dynamic we dare not speculate about remains beyond any discipline or theories of which we are aware. But the parallel is so obvious that it would not be surprising if by stating it we accidentally plagiarized someone else. According to the the *Diagnostic and Statistical Manual of the American Psychiatric Association (DSM-IV)*, a person can be diagnosed with BPD if they suffer from five of the following nine symptoms:

1. Frantic effort to avoid real or imagined abandonment;
2. A pattern of unstable and intense interpersonal relationships characterized by alternating between extremes of idealization and devaluation;
3. Identity disturbance: markedly and persistently unstable self-image or sense of self;
4. Impulsivity in areas that are potentially self-damaging;
5. Recurring suicidal behavior, gestures, or threats, or self-mutilating behavior;
6. Affective instability due to a marked reactivity of mood, such as episodic dysphoria (mixture of depression, rage, and despair), irritability or anxiety;
7. Chronic feelings of emptiness;
8. Inappropriate, intense anger or difficulty in controlling anger (including engaging in violence); and
9. Transient, stress-related paranoid ideation or severe dissociative symptoms.⁷

As is apparent even to casual observers, Russia suffers from at least the five needed for diagnosis.

The Borderline World

Stop Walking on Eggshells, a groundbreaking book on BPD (written for those who have to live with a borderline patient) by Paul T. Mason and Randi Kreger, can double as a diagnostic manual of Russia’s behavior—toward itself and others.⁸ It would be useful not only to U.S. and EU diplomats, but also to Russian leaders who, as Gorbachev, are forced to double as therapists. An analysis of the Russian mentality made by the sociologist Igor Yakovenko was presented to the readers of the journal *Russia in Global Affairs* by Alexander Muzykantsky.⁹ According to Yakovenko, the main features of the Russian mentality include syncretism, Manichaeism, insularism, and a split cultural identity. Let us take each one individually and compare them with the features of the BPD patient. *Syncretism* is “a state of society and culture that is characterized by the fusion and blending of their elements,” where “institutions such as the family or private property do not

exist.”¹⁰ Muzykantsky speculates that this “explains why the idea of universal equality is so popular in Russia, while the ideal society—i.e., Communist—. . . presents a utopian plan for the eventual merging of socialist nations” among other attempts to obliterate social distinctions and political divisions of power.¹¹ BPD patients, in turn, suffer from *undefined boundaries*, and “have difficulty with personal limits—both their own and those of others.”¹² Apparently, the source of this is the borderline’s *unstable identity*. One patient mentioned that “I was brought up thinking that the perfect intimate relationship had no boundaries. Boundaries only meant a rift between people. Boundaries meant I had to be alone, separate, have an identity. . . . I needed either total enmeshment or total isolation.”¹³ Another lamented: “since I didn’t know where I ended and the world began, the world was me and I was the world.”¹⁴ The Trotsky-Stalin debate on socialism in one country versus the Soviet quest for world domination, the current intervention in the “near abroad,” and other foreign policy issues dealing with isolation and engagement all indicate Russia’s difficulty with boundaries. It also brings to mind Henry Kissinger’s quote that Russia is always either contracting or expanding but cannot exist in stasis.¹⁵ Muzykantsky called this the “primacy of expansionism,” which has “always been related to violence (against nature, people or neighboring countries). . . .”¹⁶

The second Russian trait according to Yakovenko, *Manichaeism*, “sees the world as an arena of the eternal struggle between two forces—light and darkness, good and evil. In this struggle there are ‘them’ and ‘us.’ . . . A Manichee always needs an ‘enemy,’ real or imaginary.”¹⁷ The BPD patient alternates between extremes of idealization and vilification, whereby “relationships must be clearly defined. Someone is either their friend or their enemy [and they] also see themselves in black and white.”¹⁸ This trait is called *splitting*. This all-or-nothing thinking also is manifest in problem solving, whereby the borderline “may feel as if there is only one solution. Once action is taken, there’s no turning back.”¹⁹

Recall Russia’s vilification of the West in general and the United States in particular during the Cold War, the sudden idealization of the United States to an unrealistic degree in 1989–92, then the return to the notion that “America is plotting against us and is therefore our enemy.” This splitting or alternation can also take place in a split second with BPD. Similarly, Muzykantsky reminds us of Russia’s “swift transformation of some ‘friends’ into ‘foes’”—though the reverse is also true.²⁰ Koestler would probably make hay of Russia’s contemporary relations with Germany. Because borderlines “have a hard time integrating a person’s good and bad traits, their current opinion of someone is often based on their last interaction with them.”²¹

The third and fourth Russian “civilizational specifics” Yakovenko identified are harder to compare individually with particular BPD symptoms as outlined by the *DSM-IV*, but they can be compared with a combination of them. *Insularism* “posits that the real world wallows in vice, while all attempts to rectify and improve the situation are doomed to failure.”²² It is related to a “who cares” attitude, where “nothing will work anyway since the world is hopeless.”²³ *Split cultural identity* “can be described as the existence in society of two polar opinions on any matter of consequence [where there] can be no dialog between proponents of these positions. . . . In this situation the predominant aspiration is to suppress or, if possible, destroy an opponent.”²⁴ Muzykantsky reminds us that this trait leads to ineptness of the decisions made, because they are based on “deeply ingrained cultural stereotypes.” It is also related to the violence so prevalent in Russia’s history, and to the “squandering of resources, including human resources.”²⁵

The BPD patient suffers from an *unstable self-image*, impulsivity in *self-damaging behavior*, and from *intense anger*. These, in turn, reinforce one another and lead to additional symptoms and characteristics that resemble more specifically the last two of Yakovenko's traits for Russia, among other traits not explored by him.

Muzykantsky, citing another analyst's words, observed that "one of the weaknesses of [Russian] society and state . . . is that not only the nation, but even the intellectual, political and business elite lack a clear understanding as to the exact identity of our people and society."²⁶ Similarly, unstable self-image for borderlines is a lack of "an essential sense of themselves, just like they lack a consistent sense of others."²⁷ The *DSM-IV* mentions that this also includes "shifting goals, values, and vocational aspirations. There may be sudden changes in opinions and plans about career, sexual identity, values, and types of friends. These individuals may suddenly change from the role of a needy supplicant for help to a righteous avenger of past mistreatment."²⁸ This symptom also has some interesting consequences, as it leads to feelings of emptiness, abandonment, insecurity, and an inferiority complex, whereby the BPD patient is frantically "searching for something—anything—to hold on to. . . . A sense of inner emptiness and chaos renders the borderline patient dependent on others for cues about how to behave," which may explain his or her "frantic and often impulsive effort to avoid being alone."²⁹ In addition, the borderline has a sense that "no matter what their identity, they're never good enough," as they judge "themselves as harshly as they judge others."³⁰ At the same time, borderlines "look to others to provide things they find difficult to supply for themselves, such as self-esteem, approval, and a sense of identity."³¹ Russia, too, oftentimes derives its self-worth based on others, such as whether they fear it or not. While attempting to emulate others and copy their behavior, people with BPD readily use *victimization* as part of their identity formation and as behavior toward others. "Perhaps as part of their identity dilemma, some people with BPD often see themselves as helpless victims of other people—even when their own behavior has affected the outcome of a particular situation." Playing the role of victim "gives them the illusion that they are not responsible for their own actions."³² Another role common among borderlines is that of *caretaker*. "This more positive role may help provide them with an identity, heighten feelings of control, and lessen feelings of emptiness."³³ But many objects of their "affection" do not appreciate this role and may escape, despite the borderline's best efforts. One common reaction to this is "nobody cares about me as much as I care about them, so I always lose everyone I care about—despite the desperate things I try to do to stop them from leaving me."³⁴ But if these objects do not escape, a worse fate may await them because the BPD patient reasons that he or she is so defective, that if someone stays, "then something must be wrong with them."³⁵ Muzykantsky, citing both Aleksandr Solzhenitsyn and Dostoevsky, discussed Russia's readiness to emulate other countries since the reign of Peter the Great, yet also act as their putative protector.³⁶ These days we can also hear echoes of these tendencies in the Eurasianist ideology, or the frantic push to be accepted as a "great power," with a "zone of influence" or be included as nothing less than a "first among equals" in all pan-European negotiations, but later relishing the victim role after being rebuffed. Borderlines tend to "alternate between seeing themselves as either worthless or flawless." This odd coexistence of inferiority and superiority complexes in Russia was also explored by Richard Pipes (looking at polling data).³⁷ The "central irony" of BPD is that those afflicted "desperately want closeness and intimacy. But the things they do to get it often drive people away from them."³⁸ This brings to mind many episodes in Russia's history, one of the more recent being Moscow's constant provocations to the West

while in the same breath demanding more aid money or respect, a policy that then-Prime Minister Yevgeny Primakov called “aggressiveness without alienation.”³⁹

Self-injury, another of the borderline’s nine criteria, needs no elaboration when extrapolating to Russia’s history. It can range from the relatively mild to complete self-destruction. The *DSM-IV* notes that “these self-destructive acts are usually precipitated by threats of separation or rejection or by expectations that they assume increased responsibility.”⁴⁰ The milder acts typically involve “a pattern of undermining themselves at the moment a goal is about to be realized (e.g., dropping out of school just before graduation [. . . or] destroying a good relationship just when it is clear that the relationship could last).”⁴¹ The

reason may be that self-injury “is a coping mechanism that borderline personalities (BPs) use to release or manage overwhelming emotional pain—usually feelings of shame, anger, sadness, and abandonment.”⁴² Sometimes this may be done to get attention, or for identity-formation. Borderlines tend to “needlessly create crises or live a chaotic lifestyle” as they “may deliberately start arguments and [are] in constant conflict with others. [They] may also be addicted to drama, since it creates excitement.”⁴³ Similarly, their anger is

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“usually intense, unpredictable and unfettered by logical argument. . . . And it can disappear as quickly as it appears.”⁴⁴ The *DSM-IV* mentions that “[borderlines] may display extreme sarcasm, enduring bitterness, or verbal outbursts. The anger is often elicited when a caregiver or lover is seen as neglectful, withholding, uncaring, or abandoning.”⁴⁵

Projection, like victimization and *rationalization*, is another defense mechanism typical of BPs. It consists of “denying one’s own unpleasant traits, behaviors, or feelings by attributing them (often in an accusative way) to someone else.”⁴⁶ BPs “may use . . . real or imagined behavior to absolve themselves of responsibility for their own actions, or keep themselves from feeling shame for having engaged in the behaviors.”⁴⁷ One BPD patient confessed “my deepest fears and feelings of self-hatred were those I would project onto someone else because they were too frightening and disturbing to acknowledge within myself.”⁴⁸ Mason and Kreger give some examples of typical projections made by borderlines followed by what they probably were trying to say:

- You made me do it. (I did it for reasons I don’t understand.)
- You think I’m controlling? You’re the one who’s controlling! (I feel like I’m losing control right now and it scares me.)
- You never consider my needs. You’re always thinking about yourself. (My needs are so overwhelming to me that I can’t think about yours.)
- You’re the one who left this marriage. You’re not the person I fell in love with anymore. (I have to reject you before you reject me.)
- You hate me. (I hate myself.)
- You don’t think I’m good enough. (I don’t think I’m good enough.)⁴⁹

The following are statements often made by leading Russian officials in the last few years, followed by what they were probably projecting:

- The United States is a powerful country because it imperialistically exploits everyone else! (We are not powerful despite exploiting others.)
- Washington manipulated Ukraine and financed Yushchenko! (Ukraine chose a different path despite our frantic attempts.)
- The Yugoslav people are being finished off in cold blood in the heart of Europe because someone does not like the president of that country! (We have a history of killing people in cold blood for political reasons, also in the heart of Europe.)
- [George W.] Bush's antiballistic missile defense system threatens Russia and international security! (It blunts Russia from making credible posturing against the United States.)
- The United States plots to dominate us! (The United States ignores us.)
- [Britain's request for extraditing a suspect] was clearly a remnant of a colonial mindset. (We treat our former colonies as vassals.)

BPDs also have a tendency to “crack” their loved ones, reducing their self-esteem to such an extent that they begin to actually believe the verbal abuse and putdowns, making them more dependent on the borderline, which in turn ameliorates the latter's feelings of abandonment. This is called *projective identification*. It has a larger impact on children and young adults, whose “self-esteem is low and whose own identities are weak.”⁵⁰ This surely could raise some questions about the dysfunctional nature of some of the nations that spent a long time under Russian domination, such as Belarus. “Frequently, non-BPs become isolated because the BPs in their lives insist that they cut off their ties with others. Too often, the non-BP complies. . . . They stay in abusive situations because they believe they have nowhere else to go.”⁵¹ This also fits with the general belief that Russia does not feel secure unless its neighbors feel insecure.

Another tool borderlines use to get their way is *codependence*, which by now is all too familiar to the International Monetary Fund (IMF), though less so in its dealings with the Viktor Chernomyrdin and Primakov governments in the 1990s. It is defined as “denial, silent or even cheerful tolerance of unreasonable behavior from others.”⁵² This tendency to go through life trying to fix other people and rescue them encourages a certain behavior from the rescued. “Many non-BPs assume that by subordinating their own needs for the sake of the BP (or simply for the sake of avoiding a fight), they are helping. While the non-BP's motives are commendable, this actually enables, or reinforces, inappropriate behavior in the person with BPD.”⁵³ The “sordid tale of moral hazard” of the IMF's policy toward Russia has been explored before.⁵⁴

Psychologists remind us that those suffering from BPD do not have the same logic as the rest of us, sometimes describing their mental state as *magical thinking*.⁵⁵ Borderlines tend to guide themselves more by *feelings* rather than facts (as Tyutchev said about Russia). “People with BPD may unconsciously revise their version of the facts to fit their feelings about a certain situation. While it may be tempting to argue about the facts with a BP, doing so neglects the real source of the problem: the BP's feelings. . . . If an explanation feels right it *is* right. Facts that don't fit the BP's theories are conveniently denied or ignored.”⁵⁶

Control issues are also a defining characteristic of people with BPD, whereby they “may need to feel in control of other people because they feel so out of control with

themselves.”⁵⁷ They do this by “putting them in no-win situations, creating chaos that no one else can figure out or accusing others of trying to control them.”⁵⁸ Paraphrasing a patient, Dr. John Bradshaw wrote that “Control is a way to insure that no one can ever shame us again. It involves controlling our own thoughts, expressions, feelings and actions. And it involves attempting to control other people’s thoughts, feelings, and actions.”⁵⁹ Mason and Kreger added that “consciously or unconsciously, [borderlines] may discourage independence or independent thinking in people close to them.”⁶⁰ Curiously, they may suddenly choose the opposite approach, and “may cope with feeling out of control by giving up their own power; for example, they may choose a lifestyle where all choices are made for them, such as the military or a cult, or they may align themselves with abusive people who try to control them through fear.”⁶¹ Russia’s enmeshment with an ideology that promised to explain and solve everything—and then spend much blood and treasure imposing it on others—seems to fit this trait.

Situational competence, another trait typical of those with BPD, is the “ability to have competence in difficult situations while being incompetent in seemingly equal or easier tasks.”⁶² Many borderlines act like an “Upper Volta with nuclear missiles,” mastering better than anyone complex sciences while unable to manage even simple personal tasks; being fully composed in some situations while falling apart in others. We recall how a U.S. economist advising Russia in the early 1990s marveled at the complex mathematics the economists in the Russian government mastered, while unable to grasp the notion that a budget deficit causes inflation.

Although narcissism is a separate personality disorder in the *DSM-IV*, people suffering from BPD often also display *narcissistic behavior*. “Some people with BPD frequently bring the focus of attention back to themselves. They may react to most things based solely on how it affects them.”⁶³ Observers have noted a certain compulsive tendency by Russia to subvert the rules inside multilateral organizations such as the Council of Europe, the OSCE, the G-8, and even NATO.⁶⁴ Borderlines, in turn, “tend to change the rules, act impulsively, and demand attention on their schedule, not that of others.”⁶⁵ This seems paradoxical, noting again that borderlines desperately seek belonging and validation (as Russia clamoring to enter the G-8 and the other clubs) on the one hand, yet on the other subvert those relations once they are accepted. Hill’s intuition was correct—there are also some common symptoms between BPD and the Paranoid Personality Disorder, according to the *DSM-IV*.⁶⁶

It has also been noted “people with BPD have an amazing ability to read people and uncover their triggers and vulnerabilities . . . that they can use to their advantage in various situations.”⁶⁷ This *interpersonal sensitivity* can lead to readily finding weaknesses in others, and therefore knowing what buttons to push to get what they want. This is especially useful in exploiting diffusion of responsibility in others, by dividing and playing off potential rivals (such as parents and schoolteachers) against each other, to gain control of the situation. Of course, Moscow was accused of trying to do precisely this (with limited success) between Western Europe and the United States during the Cold War. Later, Moscow was accused of taking advantage of the diffusion of responsibility of Western powers and multilateral institutions (such as the EU and the OSCE) to pursue its interests in Moldova, Georgia, Belarus, Serbia, and other targets of its “caregiving.”

Why would an entire country (or at least its elites) suffer from the symptoms of a personality disorder? Many researchers have noticed that many BPD patients had a traumatic

upbringing and their behavior is the result of “maladaptive traits that stem from survival strategies developed early on in the life of the BP.”⁶⁸ Russia’s long, tragic history may have played a part in its current behavior, as some historians, and Kennan, have argued. But additional causal-link speculation will be left to others.

Handling Borderlines

How should non-BPs behave toward loved ones suffering from BPD? It certainly is no easy task dealing on a consistent basis with a person suffering from BPD. Non-BPs “often feel manipulated . . . , controlled or taken advantage of through means such as threats, no-win

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situations, the ‘silent treatment,’ rages, and other methods they view as unfair.”⁶⁹ A non-BP described it as “walking on eggshells trying to please [a borderline] and avoid a fight for speaking too soon, too quickly, in the wrong tone, with the wrong facial motions.”⁷⁰

Many non-BPs choose the easiest and most obvious option, which is to abandon the afflicted, despite the emotional pressure not to. This option is easiest when the relation between both is a chosen one. But when it is not chosen—the BPD sufferer is a family member or, in this case, Russia—“the choice is not stay or go as much as it is to set and observe your limits and not let the BP’s problems overwhelm your own life.”⁷¹ In the best of cases, and with discipline and luck, non-BPs can reach a certain level of success managing the individual suffering from BPD. But this success is really limited to letting BPs take responsibility for their own actions, and abandoning hope that the borderline will behave as the non-BP would like.⁷²

The first thing is to remember that those with BPD are not always in control of themselves and their behavior. One must recall that “‘manipulation’ or ‘emotional blackmail’ imply some sort of devious, planned intent. While this may be true for some people, borderlines who appear to be manipulative usually act impulsively out of fear, loneliness, desperation and hopelessness—not maliciousness.”⁷³ Unlike antisocials (also called psychopaths), BPs feel regret and shame, and oftentimes attempt to make up for their behavior. Most of the time they realize something is wrong with them. Maybe that is why no matter Russia’s behavior, it is difficult for even its most virulent critics to stay angry at it for long.

Because of their craving for a black and white world, those with BPD may also “provoke back to predictability.” Muzykantsky mentions how Russia felt more comfortable in a bipolar world where there was a clear “good” and a clear “bad.” The present multipolarity challenges Russia’s syncretism and Manichaeism, making her collective psyche (and that of some of her “geostrategists” or “polit-technologists”) unstable and anxious. Russia’s multiple provocations may be an unconscious way to drive the world back to bipolarity and dichotomous predictability—this time, the Eurasian versus Atlanticist worlds.

The first impulse for any decent partner is appeasement and indulgence. But this is a mistake, as “the sacrifices that people make in order to satisfy the borderlines they care

about can be very costly. Furthermore, the concessions are never enough."⁷⁴ Keeping this in mind, therapists recommend to know who you are, to act according to your own values and beliefs, and to communicate this to the borderline in your life. "People with BPD need their friends and family members to be stable and clear—not to reject them and not to smother them."⁷⁵ Paradoxically, this firm but polite attitude is appreciated by the borderline, who feels more secure. "Ironically, although they seem to act unpredictably, people with BPD often crave predictability in others . . . the more consistent and predictable your behavior, the easier it is for the person with BPD to manage their own feelings and behavior."⁷⁶ The *DSM-IV* mentions that those suffering from BPD "may show worse performance in unstructured work or school situations."⁷⁷ Soviet and Russian leaders are thought to feel more comfortable dealing with U.S. Republican administrations rather than Democratic ones. President Vladimir Putin actually said this in 2000 when Bush won the election, and repeated it in 2004 on the eve of the new U.S. election.⁷⁸

To avoid setting off a number of triggers or hot buttons with the notoriously sensitive borderline, therapists suggest "don't judge the person's feelings, deny them, trivialize them, or discuss whether or not you think they are 'justified' . . . while it's reasonable to ask someone to change their behavior, it isn't reasonable for you to tell someone how they should feel."⁷⁹ One approach therapists recommend is *limit-setting*, accompanied by polite but firm arguments, such as: "I understand that you feel this way, but I see it differently." Other arguments include "I would like to talk about this later when things have calmed down," and "I know you don't like this, but it's non negotiable."⁸⁰ Caregivers for borderlines are encouraged to stick to their message. When borderlines "don't have healthy limits, they need defenses such as control, withdrawal, blaming, rationalizing, intellectualizing, name calling, perfectionism, black-and-white thinking, threats, fighting about false issues, and excessive concern for the other—all defenses that damage intimacy. . . . By setting and observing limits, you are acting as a role model for the person with BPD."⁸¹ Perhaps Kennan's containment policy toward the Soviet Union—adopted by President Harry Truman and continued in subsequent administrations—reflected greater genius than its critics (including Kennan himself) assumed.⁸²

Occasionally, borderlines may initiate *countermoves* to attempt to break this limit-setting regime. They increase their violent behavior and outrages, or "could devalue you, accuse you of abandoning them, and claim that they never want to see you again."⁸³ This may be a good sign. "It is important to remember that countermoves are not a sign that what you did was wrong or did not work. It means that you have asked the BP to do something difficult."⁸⁴ In the end, consistency is key, as "you can't let unacceptable behavior go unnoticed, or you may actually reinforce it."⁸⁵

Seen in this light, Washington's continuous indulgences, appeasement, granting of veto power and other violations of limit setting toward Moscow during the Clinton administration was probably not the best course of action. It bred the very codependence that psychologists warn about with BPD patients. In the end, Moscow appreciated the limit-setting Ronald Reagan over those "weak" leaders granting concessions, such as Jimmy Carter or Clinton. George H. W. Bush's real, existing abandonment of the Yegor Gaidar government in 1992 as it attempted to implement radical economic reforms also did not help matters, as it almost confirmed the paranoid accusations by illiberal elements in Russia about America's intentions.

Overall, however, the United States acts surprisingly serene amid the torrent of paranoid accusations and provocations that occasionally emerge from Moscow. The elites in Washington seem to unconsciously realize that dealing with the Kremlin is like dealing with a difficult and hysterical adolescent or spouse that does not really mean what he or she says. The IMF seems to have also learned many lessons from its prior dealings with Moscow, as has the European Union (but not the OSCE, it seems). It helps that the United States (unlike the European Union) is usually quite self-confident and can therefore afford to brush off Moscow's tirades and calumnies without any damage to its self-worth or falling into the *projective-identification trap*. This is important, since when "our sense of obligation is stronger than our sense of self-respect and caring, people quickly learn how to take advantage . . . [and] if you lose it, then the borderline doesn't really have a supporter."⁸⁶ In a survey conducted by Mason and Kreger, a full 75 percent of non-BPs living with someone afflicted with BPD had to seek therapy themselves.⁸⁷

If the borderline is projecting, "you need to stop playing the game and decline to be 'it' in a respectful way."⁸⁸ One strategy is *mirroring*, whereby the projections and calumnies, instead of being absorbed by the non-BP (*sponging*), are politely and patiently reflected back to their rightful owner.⁸⁹ Blatantly or rudely contradicting the BPD sufferer is not an option because things can escalate. Employ an iron hand with a velvet glove, without sounding patronizing or condescending. The non-BP should also realize that the borderline may be expressing certain feelings with those hurtful words, and he or she should strive to decode and address those feelings without challenging the borderline's words. "People with BPD are not always in touch with their own emotions, and by listening closely you may be able to hear beyond the words and detect the feelings that lie beneath the surface."⁹⁰ Most important, the non-BP must show that he or she respects himself or herself.

It is not recommendable to "pretend that we're happy when we're not . . . [and] say that everything is fine when it isn't."⁹¹ Grigory Yavlinsky oftentimes criticized Washington's tendency to behave in this manner toward Russia, while its "body language" (expanding NATO) said something different. Yavlinsky echoed what therapists recommend with the BPD patient: "Just speak with the truth."⁹² This must be done tactfully, however, if it is to bear fruits. The United States tends toward compulsive do-gooding to others (in the Scandinavian tradition), but it also has the British "tough guy" predisposition to ignore or make fun of those who perpetually self-victimize. Both of these traits have to be balanced and handled correctly when dealing with a BP.

Hope for the Future

Some studies suggest that borderlines symptomatically improve over time.⁹³ This should be good news if Russia is to continue along its trajectory of more or less stable behavior in world affairs. Muzykantsky also predicts that we can expect Russia to become more normal as time passes.⁹⁴

Why would anyone choose to continue to have a relation with someone suffering from BPD? Mason and Kreger observed that, despite all their problems and challenges, "the person with BPD is incredibly interesting, engaging, bright, charming, funny, witty and alluring."⁹⁵ And this last comparison with Russia indeed leaves no room for argument.

NOTES

1. Leonid Polyakov mentioned this at a symposium celebrating ten years of perestroika. Transcript of his speech can be found in "Retrospectives at the Gorbachev Foundation," *Demokrati-zatsiya* 4 (Winter 1996): 21–22.
2. Fiona Hill, "Comments on Russian *Derzhavnost*" (lecture, Davis Center for Russian Studies, Harvard University, Cambridge, MA, April 24, 1998).
3. Peter Rutland, "Post-Sovietology Blues: Reflections on a Tumultuous Decade," *Demokrati-zatsiya* 11 (Winter 2003): 141.
4. Arthur Koestler, "A Guide to Political Neuroses," in *The Trail of the Dinosaur and Other Essays*, 215–31 (New York: Macmillan, 1955).
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