

**Reviewing Borderline Personality Through the Lens of *Baulism*: A Theoretical Exploration**

*Debasmita Das<sup>1\*</sup>, Debangshu Chanda<sup>2</sup>, Sanchita Ghosh<sup>3</sup> & Amitava Sengupta<sup>4</sup>*

**Abstract**

*Baulism* is an esoteric cult based lifestyle cum philosophy, based on detachment and search for self. It is one of the rare eastern Indic cultures, which incorporates lifestyle and serenity of oneself. In *Baul* philosophy, self-clarity means a practical picture of the mirroring the self, which can be realized and not explicitly empirically justified. People with *Borderline Personality* (BP) have an unstable sense of self leading to irritability, doubtfulness, and even self-harm. This lack of security leads to unsafe activities including multiple random relationships and sex, which includes a risk of sexually transmitted diseases. Self-compassion is a missing factor too. Since lifestyle is one primary element that impacts the psyche and the body, one with BP should try to modulate how one perceives oneself and others, in order to re-establish balance. The objective was to explore and understand BP through the lens of *Baulism*. *Bauls* have a penchant for self-stability and focus on humanism and kindness, while BP involves a sense of unstable self. Theoretically, it was found that there are chances for improvement regarding impulsivity and perceived vulnerability of persons with BP, if *Baul* practices are imbibed in one's life. Further modules could be developed for developing practical awareness regarding the self, through *Baul* songs and philosophy, practice of *Baul* rituals and music.

*Keywords:* Baulism, borderline personality disorder, unstable self-image

---

<sup>1\*</sup> Research scholar, West Bengal State University, Email: [debasmitadas178@gmail.com](mailto:debasmitadas178@gmail.com)

<sup>2</sup> Teaching assistant, West Bengal State University

<sup>3</sup> Coordinator, Department of Psychology, West Bengal State University

<sup>4</sup> Guest Faculty, Department of Psychology, West Bengal State University

The *Bauls*, sometimes referred to as *Baul Fakirs* belong to a devotional tradition motivated by religions and cults like Hinduism, Vasinavism, Buddhism, Sufi Islam and Bengali tradition, but yet markedly different from them, according to UNESCO (Hossain et al., 2018) According to Bengali grammar, the word '*Baul*' itself descended from the Arabic word '*Aul*' (Dey, 2012). In the history of West Bengal and Bangladeshi folk culture, *Baul* and *Baul* songs have a very important place. The main topic of *Baulism* is the romantic side of life - an extremely Eastern philosophy (Rashid, 2019). The primary component of the songs is *Dehotatva*, which is Sanskrit for "human body and spirit". The *baul* rituals are extremely secretive and involves peno-vaginal sexual intercourse, considering the body as the medium, to meet the 'self' or surpass the environmental unreal. The ultimate Divine i.e. '*Paramatma*' is conceptualized to be residing within The body or rather as the self within. The primary goal of *Baul* as an artform was to make the spirit and mind of a person evident, since *Bauls* are singing mendicants by nature.

Borderline Personality (BP) might seem to be too Western and clinical in nature, but it has the very concept of distorted self-image (Meares et al, 2011), which in fact has much to do with Eastern philosophy and self-exploration. The hallmark of Borderline Personality Disorder is a pervasive pattern of instability in affect regulation; problems in impulse control, interpersonal interactions, and self-image (Lieb et al., 2004). Identity disruption, which is defined by a noticeably and persistently unstable self-image or sense of self; inappropriate, excessive anger or difficulties managing anger, and persistent feelings of emptiness, generally manifests as a pattern of unstable and intense interpersonal connections (Sayrs & Whiteside, 2006). The human body itself is the actual shelter of the 'Absolute' and this body is considered as the 'Microcosm of the universe'.

A review of studies published for *Borderline Personality Disorder* (BPD) suggests a particular pattern of mood variability, such as: intense negative mood, frequent and sudden mood fluctuations than healthy control groups and patients with Major Depressive Disorder, and partial triggering of affect by external factors (Nica & Links, 2009). The results of a study found that higher levels of immature defenses were associated with greater self-esteem instability (Zeigler-Hill et al., 2008). BP symptoms are seen to be associated with lower Self Esteem (SE) (Richmond et al., 2021). A study even shows that impression formation in BP may be characterized by unstable and negative evaluations of conjugal life (Mongeon & Gagnon, 2017). Compared to women who had social phobia and healthy comparison subjects, women with BPD reported higher levels of state shame, guilt proneness, and shame and guilt proneness. Compared to women in the comparison groups, women with BPD had an implicit self-concept that was found to be more shame-prone than anxiety-prone (Rüsch et al., 2007). Regarding therapeutic intervention, a study found that the mindfulness group reported much lower levels of anger following the self-focus phase and lasted on the distress tolerance test significantly longer than the ruminating group. The results are consistent with past research that indicates that various forms of self-focused attention have various impacts and that, for those with BPD, mindful self-observation is a helpful alternative to ruminating when feeling furious (Sauer & Baer, 2012). Similarly, other interventions based on Eastern perspectives could be helpful for persons with BP and/ or BPD. Hence, in this paper, the concept of self in *Baul* philosophy and the unstable self-image of persons with BP will be explored theoretically, for investigating the possibilities of positive adaptive alternative behavior or daily life practices based on *Baulism*, rather than maladaptive behaviors.

### **Rationale**

Persons with Borderline Personality (BP), have an unusual and unstable self-image which is really interesting to note, since a range of life problems stems from it. On the other hand *Baulism* deals with self-search and self-contentment. Therefore *Baulism* might be an effective tool to understand the factors behind the distorted self-image of persons with BP, since there are many common areas in both which are distinctly poles apart. Also, it might provide clues to solve the 'self' and 'validation' related jigsaw of persons with BP traits.

Moreover clinically there is a trend of persons with BP or BPD to be a dropout case at the clinic. This is one challenge faced by clinicians delivering Dialectical Behavior Therapy (DBT). To overcome this hurdle the therapist-patient narrative could be blurred, which in turn might be therapeutic (being potentially less threatening) \_ through the usage of lifestyle modulation etc., based on *Baul* philosophy and meditative practices.

### **Method**

The aim of the study is to explore the self-concept of people with Borderline Personality Disorder, through the lens of *Baul* philosophy. Hence, secondary sources including online journals, videos and books were used for conducting the archival research.

### **Discussion**

BPD, a disease that has received much criticism, was finally recognised in DSM III in 1980. The phrase "borderline" didn't exist earlier. Early psychoanalysts launched a counterattack when Kraepelin coined the term "excitable personality" and demonstrated that a congenital brain impairment was to blame for its etiology. Biology was supplanted by psychology, Victorian doctors by modern Freudians, and psychiatry by psychology as it dragged its feet into the 20th century.

## **Theories of Borderline Personality**

The term "borderline" was coined by two American psychiatrists, Adolph Stern and Robert Knight. Both thought that individuals were just so, walking a thin line between neuroses and psychosis. In order to determine which side of the "boundary" you belonged to, you had to determine whether reality held steady under pressure.

### ***Biosocial Theories***

**Emotional Dysregulation.** Linehan (1993) has claimed it as a disorder of emotional regulation and emerges from transactions between individuals with biological vulnerabilities and specific environmental influences. This deficit is manifested only when the pre-borderline child's experiences are not validated.

### ***Biological Theories***

**Interpersonal Hypersensitivity.** According to Gunderson's (2008) theory, heightened sensitivity to social cues and reaction to them are inherited traits. Even minor slights and annoyances can be extremely distressing for a pre-borderline child. The BPD person responds to perceived failures of support from others by believing that either they are intrinsically terrible ("bad self") or that this is terribly unfair ("bad other"). Being alone is unbearable and can result in dissociative, paranoid, or impulsive experiences that force others to get involved.

Kraepelin theorized that neurotransmitters and external forces like punishment, disregard and ignoring emotions. According to him, such persons do display higher variations in emotional balancing: from outbursts of limitless fury, to shedding tears without a cause; from suicidal ideation, to certain hypochondriacal symptoms or complaints. According to Kraepelin, these symptoms were produced due to metabolic anomaly.

Neo-Kraepelinian theory mainly led by Guze is a predisposition-stress model in which biology determines the specificity of mental disorders and psychological and social stressors are precipitants that exert a non-specific effect.

For Kretschmer, these symptoms are actually a paramount manifestation of a continuum of human temperament, ranging vastly from the borderline to the schizoid.

Schneider believed that the main constitutional obstacle was a result of the subject's own organic structure. According to Akiskal, who shared Kraepelin's perspective, borderlines and their family members commonly exhibit traits of a cyclothymic temperament.

Other academics too have looked into the relationship between specific neurotransmitters and borderline personality. For example, according to Siever and Davis, the disease is characterized by aberrant impulse control, where serotonin levels are low and norepinephrine levels are high, resulting in activation without behavioral inhibition. Serotonin has been connected to self-directed aggressiveness like suicidal ideation and risk (Van Praag, 1991) as well as impulsive aggression, a key characteristic of the illness. It is found that self-directed violence is most prevalent in personality disorder clients with the most severe serotonergic abnormalities (New, Trestman, Mitropoulou, & Benishay, 1997).

### ***Psychodynamic Theories***

Early analysts recognized three levels of functioning: normal, neurotic, and psychotic. Although everyone was expected to function at one of these levels, it eventually became apparent that some subjects did not fit neatly into this threefold scheme. The term borderline group of neuroses, considered neurotic but resistant to the couch, was first coined by Stern (1938). He outlined and examined ten traits for these initial borderlines, including well-known

traits like a quick temper, melancholy, or nervousness in reaction to interpretive queries about self-worth, etc.

**Excessive Aggression.** According to Kernberg (1967) excessive aggression alternates between inappropriate and offensive expression and being defensively suppressed and split off (“disowned”), in which case it gets directed at the self (“bad” self) or projected onto others (“bad” other, “good” self).

Knight (1953) asserted that there is a major reduction in the traditional ego functions of secondary-process thinking, integration, realistic planning, adaptability to the environment, maintenance of object connections, and defenses against fundamental unconscious drives. The relevance of ego weakness and its relationship to psychotic episodes were made clear by this. The borderline's ego is "laboring badly" as a result of their painful pasts and dysfunctional relationships. Certain ego functions, like conventional (surface level) adaptation to the environment and superficial maintenance of object relationships, may show varying degrees of intactness, but may be severely impaired.

### ***Interpersonal Theories***

Despite their typical characteristics of being tough, irrational, impulsive, and aggressive, borderlines can function steadily for extended amounts of time in specific situations. When given structure, they perform well; nevertheless, without it, they do substantially worse. It has been found that a borderline's ability to maintain harmonious relationships with others is greatly improved by finding a partner who offers a dependable and welcoming environment. In these situations, the relationship's structure is maintained by clearly stated and achievable expectations. Borderlines frequently fall into stereotyped misinterpretations of their present mate's motives or behaviors, derailing any chance for interpersonal stability. Few people will be willing to

establish the "holding environment" outside of the treatment office for those who experience greater emotional dysregulation, more identity disturbance, and/or a less cohesive sense of self.

According to Benjamin (1996), borderlines want nurturance and dread being abandoned. She lists four traits that influence the development of a borderline personality. Family conflict, which includes elements like "fights, affairs, abortions, adultery, drunken outbursts, suicide attempts, murders, incarceration, disowning, and illegitimate births," comes first, being the most important.

*Baul* philosophy and body worshipping rituals have always been a center of attraction in culture and scientific literature because of their unparalleled mode of thinking. Such an 'unparalleled' mode is also seen in BP, with the only difference that the former does not embody any self-harming behavior or displays vengeance towards others; while the latter does display the mentioned. In gist, BP displays more negative behavioral tendencies and maladaptive cognition, unlike the *Bauls*. When one looks through the lens of *Baulism*, BP seems to be nothing but an unstable soul in search of 'somebody else' to satisfy or provide contentment to their needs, so as to be safe and secure. In the same line, they fail to acknowledge the very reality that every person is a different entity and that their sense of abandonment is rather unreal. *Bauls* do have a tendency to socially disengage themselves, but through positive adaptive behavioral patterns, which includes creativity. The issue of substance use (especially Cannabis) can be the only challenging phenomenon, as far as deriving principles of *Baulism* is concerned, relevant and prominent in case of *Baulism*, since it sometimes generates blame. According to popular belief, by consuming Cannabis as a part of ritualistic practices, *Bauls* gradually lower their breathing rhythm (domer kaaj), which gives them complete mastery over all five senses and eventually leads to detachment from passions and sensory materiality (Ferrari, 2012). However this is not

commendable in general, since it is a psychoactive drug. For example, cannabis-related presentations at the Emergency Department (ED) can include psychotic tendencies, anxiety, suicidal ideation, etc., which can account for up to 30% of cannabis-related visits. Up to 50% of patients with cannabis-related psychotic symptoms, who require hospitalization, may further develop schizophrenia (Crocker et al., 2021).

The *Baul* cult has some unique mystic and obscure religious practices that make it stand out from other religions. It should be mentioned that there are no established social traditions or religious rites that govern the *Bauls'* social and religious lives. Their style of life is founded on an endeavor to realize the 'Absolute' (Biswas, 2016). Long-term psychotherapy may be a beneficial kind of care for those with BPD, according to researchers. Therefore, less intensive and less costly forms of treatment need to be developed (Zanarini, 2009). Thus we argue considering inclusiveness and diversity.

### **Self-search: Baulism and Rabindranath's take**

As per one of Lalou's songs "*Aaponare aapni chine ne*": "Know yourself; after days, whose name is elusive - How shall I identify him? If I had known you, I would have had the treasure, placed by your feet". Another song "*Milon hobe koto dine*", speaks about the desire to meet and know the real self, within oneself. A song by Rabindranath Tagore. "*Apnake Ei Jana Amar Phurabe Na*" also speaks of the similar notion: "My need to know myself is unending; with this each day my Lord I learn thee; through endless cycles of life and death". Another of his songs "*Dekhechi rupsagore moner manush*" states this search as: "I dive down into the depth of the ocean of forms, hoping to gain the perfect pearl of the formless", emphasizing the role and need to transcend. All such songs lead to an introspective theme, where initially one is unknown to oneself. Similarly, persons having BP, too have a feeling of 'emptiness' devoid of the

understanding of oneself. Another *Baul* song “*Aamar bhetor aami ke ta khobor rakhi na*”, directly addresses this issue in general.

### **Self: Unstable sense of self versus self-contentment**

Persons with BP have a tendency to be ‘insecure’ about their solo living, due to the fear of abandonment. This creates a sense of self which is supposedly unstable to survive on itself. This very negative anticipation also initiates an overestimated sense of ‘devalued self’ too. People with BP have a "pervasive pattern of instability" that is visible in three key areas: affect, interpersonal connections, and self-image (Zeigler-Hill & Abraham, 2006). First, despite its theoretical and diagnostic implications, the relationship between BPD and unstable self-esteem has not been shown empirically. BPD is thought to be related to abrupt swings in perceptions of self-worth. Second, it has been demonstrated that BPD predisposes to significant baseline negativity in mood and affective instability. Thirdly, BPD is thought to be linked to serious interpersonal issues and relationships, including abrupt changes in how highly one values and regards others.

Within the *Baul* community, the ultimate Divine i.e. ‘Paramatma’ is conceptualized to be residing within The Body or rather as the self within. It is one of the rare eastern Indic cultures, which incorporates lifestyle and stability of oneself. Hence, *Bauls* are none but the believers who offer their worship to the ‘Human’ Guru leaving all speculative ideology (Pramanik, 2021). In *Baulism*, self-clarity means a practical picture of the self, which can be realized and not explicitly empirically justified. Hence *Baulism* is all about the stability of oneself.

### **Behavior: Sado-masochistic tendencies versus self-love**

Persons having BP or with BP traits, indulge in various forms of sado-masochistic behavior. As Parvathy Baul says, “*you could not hold the water of love in your half-baked pot*”.

*This indicates the need for self-compassion and self-understanding, before anything else”* (Ajab shahar - kabir project, 2020). The secret doctrine of sexual union is taught by the *Bauls* to the disciples only, who perform songs and practice their arts joyfully - for spreading happiness and mental joy. As Duddu (A *Baul* guru of the 18th century) says, “*Aatmasukh byabhichaar*” which roughly translates to “don’t find happiness for yourself, try to give happiness to others” (Lorea, 2013). This however means that to find happiness in oneself, one has to disseminate happiness among others. Principles of one’s duties are hence grounded in self-esteem resulting from self-love (Dastagir, 1995). Infinite happiness is felt when the human soul discovers it is *Moner Manush* (a man of the heart), the so-called “genuine man of the heart,” according to the myth. It is perplexing how *Bauls* aim to have a relationship in which they embrace this formless deity because *Moner Manush* is the formless absolute. *Bauls* want to embrace this *Moner Manush* or ‘formless being’, which is not at all in the shape of a ‘human being’ in any way. The concept of *Moner Manush* can be conceptualized as an ‘unadulterated state of joy’ (Biswas, 2016). For *Bauls*, the freedom of living fully according to his own feelings, i.e. being madly in love with the ‘Divine Self’ (Kuckertz, 1975), where this love operates as a result of self-love. A popular saying goes “*jaha achhe bhande taha ache brahmande*” - whatever is present within the body is present in the Universe, as per the *Bauls* - which is in line with the Yajur Veda saying: “*Yat pinde tat brahmande*” (Griffith, 1899).

#### **Attention seeking behavior versus free spirit:**

Individuals who have BP, display various ‘attention seeking behaviors’ including self-harm. The word “*Baul*” has its etymological origin in the Sanskrit word ‘*Vatula*’ meaning ‘mad’, or from ‘*Vyakula*’ indicating impatient or eager. The word ‘*Baul*’ is sometimes used to understand the carefree and disheveled nature of a particular person. However this ‘different’

look is not associated with attention seeking behavior. This behavior is associated with the search for the inner-self and not being too dependent on others attention or support.

### **Vengeance versus humanity**

Revengefulness is a one of the many traits of BP (Snyder & Pitt, 1985; Martino et al., 2015; Martino et al., 2018). Hence, kindness is one of the keys for managing BP traits, as indicated in other researches too (Sandage et al., 2015). Religious tolerance and love for humanity is the central theme of Lalon's philosophy (Rashid, 2019). The fundamental message of this philosophy is to love fellow human beings (Pramanik, 2021).

### **Relationships: Instability versus Stability**

Impulsivity is displayed by persons with BP, while entering into relationships almost 'compulsively', sometimes as a reaction or coping related to the feeling of 'hollowness' within (Zimmeroff & Hartman, 2003). Hence, there lies a certain instability in their relationships. A study showed that 46 percent of the participants impulsively entered into sexual relationships with unknown or less known partners (Sansone & Sansone, 2011). People with BPD, particularly those who use drugs, are more likely to engage in sexual risk behaviours, which are connected to greater rates of rape, romantic partnerships, unintended pregnancies, and sexually transmitted diseases (STDs) (Fras, 2016). Whereas *Bauls* do not feel hollow, rather they have a sense of completeness and a certain level of sufficiency. This is because they believe that the universe resides within the framework of their bodies (internally) and that they need not depend on others (externally).

### **Therapist as a Guru - an Eastern perspective**

According to a *Baul* song, "If you want to bake your pot, go to the Guru's house, and bake it in the fire of love". The word 'Guru' is derived from 'gu' - meaning 'darkness of

ignorance' and '*ru*' - meaning 'the divine light of knowledge'. *Baul* gurus are sometimes classified as teachers of theories and practices with regard to conception and contraception (Lorea, 2014). They are regarded as the guardians of the “secret of both suppression and enhancement of fertility, for knowledge of conception is also knowledge of contraception” (Openshaw, 2004). ‘Therapist’ is a very Western concept, the definition of which is debated but heavily relies on the agency for delivering some or the other sort of psychotherapy, counseling etc. A therapist helps to develop insight within a person. A *Guru* similarly shows the path through which one may travel to embody true knowledge about oneself. Secondly, a therapist considers the belief and value system of a person while delivering any therapeutic approach. Similarly, a *Guru* guides the amateur individual while accepting and considering the person’s background. Hence the understanding of a therapist as an additional ‘curing entity’ and the visualization of oneself as a ‘patient to be cured’ needs to be altered.

### **The concept of chakras - understanding ‘self’**

A couple of decades ago, it was believed that the seven chakras are worthy of discussion only for spiritual development. However, recent scientific studies have proven the opposite, uncovering several regulatory ‘centers’ in the human body that are deeply related to human psychology (Coward, 1985). *Baulism* has derived the system of *Chakras* from both Buddhist *Tantra* and Hindu *Tantras*, incorporating both *Mudras* and *Mantras* of *Tantra* in their practices (Biswas, 2016). Hindu *Tantra* claims to have been inspired by the exchange (as *Agam Tantras* and *Nigam Tantras*) between *Parvati*, who is portrayed as the *Shakti* and *Shiva*. *Shiva* is the container, and *Shakti* is the root. According to this theory, all aspects of life are considered to be natural yet still require transformation due to the growth of the *Chakras*. The *Baul* cult is sometimes called *Sahajiya*, where *Sahaj* refers to ‘natural’ or ‘innate’. *Bauls* try to merge cosmic

consciousness (*Purusha*) and cosmic energy (*Prakriti*) within the boundaries of the human body. *Purusha* is generally considered to be masculine whereas *Prakriti* as feminine. *Bauls* aim to raise *Kundalini*, believed to be resting at the base of the spine, to the crown of the head (Sengupta, 2017).

*Shakti* worship through *Tantra* began to gain popularity in the latter part of the Gupta era. Tantrayana, also known as Tantric Buddhism, is a new movement in Buddhism that began to take off in the eighth century A.D. These Tantric practices and beliefs had a significant impact on Bengal. Energy psychology is a revolution in our understanding of psychological functioning and treatment of psychological problems (Gallo, 2009).

Jung's interest in these yogas is based on their power to catalyze a spiritual development of personality. In his lectures He observed, yoga involves both psychology and philosophy. Hence, to be a philosopher in the East one requires to undergo the spiritual development of yoga as a way to release and 'self-realization' (Coward, 1985).

### **Establishing balance within oneself**

Each of the seven *chakras* is claimed to correspond with a different set of skills, expressions, physical health, and states of our mind. *Chakras* are often thought to be connected to the body's nerve centers, glands, and major organs. Two conflicting forces are balanced by *chakras*. Healthy thought and behavior depend on the harmony of the *chakras*' excitement and inhibition. The two antagonistic neurotransmitters are glutamate and GABA. On the other hand, if a brain is regulated by GABA, it would only be capable of calm and gentle actions, with no synchronization needed for meaningful communication between brain areas (Sears & Hewett, 2021). A brain dominated by glutamate would only be capable of stimulating itself in repeated bursts of activity. In the middle, where a balance between these two extremes exists, healthy

brain activity flourishes (Austin, 1998; Cahn et al., 2006; Judith, 2004). This might help in the development of one's balanced identity.

### **Meditation and cognitive functioning**

Archival research findings suggested that practicing *Baulism* involves meditation (Sengupta, 2015), leading to frontal lobe activity (Wang et al., 2011) and importance of the self (Choudhury & Roy, 2014), leading to better cognitive functioning, unlike persons with BP, who have delayed and maladaptive decision making (Bazaniz et al., 2002), resulting in maladaptive and impulsive behavior. However, in case further modules of meditative practices are developed empirically targeted at persons of BP, it should be noted that cannabis use and other potentially alarming rituals should be actively avoided.

### **Engaging in adaptive behavior - a therapeutic approach**

Now comes the essentiality of the outcomes of this research - therapeutic possibilities. Numerous psychological benefits of meditation have been demonstrated, including reduced anxiety, increased happiness, reduced pain, increased awareness towards emotional sensations and empathy, access to repressed material in the unconscious, and increased feelings of self-actualization, self-responsibility, and self-direction (Kelly, 1996). The *Manipura Chakra*, also known as the power center, is the third *chakra* situated between the solar plexus and the navel at the front of the spine. It is thought to control our metabolism as well as our volition, autonomy, and personal strength. This chakra provides us with vitality, efficiency, spontaneity, and non-dominating power when it is functioning properly. If functioning properly, we get strength, tenacity, and are focused and confident. In our teenage years, as we start to define our own identities, the third chakra develops. Teenagers' primary responsibility, according to Erik Erikson, is to resolve the identity versus role confusion issue. According to research, adolescents'

mental health is positively correlated with having a consistent and strong sense of who they are (Erikson, 1968). Satisfaction providing, rich-quality relationships with others (Walsh et al., 2010) and the formed sense of identity (Dumas et al., 2009) are associated with better mental health and psychological well-being of adolescents. This is in the same line as the Eastern perspective, according to which, our ability to build personal strength, autonomy, self-esteem, individuality, and achieve our goals are the challenges that arise in this situation. The third *chakra* is where the ego and our need for power, respect, identity, and recognition first appear.

Unconditional love is found in the *Anahata chakra*, which is opened during a *Kundalini* meditation. Any effective transformative system is based on the principle of unwavering love. If the heart center is asleep, love is conceptualized to be unable to flow, which reduces the work's efficacy. Practitioners of such meditation gain the ability to quiet the mind and enter the flow of profound love for all people in general. Every session involves bringing this mood in, and the client has a profound experience of it. This is a connection between souls that goes beyond simple empathy. As a result, both the client and the therapist find satisfaction in it. The person engaging in transformative work starts to feel strength emanating from inside as they let go of the codependency, victimhood, and powerlessness of the third *chakra*. This is not the violent power that comes from dominating; rather, it is the kind strength that comes from a strong sense of accountability and self-worth; internal power, if you will. The heart *chakra* is unblocked once this lower chakra activity is finished, and love starts to flow. This results from respecting one's authentic self and having a strong internal sense of merit. Hypnotherapy, Psychodrama, 'Breath therapy', 'Kundalini meditation', and 'interpersonal clearings' are all Personal Transformation techniques that combine to uplift any blocked energy and eventually unblock the chakras (Zimberoff & Hartman, 2003).

Therefore, such *chakra* balancing should be targeted biologically as well as through the practice of various *mudras*, *pranayamas*, *asanas*, and simplistic *Baul* philosophy. Moreover, the *Bauls* teach that nature is the best ‘*Guru*’ for learning the technology of nature-ecological manifestation, management (Iqbal et al., 2016), and the importance of humanity (Ahsan, 2018). These teachings could be incorporated into lifestyle management, while specific modules of psychoeducation and music therapy could be established after further qualitative and quantitative research is conducted.

### **Conclusion**

This study indicates that *Bauls* and people with BP have some features which fall under similar domains related to ‘Self’, but are theoretically very contrasting to each other because the *archeology of knowledge* is different for each of these two different worldviews. It is also indicated that incorporating *Baul* philosophy, *Baul* musical traditions, body worshipping practices targeted at specific *Chakras* may be effective for the persons with BP to overcome their issues regarding impulsivity, sense of hollowness, vulnerability etc.

### **Limitations**

In depth reviews of books based on *Baulism* which are not available in the digital marketplace could have added more value to this review. Thematic analysis of interviews conducted on *Bauls* and persons diagnosed with BP would have been more effective.

### **Further scope**

Further qualitative research could be conducted to understand the effect of meditations targeted at specific *Chakras*, practice of various *Mudras*, *Pranayamas*, *Asanas*, following daily-life simplistic *Baul* philosophy, and the body worshipping *Baul* rituals with respect to people with BP/ BPD. Also interviews of practicing *Bauls* and persons with BP/ BPD could be effective.

Quantitative research on the biological factors like neurotransmitters (Glutamate, Serotonin, GABA, Dopamin), amygdala and limbic system activation which are supposedly linked to BP or BPD.

**Conflict of interest**

None

**Funding**

No funding was received for conducting this study.

## References

- Ahsan, M. T. (2018). *Rethinking Sufism and Baulism in Bangladesh: A Post-Colonial Perspective*. Ajab shahar - kabir project (2020, July 16) 'Raakhite Narili Premojol' sings Parvathy Baul. [Video]. YouTube. [https://youtu.be/MPNhcDTeC\\_E](https://youtu.be/MPNhcDTeC_E)
- Austin, J. H. (1998). *Zen and the Brain: Toward an understanding of meditation and consciousness*. Cambridge: MIT Press
- Bazanis, E., Rogers, R. D., Dowson, J. H., Taylor, P., Meux, C., Staley, C., Nevinson-Andrews, D., Taylor, C., Robbins, T. W., & Sahakian, B. J. (2002). Neurocognitive deficits in decision-making and planning of patients with DSM-III-R borderline personality disorder. *Psychological medicine*, 32(8), 1395–1405.  
<https://doi.org/10.1017/s0033291702006657>
- Bender, D. S., & Skodol, A. E. (2007). Borderline personality as a self-other representational disturbance. *Journal of personality disorders*, 21(5), 500-517.  
<https://doi.org/10.1521/pedi.2007.21.5.500>
- Biswas, D. (2016). Baul: In the Quest of Moner Manush. *The Criterion: An International Journal In English*, 7 (1), 53-59.
- Capwell, C. H. (1974). The esoteric beliefs of the Bauls of Bengal. *The Journal of Asian Studies*, 33(2), 255-264. <https://doi.org/10.2307/2052187>
- Chakrabarti, S. (2016). *Performing [As] Bauls: Renegotiating 'Folk'Identities Through the Lens of Performance*. Stanford University.
- Choudhury, S., & Roy, A. G. (2014). Sanchita Chowdhury & Anjali Gera Roy: Bâuls, Mystic Minstrels of Bengal. *Muse India*, (58).

- Chowdhury, M. S. (2021). A comparative study to identify the impact of Fakir Lalon Shah's ideology in modern vision management concept of the organisation. *Texas Journal of Multidisciplinary Studies*, 1(1), 57-70. <http://dx.doi.org/10.2139/ssrn.3934797>
- Coward, H. (1985). Jung and Kuṅḍalini. *Journal of Analytical Psychology*, 30(4), 379-392. <https://doi.org/10.1111/j.1465-5922.1985.t01-1-00379.x>
- Dasgupta, A. (1994). The Bauls and their heretic tradition. *Social Scientist*, 70-83. <https://doi.org/10.2307/3517903>
- Debnath, A. (2020). Global bauls, local bauls: community, violence and everyday life. *Globus et Locus*, 3. DOI: 10.12893/gjcpi.2020.3.7
- Dey, F. (2012). Folk Culture of West Bengal. *Journal of Institute of Landscape Ecology and Ekistics*, 35 (1). ISSN, 9714170.
- Dumas, T. M., Lawford, H., Tieu, T. T., & Pratt, M. W. (2009). Positive parenting in adolescence and its relation to low point narration and identity status in emerging adulthood: A longitudinal analysis. *Developmental Psychology*, 45(6), 1531. <https://psycnet.apa.org/doi/10.1037/a0017360>
- Erikson, E. H. (1968). *Identity: Youth and crisis*. New York, NY: W. W. Norton.
- Feliu-Soler, A., Pascual, J. C., Elices, M., Martín-Blanco, A., Carmona, C., Cebolla, A., Simón, V., & Soler, J. (2017). Fostering Self-Compassion and Loving-Kindness in Patients With Borderline Personality Disorder: A Randomized Pilot Study. *Clinical psychology & psychotherapy*, 24(1), 278–286. <https://doi.org/10.1002/cpp.2000>
- Ferrari, F. M. (2012). Mystic Rites for Permanent Class Conflict: The Bauls of Bengal, Revolutionary Ideology and Post-Capitalism. *South Asia Research*, 32(1), 21-38. <https://doi.org/10.1177/026272801203200102>

- Fonagy, P. (2000). Attachment and borderline personality disorder. *Journal of the American Psychoanalytic Association*, 48(4), 1129-1146.  
<https://doi.org/10.1177/00030651000480040701>
- Frías, Á., Palma, C., Farriols, N., & González, L. (2016). Sexuality-related issues in borderline personality disorder: A comprehensive review. *Personality and mental health*, 10(3), 216-231. <https://doi.org/10.1002/pmh.1330>
- Gallo, F. P. (2009). Energy psychology in rehabilitation: Origins, clinical applications, and theory. *Energy Psychology: Theory, Research, & Treatment*, 1(1), 57-72.
- Griffith, R. T. H. (Ed.). (1899). *The texts of the White Yajurveda*. EJ Lazarus and Company
- Gunderson, J. G., Herpertz, S. C., Skodol, A. E., Torgersen, S., & Zanarini, M. C. (2018). Borderline personality disorder. *Nature Reviews Disease Primers*, 4(1), 1-20.
- Halder, P. P. (2018). Study of *baul* community family relation and their philosophy: An overview of West Bengal. *International Journal for Advance Research and Development*, 3(4).
- Hochschild Tolpin, L., Cimboic Gunthert, K., Cohen, L. H., & O'Neill, S. C. (2004). Borderline personality features and instability of daily negative affect and self-esteem. *Journal of Personality*, 72(1), 111-138. <https://doi.org/10.1111/j.0022-3506.2004.00258.x>
- Hossain, A., Montu, S. I., & Azad, M. A. (2018). The Baul Tradition in Bangladesh: Sustainability activism for a meatless dietary culture. In *Handbook of Research on Social Marketing and Its Influence on Animal Origin Food Product Consumption* (pp. 163-171). IGI Global. 10.4018/978-1-5225-4757-0.ch011

- Iqbal, M. H., Ahmed, F., & Habib, I. (2016). Precepts and practices of ecological sustainability in the city as reflected in Baulism: An empirical evidence. *IOSR Journal Of Humanities And Social Science*, 21 (9). DOI: 10.9790/0837-2109062935
- Judith, A. (2004). *Eastern body, western mind: Psychology and the chakra system as a path to self*. New York, NY: Celestial Arts.
- Kelly, G. F. (1996). Using meditative techniques in psychotherapy. *Journal of Humanistic Psychology*, 36(3), 49-66. <https://doi.org/10.1177/00221678960363004>
- Kerr, I. B., Finlayson-Short, L., McCutcheon, L. K., Beard, H., & Chanen, A. M. (2015). The 'self' and borderline personality disorder: conceptual and clinical considerations. *Psychopathology*, 48(5), 339-348. <https://doi.org/10.1159/000438827>
- Keuroghlian, A. S., Frankenburg, F. R., & Zanarini, M. C. (2013). The relationship of chronic medical illnesses, poor health-related lifestyle choices, and health care utilization to recovery status in borderline patients over a decade of prospective follow-up. *Journal of Psychiatric Research*, 47(10), 1499-1506. <https://doi.org/10.1016/j.jpsychires.2013.06.012>
- Kuckertz, J. (1975). Origin and construction of the melodies in Baul songs of Bengal. *Yearbook of the International Folk Music Council*, 7, 85-91. <https://doi.org/10.2307/767591>
- Lieb, K., Zanarini, M. C., Schmahl, C., Linehan, M. M., & Bohus, M. (2004). Borderline personality disorder. *The Lancet*, 364 (9432), 453-461. [https://doi.org/10.1016/S0140-6736\(04\)16770-6](https://doi.org/10.1016/S0140-6736(04)16770-6)
- Lorea, C. E. (2014). Why Did You Go Swimming in the River Full of Algae? Conception and Contraception in Bauls' Songs and Oral Teachings. *Journal of Folklore and Folkloristics*, 7(1), 9.

- Martino, F., Caselli, G., Berardi, D., Fiore, F., Marino, E., Menchetti, M., Prunetti, E., Ruggiero, G. M., Sasdelli, A., Selby, E., & Sassaroli, S. (2015). Anger rumination and aggressive behaviour in borderline personality disorder. *Personality and mental health*, 9(4), 277–287. <https://doi.org/10.1002/pmh.1310>
- McDaniel, J. (1992). The embodiment of God among the Bāuls of Bengal. *Journal of Feminist Studies in Religion*, 8(2), 27-39.
- Meares, R., Gerull, F., Stevenson, J., & Korner, A. (2011). Is self-disturbance the core of borderline personality disorder? An outcome study of borderline personality factors. *Australian & New Zealand Journal of Psychiatry*, 45(3), 214-222. <https://doi.org/10.3109/00048674.2010.551280>
- Miah, H. (2018). Status of Women in Baul Sadhana: A Social Aspect. *Bangabidya: International Journal of Bengal Studies*, 10, 349-357.
- Mongeon, F. G., & Gagnon, J. (2017). Negativity bias and instability in spontaneous and deliberate evaluations of others: The role of borderline personality features. *Behaviour Research and Therapy*, 97, 105-114. <https://doi.org/10.1016/j.brat.2017.07.010>
- Nica, E. I., & Links, P. S. (2009). Affective instability in borderline personality disorder: Experience sampling findings. *Current psychiatry reports*, 11(1), 74-81. <https://doi.org/10.1007/s11920-009-0012-2>
- Openshaw, J. (2002). *Seeking Bauls of Bengal*. Cambridge University Press.
- Pramanik, A. (2021). Baul Sadhak Lalan Fakir on Syncretism and Women Liberty: A Historical Study. *New Literaria*, 2(1), 237-246. <https://dx.doi.org/10.48189/nl.2021.v02i1.026>
- Rabbani, G. (2021). Commodifying Baul Spirituality: Changing Baul Literature and Music in Bangladesh [Doctoral dissertation, Queen's University (Canada)].

- Rashid, S. (2019). Lalon's Philosophy, Baulism and Folk Musical Tradition in the Midst of Continuity and Change. *In World Assembly and Scientific Conference of International Organization of Folk Art (IOV) on Folk Culture: Present and Future Pathways.*
- Richmond, J. R., Edmonds, K. A., Rose, J. P., & Gratz, K. L. (2021). The interactive influence of borderline personality disorder symptoms and social comparison orientation on self-esteem. *Personality and Individual Differences, 173*, 110532.  
<https://doi.org/10.1016/j.paid.2020.110532>
- Rüsch, N., Lieb, K., Göttler, I., Hermann, C., Schramm, E., Richter, H., Jacob, G. A., Corrigan, P. W., & Bohus, M. (2007). Shame and implicit self-concept in women with borderline personality disorder. *The American journal of psychiatry, 164*(3), 500–508.  
<https://doi.org/10.1176/ajp.2007.164.3.500>.
- Salomon, C. (1995). Baul songs. In Lopez, D. S. (1995). *Religions of India in practice*, Princeton University Press
- Sandage, S. J., Long, B., Moen, R., Jankowski, P. J., Worthington Jr, E. L., Wade, N. G., & Rye, M. S. (2015). Forgiveness in the treatment of borderline personality disorder: A quasi-experimental study. *Journal of Clinical Psychology, 71*(7), 625-640.  
<https://doi.org/10.1002/jclp.22185>
- Sansone, R. A., & Sansone, L. A. (2011). Sexual behavior in borderline personality: a review. *Innovations in clinical neuroscience, 8*(2), 14.
- Sauer, S. E., & Baer, R. A. (2012). Ruminative and mindful self-focused attention in borderline personality disorder. *Personality Disorders: Theory, Research, and Treatment, 3*(4), 433.  
<https://psycnet.apa.org/doi/10.1037/a0025465>

- Says, J., & Whiteside, U. (2006). Borderline personality disorder. *Practitioner's guide to evidence-based psychotherapy*, 151-160. [https://doi.org/10.1007/978-0-387-28370-8\\_14](https://doi.org/10.1007/978-0-387-28370-8_14)
- Sears, S. M., & Hewett, S. J. (2021). Influence of glutamate and GABA transport on brain excitatory/inhibitory balance. *Experimental Biology and Medicine*, 246(9), 1069-1083. <https://doi.org/10.1177/1535370221989263>
- Sengupta, A. (2016). "Bengal's Baul: voice against homogenization struggling for the divined oneness- transition over changing time". *International journal of psychology*, 51, 324–324.
- Sengupta, J. (2015). The Baul sursadhak: The tradition and individual talent. *Journal of Literature and Art Studies*, 5(2), 151-157. doi: 10.17265/2159-5836/2015.02.007
- Snyder, S., & Pitt, W. M. (1985). Characterizing anger in the DSM-III borderline personality disorder. *Acta Psychiatrica Scandinavica*, 72(5), 464-469. <https://doi.org/10.1111/j.1600-0447.1985.tb02640.x>
- Thielemann, S. (2004). The Baul Singers of Bengal And Their Philosophy of Humanity. Indian Musicological Society. *Journal of the Indian Musicological Society*, 35, 33.
- Walsh, R. (2011). Lifestyle and mental health. *American Psychologist*, 66(7), 579. <https://psycnet.apa.org/doi/10.1037/a0021769>
- Walsh, S. D., Harel-Fisch, Y., & Fogel-Grinvald, H. (2010). Parents, teachers and peer relations as predictors of risk behaviors and mental well-being among immigrant and Israeli born adolescents. *Social science & medicine*, 70(7), 976-984. <https://doi.org/10.1016/j.socscimed.2009.12.010>
- Wang, D. J., Rao, H., Korczykowski, M., Wintering, N., Pluta, J., Khalsa, D. S., & Newberg, A. B. (2011). Cerebral blood flow changes associated with different meditation practices and

perceived depth of meditation. *Psychiatry Research: Neuroimaging*, 191(1), 60-67.

<https://doi.org/10.1016/j.psychresns.2010.09.011>

Zanarini, M. C. (2009). Psychotherapy of borderline personality disorder. *Acta Psychiatrica Scandinavica*, 120(5), 373-377. <https://doi.org/10.1111/j.1600-0447.2009.01448.x>

Zeigler-Hill, V., & Abraham, J. (2006). Borderline personality features: Instability of self-esteem and affect. *Journal of Social and Clinical Psychology*, 25(6), 668-687.

<https://10.1521/jscp.2006.25.6.668>

Zeigler-Hill, V., Chadha, S., & Osterman, L. (2008). Psychological defense and self-esteem instability: Is defense style associated with unstable self-esteem? *Journal of Research in Personality*, 42(2), 348-364. <https://doi.org/10.1016/j.jrp.2007.06.002>

Zimberoff, D., & Hartman, D. (2003). Transpersonal psychology in heart-centered therapies. *Journal of Heart Centered Therapies*, 6, 123-144.