

**Effectiveness of Schema Therapy in Treating
Abandonment Schema in Borderline Personality Disorder**



By:

SHAFFAQ IMRAN

Supervisor:

DR. UZMA MASROOR

Bahria University

Islamabad, Pakistan

2018

**EFFECTIVENESS OF SCHEMA THERAPY IN TREATING ABANDONMENT
SCHEMA IN BORDERLINE PERSONALITY DISORDER**

By

Shaffaq Imran

APPROVED BY

Dr. Uzma Masroor

Supervisor

External Examiner

Dr. Uzma Masroor

HOD, DPP

ALL THE PROCEDURES FOLLOWED AND MATERIALS USED WERE

REVIEWED AND APPROVED

BY THE HIGHER EDUCATION RESEARCH (HERC),

BAHRIA UNIVERSITY, ISLAMABAD

THIS THESIS SUBMITTED BY
SHAFFAQ IMRAN
IS ACCEPTED BY BAHRIA UNIVERSITY
TOWARDS THE PARTIAL FULFILMENT OF THE REQUIREMENTS FOR THE
DEGREE OF MASTER OF SCIENCE IN CLINICAL PSYCHOLOGY

2018

APPROVED BY

DR. UZMA MASROOR

HEAD OF DEPARTMENT

DEPARTMENT OF CLINICAL PSYCHOLOGY

BAHRIA UNIVERSITY, ISLAMABAD

Examiner

Dated: _____

CERTIFICATE OF ORIGINALITY

This is to certify that the intellectual contents of the thesis titled

**“Effectiveness of Schema Therapy in Treating
Abandonment Schema in Borderline Personality Disorder”**

are the product of my own research work, except as cited properly and accurately in the acknowledgements and references, the material taken from such sources as research journals, books, internet, etc., solely to support, elaborate, compare and extend the earlier work. Further, this work has not been submitted by me previously for any degree, nor shall it be submitted by me in the future for obtaining any degree from this University, or any other university or institution. The incorrectness of this information, if proved at any stage, shall authorize the University to cancel my degree.

Signature: _____

Date: _____

Name of the Research Student: **SHAFFAQ IMRAN**



Bahria University
Discovering Knowledge
MS-18

Thesis Completion Certificate

Scholar's Name: **Shaffaq Imran**

Registration No: **01-275162-018**

Programme of Study: **MS Clinical Psychology**

Thesis Title:

“Effectiveness of Schema Therapy in Treating

Abandonment Schema in Borderline Personality Disorder”

It is to certify that the above student's thesis has been completed to my satisfaction and, to my belief, its standard is appropriate for submission for evaluation. I have also conducted plagiarism test of this thesis using HEC prescribed software and found similarity index at **14%**, which is within the permissible limit set by the HEC for the MS degree thesis. I have also found the thesis in a format recognized by the BU for the MS thesis.

Principal Supervisor's Signature: _____

Name: Dr. Uzma Masroor

Date: _____



Bahria University
Discovering Knowledge
MS-18

Author's Declaration

I, **Shaffaq Imran**, hereby state that my MS thesis titled

“Effectiveness of Schema Therapy in Treating

Abandonment Schema in Borderline Personality Disorder”

is my own work and has not been submitted previously by me for taking any degree from **Bahria University, Islamabad**, or anywhere else in the country/world. At any time if my statement is found to be incorrect even after I graduate, the university has the right to withdraw/cancel my MS degree.

Name of student: **Shaffaq Imran**

Date: _____



Bahria University
Discovering Knowledge
MS18

Plagiarism Undertaking

I, **Shaffaq Imran**, solemnly declare that my research work presented in the thesis titled

“Effectiveness of Schema Therapy in Treating

Abandonment Schema in Borderline Personality Disorder”

is solely my research work with no significant contribution from any other person. Any contribution / help wherever taken has been duly acknowledged and the complete thesis has been written by me.

I understand the zero-tolerance policy of the HEC and Bahria University towards plagiarism. Therefore, I, as an Author of the above titled thesis, declare that no portion of my thesis has been plagiarized and any material used as reference is properly referred / cited.

I undertake that if I am found guilty of any formal plagiarism in the above titled thesis even after award of MS degree, the university reserves the right to withdraw/revoke my MS degree and that HEC and the University has the right to publish my name on the HEC / University website on which names of students are placed who submitted plagiarized thesis.

Student/Author's Sign:

Name of the Student: SHAFFAQ IMRAN

DEDICATION

*To my father and mother,
who remained anxious about my thesis
for an entire year.*

ACKNOWLEDGMENTS

First, foremost, and most importantly, Alhamdulillah.

Immense gratitude to the following:

Dr. Uzma, whose calm demeanor kept my floundering to a bare minimum.

My brother, who mostly makes me feel better.

My sister, who likes to tell me what to do with the loftiness of an autocrat.

My friends, who materialize next to me whenever I'm lost.

And lastly, the conscientious society of people that keeps on asking whether the task has been done whenever anyone has a task to do. Thank you for the regular reminders!

TABLE OF CONTENTS

List of Tables	i
List of Appendices	ii
Abbreviations	iii
Abstract	iv

Chapter I: INTRODUCTION

Personality	1
Personality Disorders	1
Borderline Personality Disorder	2
Prevalence of Borderline Personality Disorder	2
Pharmacological Treatment of Borderline Personality Disorder	2
Psychotherapeutic Treatment of Borderline Personality Disorder	3
Schema	4
Schema Theory	5
Literature Review	7
Rationale	11

Chapter II: METHOD

Objectives	13
Research Hypothesis	13

Sample	13
Operational Definition of Variables	14
Research Design	15
Procedure	15
Instruments	15
• Informed Consent Form	
• Demographic Information Sheet	
• Young Schema Questionnaire - Short Form, Third Edition (2014)	
Quantitative Analysis	16
Qualitative Analysis	16

Chapter III: RESULTS

Tables	17
Intervention Phase	23
Content Analysis	35

Chapter IV: DISCUSSION

Discussion	41
Limitations	43
Recommendations	43

REFERENCES

References

45

LIST OF TABLES

Table No. 1 Reliability and Descriptive Analysis of YSQ-S3 scale and its subscales

Table No. 2 Frequency and Percentages of Demographic Variables

Table No. 3 Paired Samples T-Test of Pre and Post Intervention Scores

Table No. 4 Differences in Post-Intervention Scores among Males and Females

Table No. 5 Common Maladaptive Schemas in all Participants

ABBREVIATIONS

APA – American Psychological Association

DSM-5 – Diagnostic and Statistical Manual of Mental Disorders 5th Edition

PD – Personality Disorder

BPD – Borderline Personality Disorder

DBT – Dialectical Behavioral Therapy

EMS – Early Maladaptive Schemas

MCS – Maladaptive Coping Strategies

SM – Schema Modes

EMBASE – Excerpta Medica database

CINHAL – Cumulative Index of Nursing and Allied Health Literature

TAU – Treatment As Usual

P - Participant

LIST OF ANNEXURES

Annexure A Evidence of Scale Purchase

Annexure B Informed Consent Form

Annexure C Demographic Information Sheet

Annexure D Borderline Personality Disorder Diagnostic Criteria (DSM-5)

Annexure E List of Early Maladaptive Schemas

Annexure F Young Schema Questionnaire Short Form – Third Edition (2014)

Annexure G History of Case 1

Annexure H History of Case 2

Annexure I History of Case 3

Annexure J History of Case 4

Annexure K History of Case 5

Annexure L History of Case 6

ABSTRACT

Borderline Personality Disorder is a personality disorder marked by unstable relationships, distorted sense of self, intense emotions, and impulsivity. Treatment options for the disorder range from pharmacological to psychotherapeutic, with various approaches to psychotherapy available. Schema Therapy is one approach that has been proven by studies to be effective in treating the symptoms of the disorder. The current research was a quasi-experimental pre-post design study on the effectiveness of Schema Therapy in treating Abandonment Schema in Borderline Personality Disorder (BPD). The participants were six patients already diagnosed with Borderline Personality Disorder, above the age of 18. The results of the study showed that there were certain schemas that were common in all the participants and that Schema Therapy was effective in modifying the schema of Abandonment in BPD patients. There was no difference between therapy outcomes when it came to male and female participants, however. Recommendations and suggestions for future studies have been discussed in the text.