Schemas and borderline personality disorder symptoms in incarcerated women

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Abstract

There is increasing interest regarding the role of maladaptive cognition in Borderline Personality Disorder (BPD). The current study examined the relationship between early maladaptive schema (EMS) domains and BPD symptoms as well as whether schema domains account for the relationship between childhood maltreatment and BPD severity. Incarcerated women (N=105) were assessed for BPD symptoms via semi-structured diagnostic interview. Disconnection/Rejection and Impaired Limits were associated with BPD pathology although these domains shared variance with depression and antisocial personality disorder pathology, respectively. In addition, the relationship between childhood abuse and BPD severity was non-significant after controlling for schema domains. Related findings and the implications for cognitive treatment of BPD are discussed.

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Researchers have increasingly focused on the role of maladaptive cognition in the development and maintenance of borderline personality disorder (BPD). BPD is broadly characterized by pervasive affective, interpersonal, identity, cognitive, and behavioral instability as well as high rates of suicidal and self-harm behaviors (American Psychiatric Association, 2000; Skodol et al., 2002). Although BPD has historically been considered intractable, substantial treatment research has supported the efficacy of cognitive–behavioral treatments for BPD (e.g., Giesen-Bloo et al., 2006; Linehan, 1993). The theory underlying Schema-Focused Therapy suggests that schemas develop early in life and are shaped by the childhood environment. Dysfunctional family environments, characterized by a combination of high expressed emotion, abuse, neglect, and invalidation theoretically contribute to the development of early maladaptive schemas (EMSs). These childhood rearing environments have been associated with BPD (Linehan, 1993) and theories have suggested that particular combinations of EMSs may result in the development and maintenance of specific PD symptoms (Young, Klosko, & Weishaar, 2003). The present study examined the association of EMSs with BPD and tested the theoretical link between adverse childhood experiences, maladaptive schemas, and BPD pathology.

Young (1999) first proposed that several EMSs are particularly central to BPD, including those related to abandonment, dependence, mistrust, abuse, subjugation, emotional deprivation and insufficient self-discipline. While Young’s original formulation has received initial support, findings have been mixed. Studies have found a high correlation between the insufficient self-control/self-discipline schemas and BPD symptoms (Young et al., 2003). BPD has also been related to dependence/incompetence, defectiveness/shame, and abandonment schemas (Jovev & Jackson, 2004). Most recently, in a large, non-clinical sample, Reeves and Taylor (2007) examined the relationship between the YSQ and personality disorder (PD) symptoms, while controlling for gender and comorbid erratic-emotional-dramatic cluster PDs (i.e., Histrionic, Narcissistic, and Antisocial Personality Disorders). Their results suggested that the abandonment schema is uniquely associated with BPD.

Linehan (1993) first proposed that BPD results from the transaction of invalidating rearing environment and a biological vulnerability to heightened emotionality. Young’s (1999) schema model added that a lack of developmentally-appropriate emotional support and inadequate validation may give rise to pervasive, maladaptive, self-referential beliefs and world-views (EMSs). Current psychodynamic theories (e.g., Fonagy & Bateman, 2008) also speak to the importance of invalidation and lack of mirroring in BPD. Thus, diverse theories and Young’s schema theory in particular highlight the importance of examining the interplay between adverse childhood experiences, maladaptive schemas, and BPD symptoms.

To our knowledge, Arntz, Dietzel, and Dreessen (1999) engaged in the only empirical attempt to directly examine the suggested link between childhood abuse, maladaptive schemas (assessed via the Personality Disorder Beliefs Questionnaire), and BPD. Results suggest that, compared to normal controls, several cognitive assumptions (i.e., self as bad, incapable, vulnerable and others as dangerous, untrustworthy) were endorsed more by BPD patients, were relatively stable, and statistically mediated the relationship between sexual, physical, and emotional abuse and BPD traits.

The current study was intended to replicate and extend current research by examining the association between Young’s EMS domains, child maltreatment, and BPD symptoms in incarcerated women, a population with high rates of childhood abuse and BPD (A. Chapman, M. Specht, & T. Cellucci, 2005). Despite the high prevalence of BPD in this population, incarcerated women are generally under-represented in the literature and receive limited access to cognitive-behavior therapy for BPD (Battle, Zlotnick, Najavits, Gutierrez, & Winsor, 2003; Davidson et al., 2006; Giesen-Bloo et al., 2006; Snell, 1992).

The primary aims of this study were to (a) examine the association of Young’s early maladaptive schema (EMS) domains with the BPD symptom severity and (b) test the hypothesis that (EMS) domains are a critical mechanism by which childhood maltreatment influences adult BPD severity. We hypothesized that three of Young’s theoretically derived and empirically supported higher-order EMS domains (the Disconnection/Rejection, Impaired Autonomy, and Impaired Limits domains) would be significantly correlated with BPD severity. Moreover, in recognition of the high degree of comorbidity between BPD symptoms and both depression and antisocial behavior, we also hypothesized that identified relationships between schema domains and BPD pathology would be partially and differentially influenced by these related forms of psychopathology.
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