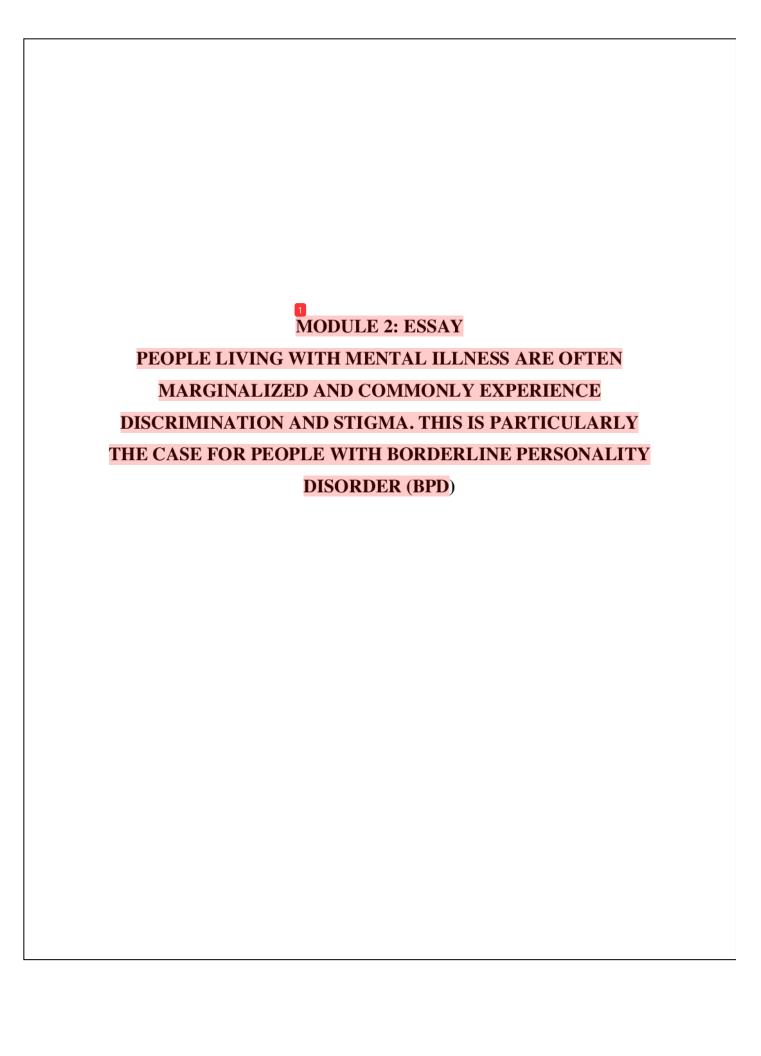
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### **Table of Contents**

Introduction	2
Discussion	
A) The controversies surrounding the diagnosis of BPD	
B) Identify factors which may contribute to a person developing BPD	
C) Critically appraise common treatment approaches for people with BPD	
1 D) Discuss the level of research evidence for each approach	4
Conclusion	4
Reference list	5

#### Introduction

In this essay the controversy and stigma associated with BPD diagnosis among individuals and the contributing factors of the disease are going to be discussed. The common treatment process of this mental disorder and the approaches to treat the mitigation of BPD among patients will be analysed in this essay. It is often seen that individuals who are mentally ill or are suffering from serious mental diseases face discrimination in the society thereby confronting various difficult situations which make their life a bit complex.

#### Discussion

# A) The controversies surrounding the diagnosis of BPD

Borderline Personality disorder (BPD) has been found a matter of controversy due to the stigma associated with the diagnosis and the therapeutic negligence and nihilism shown by the practitioners who encounter people with a high problem of BPD. In the case of the mental illness associated with BPD, it can be said that "borderline personality disorder" (BPD) is a kind of condition characterised by chronic instability in relationships, extreme emotional outburst or reactions, and fear of abandonment. The diagnosis of BPD is controversial. The disease is listed in the Diagnostic and Statistical Manual (DSM) along with several other personality disorders. Some mental health professionals argue that BPD is not a mental illness at all, rather it can be categorised as a response to "childhood fear and trauma" rather than any mental health issue (Lewis and Grenyer, 2019).

'Separation anxiety' (breakup in a relationship), 'interpersonal or relationship difficulties' (hostility, anger, resentful feeling towards the partner, acute disappointment from relationship), 'impulsive behavior' (self-harm, reckless driving) and 'attempting suicide' or giving suicidal threat are the symptoms of "borderline personality disorder". Controversies surrounding the diagnosis of BPD sprouted from its name. BPD derives its name from the original diagnosis criteria that suggest that people with BPD are at the 'border' of psychosis (Nimh.nih.gov, 2023). The significant mental health professionals worldwide believe that BPD requires treatment and proper diagnosis, and care to make the patient normal in their daily life. On the other hand, few experts have stated that BPD

has not nothing to do with the proper identification of mental illness rather it is an individual expression of acute trauma and stress.

According to statistics of the World Health Organisation (WHO) 75% of sufferers of BPD have been identified as women (Ncbi.nlm.nih.gov, 2022). Hence recent research reveals that the number percentages in the case of men are near to that of women. According to some doctors, Complex Post-Traumatic Stress (CPSD) is a kind of situation that arises among people as a form of BPD. Wild mood swings, anxiety, and frequent suicidal attempts have to be taken into consideration by leading people to the way of removing stress and the abnormal reaction of behaviours. The personhood and the essence of the claim have flaws in it. The diagnosis of any personality disorder is related to a feeling of shame, and badness in the case of Borderline Disorder as well. There are some stigmas associated with the identification and clinical treatment of the patients having Borderline Disorder such as clinical non-cooperation and they do not see the improvement of the patients, or the challenge the patient poses by showing overt anger over the therapist. For some therapists, it can be easier to blame a patient for not cooperating and lack of improvement of the situation than it is to look at the clinical non-cooperation to help the patient.

#### B) Identify factors which may contribute to a person developing BPD

A number of physical, emotional, and environmental factors contribute to the reason for developing BPD among patients. People having emotional trauma in childhood in family relationships, and fear of abandonment of parents and closer ones lead to the arising of mental illness and personality disorder. The *childhood factors* that contribute to a person developing BPD include *child maltreatment, emotional abuse, physical abuse, and attachment difficulties*. In early childhood and during the growing period when children went through any kind of mental abuse or physical abuse by parents or other elders of the family that impact fell deeply in mind. Any kind of attachment difficulty such as a parent's business in work and not properly attending to the child creates difficulties and insecurity in the mind of the child regarding parental love and care. The lacuna or vacuum in the growing period of childhood can lead to attachment difficulties which contribute to developing BPD. *Stressful childhood* has been regarded as a risk factor in the childhood impact of developing BPD among children. Physical abuse, neglecting children, and hostile conflict among family members impact greatly create mental disorders like BPD.

Teens and young adults are mostly affected by BPD during the growing period of their life though diagnosis is later at the advanced stage of life. Reports have stated that BPD is a genetic mental disorder. The *genetic factors* that can impact a child or an adult to be affected by the disease come from family relations. Women have more tendency to be affected by BPD than men and the chance of being affected by BPD among people increases when any family member or sibling has that mental disorder. According to a study in 2021, BPD has a hereditary rate of 46%. Hereditary predisposition is a risk factor in the case of BPD when a close family member of one's family such as a father, mother, or sibling has the same or similar disorder.

As per Miller *et al.* (2020), some research has stated that *brain abnormalities* can create disorders among people that lead to the development of borderline personality disorder. Certain brain fluids that regulate mood such as serotonin may not act properly that results in the acute expression of anger, aggression and impulsiveness. *Problems with brain development* in case of having smaller or any of the parts of the brain can create disorders such as BPD. Problems with the brain functioning and development can lead to complex decision-making processes and development of BPD. There are some *environmental factors* that help in the development of BPD such as according to the National Health Survey (NHS) being a victim of mental or physical abuse, long-time fear or distress as a child can create bipolar disorder, drink or drug misuse among teens and adults (Nhs.uk, 2022).

# C) Critically appraise common treatment approaches for people with BPD

Talking about the treatment approaches that are required for the people suffering from Borderline Personality Disorder it can be said that the primary measure which needs to be taken is the adaptation of Psychotherapy. The implementation of such a therapy will result in providing the respective patient with an effective set of mental treatments through various medications and other procedures. Besides this *Schema focused therapy* can be implemented in such individuals. This particular therapy is highly helpful in the sense that it will enable the respective doctors to know the demands and the other needs that have not been met by the individuals. It is very necessary for the individuals to meet their respective demands on time unless they may face hard times in the future. Through this therapy, the main aim of the doctors is to identify the unmet needs of such individuals and try their level best in satisfying such demands within a short time frame (Stoll *et al.* 2020).

For the development of the therapy based development, this would require to keep focus on the proper acceleration regarding the value assessment and functional concern as well. This would be effective for the process of formulation of the strategic planning which through the operational risks can be managed. Herein, the partoculat childhood risks regarding concerns can be assessed which through the formulation of the strategy can be identified., This can accelerate the feasible values regarding the development of the treatment as well. In addition, the maldaptive schemas can be introduced which can help to soru out the issues regarding the development of the strategy formulating process. Herein, the process of making resembling with the past can mitigate the strategic planning based development which through the operational risks can be controlled. Therefore, the strategic planning can be introduced fir the feasible development of the strategic planning and development as well. In addition, the symptoms of the BPD can also be identified which through the operational risks can be handled.

Besides these *Mentalization-based therapy* is another effective method of treatment which has the capability of curing the patients suffering from severe mental illness. Through this process, the doctors make the individual talk and allow them to convey the message regarding the problem which they are facing (mayoclinic.org, 2022). The main focus of this therapy is to make the patient feel free and communicate the problem and the shortcomings which he is going through. The use of this therapy enables the individuals to create an alternate perspective of the situation which will be helpful in providing effective solutions to the given set of problems. Lastly, such a therapy makes the patient think about their past which results in putting pressure on the mind thereby enabling the concerned individual to get cured of the mental disease which he is suffering from in the present situation (Omar et al., 2022). In terms of making application of this strategy properly, this would require to keep identification of the certain strategies for the betterment of the procedures. Therefore, the schemas can be marked by focusing on the risk assessment concern by identifying the examples such as defective, emotional deprivation, social isolation and enmeshment. Herein, the issue regarding the matter of not getting success can create the feelings of getting shame. Therefore, the certain victim would take the decision to keep distance with the world. In addition to that the different experience such as emotional deprivation such as not getting the particular product or opportunity by having same competence can create possible mental complications. This would hamper the possibility oif keeping the proper focus on the work process (Bernstein *et al.* 2023). Apart from that, the issue regarding social isolation can hamper the feasibility of a patient as well. Herein, negative thinking can be occurred which can reduce the mental stability and also hamper the confidence level as well.

As per Campbell *et al.* (2020), The common treatment approaches of BPD is psychological therapy. Psychological therapy is called *psychotherapy*. The personhood and the essence of the claim has flaws in the diagnosis of the disorder. Different kinds of psychological therapies have been used to treat the BPD patients hence all are time taking approaches. With the help of the support of the psychotherapy, the possibility of making the execution of the counselling can be performed which can upgrade the mental stability and enhance the feasible mental strength. Herein, the certain issues such as getting the trauma can reduce the level of confidence of the people. Therefore, the certain risk regarding the matter of taking decisions can be overcome by providing stress on the matter of overcoming the issue. In addition to that the risk management strategy maintenance would be applied for the formulation of the strategic development.

**Dialectical behaviour therapy and cognitive behaviour therapy** is used in this case. The use of patients' care at home and close surrounding is necessary to treat the individual included in the life cycle. The utilisation of the Dialectical behaviour therapy would be effective for the matter of assessing the behavioural concern by providing stress on the matter of keeping the mental balance as well.

#### D) Discuss the level of research evidence for each approach

As per Bozzatello *et al.* (2019), the *dialectical behaviour therapy, schema focus therapy* is used to develop the treatment process for the patients of BPD. Dialectical behaviour therapy has been used as a best approach to the patients having highly suicidal attempts. The approaches of treatment are used to provide patients a less stressful life with new hope and encouragement. The best approach of treatment in the process of developing psychological process for BPD has bene mentioned by using *Dialectical behaviour therapy*.

#### Schema focused therapy

Schema-focused therapy is a form of psychotherapy that will assist in solving mental illness problems among people who are face problems with borderline personality disorder. The main purpose of this therapy is to encourage people for improving their lifestyle in their society. In the case of BPD patients, this therapy can assist to change their entrechat and self-defending life

patterns. On the other hand, this is an emotion-focused approach which can help to develop the emotional states of patients. As evidence, it has been seen that a person using an avoidance coping style that will help to avoid situations which make them feel defective. On the other hand, as per the study of, van Maarschalkerweerd *et al.*, 2021)this therapy can assist patients to tolerate unfair criticism without defending themself. The main goal of this therapy is to help those people who need emotional treatment. Such as stopping using maladaptive coping skills and also assisting to stop using schema modes that will assist to block contact with true feelings.

#### psychotherapy

This is the approach of making application of the talk therapy which through the probability of making identification of the risk can be confirmed by making evaluation of the operational value as well. Herein, the assessment regarding the proper talk regarding issues have been identifying considering the fact when a person can face trouble to express their own thoughts as well (Morvaridi et al. 2019). Herein, the emotional intelligence regarding problems can be occurred which affects the feasibility regarding the thinking based concern. Herein, the possible areas are to be provided for the patients which through the own thoughts and thinking can be shared. This would provide the possible support which through the operational risks can be overcome. This would also identify the better managerial concern and upgrading the feasible values. Herein, impact of trauma and medical illness can occur which can affect the thorough identification and analysis. In terms of making application of the psychotherapy, certain issues can occur which are required to overcome. Therefore, the certain issues can be marked by focusing on the risks regarding parameter identification as well (Bernstein et al. 2023). Herein, the situational context can be identified such as feeling with the long terms stress for job or family regarding situational aspect. In addition, regarding issues such as sleep regarding issues, appetite and low energy level concern can also be identified which affects the feasibility as well. Herein, the psychological considerations can be introduced which can help to keep articulating the strategic fact by addressing the certain identification such as the risk assessment with the problem solving strategies and making the suitable interactions. Herein, the possibilities of sorting out the issues such as unmindfulness and relaxation techniques would also be marked which through the probable strategic risks can be effectively handled (Norcross and Lambert, 2019). The supportive environment can also be created which through the pressure can be effectively handled.

Dialectical behaviour therapy and cognitive behaviour therapy

The primary purpose of this theory is to assist people to change their thinking process about their experiences. In some cases, it has been seen that this therapy asst to couples facing relationship issues therefore this therapy can assist them by reducing their homelessness and impulse behaviors. On the other hand, in the case of children, this therapy helped by providing psychoeducation about their thoughts becoming actions and also improving their overall family functions. As per the study of, Rudge *et al.* (2020), this therapy assists BPD who are severely struggling and who also feel depressed. Apart from this to improve the eating behaviours of any children. In addition, the support of the cognitive behaviour would provide the possible development of mental strength which through the possibility of accepting the change situation can be confirmed. The support of the cognitive behaviour therapy would support to keep accelerating the procedure of determining the output.

#### Conclusion

Problems with the brain functioning and development can lead to complex decision-making processes and development of BPD. The concerned study has been shedding light on the various prospects relating to the controversies surrounding the diagnosis of BPD. Several factors will be identified for a person developing BPD. An elaborative discussion will be provided regarding the treatments that need to be provided to the individuals suffering from the BPD. In addition, a brief analysis will also be shown regarding the evidence of each approach.

#### Reference list

Bozzatello, P., Bellino, S., Bosia, M. and Rocca, P., 2019. Early detection and outcome in borderline personality disorder. *Frontiers in psychiatry*, *10*, p.710.

Campbell, K., Clarke, K.A., Massey, D. and Lakeman, R., 2020. Borderline Personality Disorder: To diagnose or not to diagnose? That is the question. *International journal of mental health nursing*, 29(5), pp.972-981.

Lewis, K.L. and Grenyer, B.F., 2019. Borderline personality or complex posttraumatic stress disorder? An update on the controversy. *Harvard review of psychiatry*, 17(5), pp.322-328.

Miller, C.E., Townsend, M.L., Day, N.J. and Grenyer, B.F., 2020. Measuring the shadows: A systematic review of chronic emptiness in borderline personality disorder. *PLoS One*, *15*(7), p.e0233970.

Ncbi.nlm.nih.gov, 2022. Accessed

at:

https://pubmed.ncbi.nlm.nih.gov/32426937/#:~:text=Since%20its%20conception%2C%20borderline%20personality,prevalence%20problem%20in%20acute%20settings.

Nhs.uk, 2022. Accessed at: https://www.nhs.uk/mental-health/conditions/borderline-personality-disorder/causes/

Nimh.nih.gov, 2023. Accessed at: <a href="https://www.nimh.nih.gov/health/topics/borderline-personality-disorder">https://www.nimh.nih.gov/health/topics/borderline-personality-disorder</a>

mayoclinic.org (2022) *Borderline personality disorder*, *Mayo Clinic*. Available at: https://www.mayoclinic.org/diseases-conditions/borderline-personality-disorder/diagnosis-treatment/drc-

20370242#:~:text=Borderline%20personality%20disorder%20is%20mainly,and%20cope%20wit h%20your%20condition. (Accessed: 27 May 2023).

Omar, S.A., Abdul-Hafez, A., Ibrahim, S., Pillai, N., Abdulmageed, M., Thiruvenkataramani, R.P., Mohamed, T., Madhukar, B.V. and Uhal, B.D., 2022. Stem-cell therapy for bronchopulmonary dysplasia (BPD) in newborns. Cells, 11(8), p.1275.

Stoll, J., Müller, J.A. and Trachsel, M., 2020. Ethical issues in online psychotherapy: A narrative review. *Frontiers in psychiatry*, *10*, p.993.

Norcross, J.C. and Lambert, M.J. eds., 2019. *Psychotherapy relationships that work: Volume 1: Evidence-based therapist contributions*. Oxford University Press.

Morvaridi, M., Mashhadi, A., Shamloo, Z.S. and Leahy, R.L., 2019. The effectiveness of group emotional schema therapy on emotional regulation and social anxiety symptoms. *International Journal of Cognitive Therapy*, 12, pp.16-24.

Bernstein, D.P., Keulen-de Vos, M., Clercx, M., De Vogel, V., Kersten, G.C., Lancel, M., Jonkers, P.P., Bogaerts, S., Slaats, M., Broers, N.J. and Deenen, T.A., 2023. Schema therapy for violent PD offenders: A randomized clinical trial. *Psychological medicine*, *53*(1), pp.88-102.

van Maarschalkerweerd, F.A., Engelmoer, I.M., Simon, S. and Arntz, A., 2021. Addressing the punitive parent mode in schema therapy for borderline personality disorder: Short-term effects of the empty chair technique as compared to cognitive challenging. Journal of behavior therapy and experimental psychiatry, 73, p.101678.

Rudge, S., Feigenbaum, J.D. and Fonagy, P., 2020. Mechanisms of change in dialectical behaviour therapy and cognitive behaviour therapy for borderline personality disorder: a critical review of the literature. Journal of Mental Health, 29(1), pp.92-102

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