

Childhood Traumatic Experiences, Early Maladaptive Schemas and Personality Dysfunctions in Shelter Home Residents

Rabbia Noor^{*1} and Dr. Saadia Dildar²

Abstract

***Corresponding Author:**
Rabbia Noor
Clinical Psychology
Unit,
Government College
University, Lahore

Correspondence Email:
hsandrm@gmail.com

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This study was designed to investigate childhood traumatic experiences, early maladaptive schemas and personality dysfunctions in shelter home residents. The main objective of this study was to explore the phenomenological experience of childhood traumatic experience, early maladaptive schemas and personality dysfunction in shelter home resident. Purposive sampling technique was used to collect the data. Sample comprised of five shelter home residents from Lahore, and Faisalabad. The data were collected using semi-structured interviews. On the bases of data obtained from structured interviews we used Deductive Thematic Analysis (DTA) to assess childhood traumatic experiences, early maladaptive schemas and personality dysfunctions. Total six super-ordinate themes were extracted from the responses of the participants by using DTA analysis. The main themes were abuse, rejection, loss, cognitive distortion, emotional disturbances and behavioral problems. The sub-ordinate themes emerged from abuse is physical abuse, emotional abuse, sexual abuse, and verbal abuse. The sub-ordinate themes emerged from rejection is parental rejection, social rejection, peer rejection, and romantic rejection. The sub-ordinate themes emerged from loss is financial loss, and loss of loved ones. The sub-ordinate themes emerged from distorted cognition is self-blame, suicidal ideation, obsession, infidelity, and paranoia. The sub-ordinate themes emerged from emotional disturbances is low mood, liable mood, fear, irritability, aggression, anxious, and hate. The sub-ordinate themes emerged from behavioral problems is verbal outburst, self-harm, avoidance, submissive behavior, approval seeking behavior and lying.

Keywords: *Childhood Traumatic Experiences, Early Maladaptive Schemas, Personality Dysfunction, Shelter Homes*

Introduction and Literature Review

Childhood traumatic experiences (CTE) is whatever meddles with the person's capacity to meet what they call "center feelings. Early maladaptive schemas (EMS) is a far reaching, unavoidable subject or model, included memories, sentiments, insights, and significant sensations, concerning oneself and one's relationship with others, made during youth or youthfulness, clarified all through one's lifetime and useless to a significant degree" (Young et al., 2003).

¹ Rabbia Noor, Clinical Psychology Unit, Government College University, Lahore

² Dr. Saadia Dildar, Clinical Psychology Unit, Government College University, Lahore

Personality dysfunctions (PD) is characterized as rigid and maladaptive personality characteristics that raises clinically massive disturbance or shortcoming in social, business related, or other critical locales of working" (APA, 2000). Research was performed to discover connections between youth traumatic experiences, early maladaptive schemas and interpersonal styles in non-clinical adults by Tezel, Kışlak and Boysan (2015). Early maladaptive blueprints intervened by associations of youngster sexual maltreatment through emotionally avoidant, Machiavellian and abusive relational styles. Research was conducted to find mediation of early maladaptive schemas between perceptions of parental rearing style and personality disorder symptoms by Thimm (2011). This research unleashes the relations among perceived parental rearing behaviors, EMS, and mental disorder indications through a clinical sample (N=108). Outcomes from analyses propose that EMS mediate the relations among parenting behaviors and mental disorder related symptoms. According to Young and partners (2003), childhood traumatic experiences impact the wellness to meet what they call "focus emotions". Their way of thinking, fundamentally, recommends that dissatisfaction of these requirements, through a mix of childhood traumatic experiences and anxious reactions to external environment, results in the development of early maladaptive schemas. These EMS contain subjects of negligence, abandoning, or over availability.

The second, form of abuse or trauma relates more to physical or sexual abuse and impacts the victims in a direct manner. Different kinds of traumatic experiences like psychological abuse are unique for every individual. As per crises and disaster theory introduced by Lundin et al (1984), there is a relationship between the disaster condition and the development of a post-traumatic emergency response. As per Bowlby (1979), children form an adequate emotional relationship with their primary caregivers during the earlier years of the child's fundamental connection the child needs for assurance, comfort and nurturance. Ainsworth, Blehar, Waters and Wall (1978), who have worked on attachment theory, presented that the attachment among children and their guardians are of three sorts: secure, insecure (with the subtype's anxious avoidant) and disorganized. These attachment styles are manifested in the adults' relationships in the form of healthy or unhealthy relationships. The nature of this attachment impacts the children's behavior and how they identify with others and forms the child's beliefs, perceptions and personality.

The idea of the child's connections, regardless of whether they are secure, doubtful or confused, is presented as the child's internal working model (Bowlby, 1979). Young and colleagues (2003) devised 18 early maladaptive schemas into two huge categories (unconditional and conditional) and further into five domains (Disconnection and rejection, Impaired autonomy and performance, Impaired limits, other directedness and over-vigilance and inhibition). However, the possibility of mappings can be ventured back to the German Intellectual I. Kant (Dahlin, 2001; Speed, 1988; Stein & Youthful, 1992). Beck's construction model features the schemas. Consequently, the expressions "center convictions" and "schemas" are regularly utilized reciprocally in relationships (Padesky, 1994; Weishaar & Beck, 2006). Two major arrangements of these schemas are recognized: schemas associated with defenselessness ("I am lacking") and convictions related with unloveability ("I am blemished") (Beck, 1999). These have characteristics like thickness, expansiveness, penetrability, and striking nature and are believed to be situated in hereditary turn of events, personality, and learning history (Beck et al., 2004).

In Diagnostic and Statistical Manual of Mental Disorders, Fifth Edition (DSM 5; American Psychiatric Association [APA], 2000), personality disorders (PD) are clear as "persistent example of intrapsychic experiences and behavior that begin to develop in adolescence or early development, is steady over period, and results in trouble in close relationships and friendships." There are 10 varied PDs characterized in DSM-IV-TR, considered into three clusters strengthened their highlights. Cluster A PDs envelops

paranoid, schizoid, and schizotypal PDs; Cluster B PDs contains antisocial, borderline, histrionic, and narcissistic PDs; and Cluster C PDs consists of avoidant, dependent, and obsessive-compulsive PDs. When performing research on this subject, it is crucial to know what the current state of your research participants is, and if it is noticeably causing distress over a significant period of time in order to extract knowledge that is practically useful (Williman, 1981).

The study examined relationship between childhood traumatic experiences, early maladaptive schemas and personality dysfunctions. Research discovered connections between youth Traumatic Experiences, Early Maladaptive Schemas and Interpersonal Styles in non-clinical adults by Tezel, Kışlak and Boysan (2015). A sample of 300 adults (58% ladies) participated in this study. Early maladaptive schemas mediated by Associations of youngster sexual maltreatment through Emotionally Avoidant, Machiavellian and Abusive relational styles. Early maladaptive schemas suggested that the emotional abuse with Emotionally Avoidant and Avoidant attachment styles likewise for the explanation that the dealings of physical abuse with Avoidant and Abusive attachment styles.

Purpose of the study

There seems to be an absence of satisfactory qualitative data on the nature and importance of the childhood traumatic experience, early maladaptive schemas and personality dysfunction consequently there is an absence of consideration from authorities. In any case, even where the issue may have been perceived, there is an absence of information on the best way to report appropriately (Pace, 1988). The primary intention is to explore the diverse childhood traumatic experience, early maladaptive schemas and personality dysfunction in shelter home residents.

Objectives of the study

- To explore the phenomenological experience of childhood traumatic experience, early maladaptive schemas and personality dysfunction among Shelter home resident.
- To investigate if early maladaptive schemas lead to personality dysfunction in shelter home residents.

Research Questions

- How do survivors of childhood traumatic abuse describe their experiences?
- How do childhood traumatic experiences lead to early maladaptive schemas in shelter home residents?
- How do early maladaptive schemas lead to personality dysfunction in shelter home residents?

Method

Research design

Phenomenological research design was used. The research problem was explored qualitatively with the aim to get better understanding of childhood traumatic experiences, early maladaptive schemas and personality dysfunction in shelter home residents.

Sample

Purposive sampling technique was used. The semi structured interviews were used to collect data from five women (to the saturation point) with the age of 15 to 30 who were traumatized as a child. A list of all the orphanages present in Lahore, and Faisalabad were obtained. From this list, 3 shelter homes were selected randomly one from Faisalabad and two from Lahore. From each selected shelter home, a list of all the females who experienced childhood trauma along with their age was taken from superintendent of the shelter homes, irrespective of their cast, color, and creed.

Inclusion and Exclusion criteria

Females of ages 15 to 30 years living in shelter home for minimum of 6 months were included. Whereas, physically disabled and mentally retarded were excluded.

Data Collection

Semi structured interviews were conducted for data collection purpose. An interview protocol (which included interview questions and probing questions) was devised by following the guidelines Gubrium et al., (2002). An average interview consisted of 30 minutes which was conducted by researcher herself. Interviews were conducted according to convenience of participants. All recruited participants were briefed about the nature and scope of data collection; they were given consent forms to make sure if they agreed to participate voluntarily in research. Each interview lasted 15 to 30 minutes. It was ensured that not only the environment during interview remain comfortable for participants but also that respondent has developed rapport and is at ease with the interviewer.

Data Transcription

Field notes were taken during the interview, to take a complete record of the information. Field notes also took note of non-verbal cues during the interview. Transcripts were kept confidential as their information was not shared with any other person except for researcher. Data were transcribed right after each interview in order to retain the maximum information obtained (MacLean, Meyer & Estable, 2004).

Deductive Thematic Analysis.

Thematic Analysis was used as a qualitative methodology to study the in-depth details of the phenomenon (Fereday & Muir-Cochrane, 2006). This study used deductive thematic analysis because it helps in identifying explicit and implicit ideas within the data and apprehends the details of meanings within a data set according to the codes driven from the theory applied.

Ethical Consideration

Ethical consideration was followed while conducting the qualitative study. Participants were ensured that, their data is just for the purpose of getting complete and coherent information. Participants were informed about the nature and purpose of the study. It was ensured that research did not cause any harm to the study participants, and that they had the right to withdraw themselves at any point during the research. Participants were ensured about the confidentiality of their data. The anonymity and consensual participation of the respondents was ensured.

Findings

The data for this study was collected by using semi-structured interview. The responses of the participant were analyzed by applying Deductive Thematic Analysis, a qualitative approach introduced by Braun and Clarke (2006). The data were recorded in Urdu, and later transcribed and finally codes and themes were drawn from it.

Table 1

<i>Deductive Thematic Analysis (Sub-Ordinate Themes and Super-Ordinate Themes)</i>	
Sub-Ordinate Themes	Super-Ordinate Themes
Physical abuse	Abuse
Psychological/ emotional abuse	
Sexual abuse	
Verbal abuse	
Peer rejection	Rejection
Parents rejection	
Relative rejection	
Romantic rejection	
Financial loss	Loss

Loss of loved ones	
Self-blame	Distorted cognition
Suicidal ideation	
Paranoia	
Obsession	
Infidelity	
Low mood	
Emotional liability	
Fear	Emotional instability
Aggression	
Irritability	
Anxiety	
Hate	
verbal outburst	Behavioral problems
Self-harm	
avoidance/avoid social gathering	
Submissive behavior	
Approval seeking	
Deception/antisocial behavior/lying	

Table 1 shows six major or super-ordinate themes which are formed from the cluster of many sub-ordinate themes.

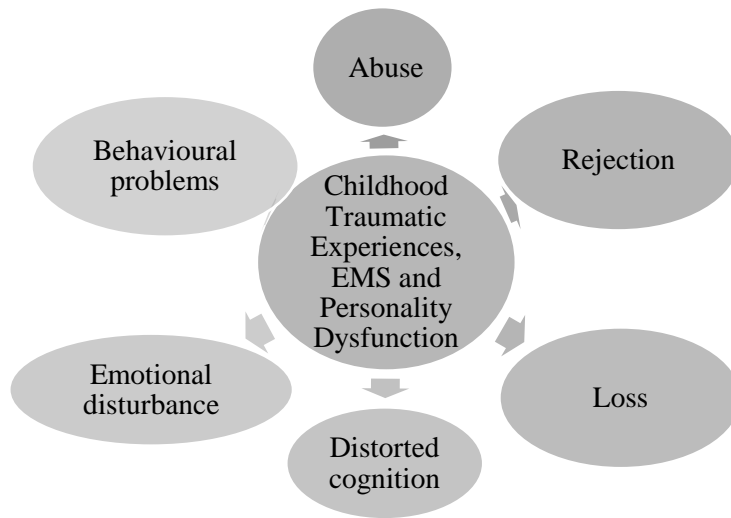


Figure 1: Major Themes of the Data

Super-ordinate themes

The super-ordinate or master themes emerged from the data are as follows.

Theme I.

Abuse. Abuse is the relationships in which one individual acts in a remorseless, rough, or belittling way toward someone else. The term most regularly suggests physical abuse but it also includes verbal, sexual and psychological (emotional) abuse.

"There was always a fight between my parents which hurt me a lot. Auntie was causing me a lot of mental anguish. She used to fight with my parents." (R1)

"Childhood was very difficult. Khansaman started touching me in a strange way. He seemed very strange to me but I ignored thinking that he is of my father age. The man when alone makes my hair, fix the clothes and scold me in front of everyone." (R4)

1. *Physical abuse.* Physical abuse refers to striking or beating someone else with the hands or an object, it may include attack with a blade, firearm, or other weapon. Four out of five reported physical abuse (N=4, 80%).

"When my father came to know about the fact, he physically abused me and not even said a word to that insane just because he is better in status than us and more closed to the honors of the house." (R2)

"And sometimes he beat me so much that I faint. My mother sent me to Darul Aman. When I came to Darul Aman, I found out that I was pregnant. And then I didn't tell anyone about my daughter. " (R3)

2. *Sexual abuse.* Sexual abuse refers to unseemly sexual contact between a youngster or an older adult and somebody who has some sort of family or authority over them.

Four out of five reported sexual abuse (N=4, 80%).

"My uncle got me married at the age of 10 by force with his brother in law. I was not even adult but I don't know what slanders were attached with me. In desire of children he abused me a lot." (R3)

"The brother of the woman with whom Abu had an affair wanted to marry me. And Abu threatened me that if you did not marry, I would kill your mother. " (R5)

3. *Verbal abuse.* Verbal abuse refers to ordinary and verbally abusing, marking, or insult of an individual; it might also involve spoken threats. Four out of five reported verbal abuse (N=4, 80%).

"He verbally abuses me and locked me in the room during the day and leave. That three year of marriage was the darkest time." (R4)

"Grandma abuses us curse me. Grandmother would tell my mother that she had given birth to a miserable child." (R5)

4. *Emotional or psychological abuse.* Emotional or psychological abuse covers an assortment of behaviors and actions that hurt or harm others despite the fact that no physical contact might be included. Five out of five reported emotional abuse (N=5, 100%).

"My aunt had put things in my father's mind to remarry because you have no son. I was very bothered by these issues. I went to the room alone and often cried at night. I am still very scared of my aunt. " (R2)

"He used to call me by threatening that I would tell your parents and elders." (R3)

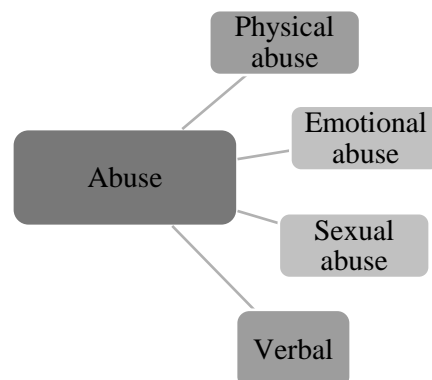


Figure 2: Sub Themes of Abuse

Theme II.

Rejection. Rejection refers to the sense of disgrace, misery, or anguish individuals feel when they are not acknowledged by others.

Parental rejection. Parental rejection is a rejection from one's family members, commonly parental rejection, may comprise of misuse, deserting, disregard, or the retention of adoration and warmth. Five out of five reported parental rejections (N=5, 100%).

"Often the father would come to the aunt's words and ignore us sisters and mother." (R1)

"My mother's love for me also ended after this incident. She dislikes my every act and pretend that I am her opponent. Her apathy hurts me a lot." (R4)

1. *Social or relative rejection.* Social or relative rejection is the kind of rejection may happen at whatever stage in life and usually in adulthood (Mulvey, 2017).

Three out of five reported social rejection (N=3, 60%).

"After the death of my grandmother, the attitude of my father's parents became even harsher." (R3)

"Many people have rejected me." (R4)

2. *Peer rejection.* Peer rejection is a worldwide term that includes the numerous behaviors and actions by adults to harm each other, including types of control and avoidance and more discreet strategies. One out of five reported peer rejection (N=1, 20%)

"After the incident no one was interested in being my friend. The daughter of house maid of this khoti was my friend, but she stopped her daughter from meeting me and my friend started hating me. " (R4)

3. *Romantic rejection.* Romantic rejection is a rejection which can happen when an individual seeks affection and is denied. Three out of five reported romantic rejection (N=3, 60%).

"She also kept me away from my husband. And I think if he divorces me, no one will accept me, and that's a fact. " (R4)

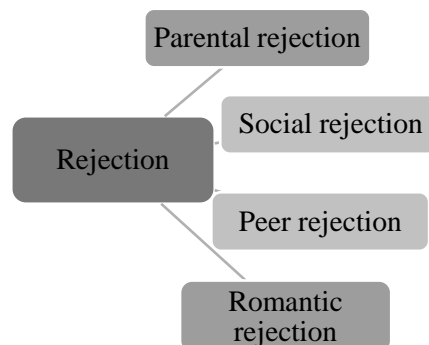


Figure 3: *Sub Themes of Rejection*

Theme III.

Loss. Loss, is a condition of being without, is generally joined by sadness, which is an emotional condition of extreme helplessness and a response to the lack of connection.

"My parents were very weak financially and they were also indebted to this bad man and landlord. That is why he could not speak in favor of his daughter. One day my mother died in her sleep. And my father blamed me for it." (R2)

"My mother did not want my life to be ruined. So she stood firm in front of dad. And she used to say, "Surely you have to divorce, so give it to me, but I will not allow my daughter to be married, for she is only ten years old." In the reckoning, dad and my mother had a quarrel and dad hit them on the head with a stick and killed her. " (R3)

Following are the subordinate themes of loss.

1. *Financial loss*. Financial loss will be loss of cash or assets in financial worth. Delinquency, default loss coming about because of disappointment of an obligation to be paid. Four out of five reported financial loss (N=4, 80%).

"My parents were very weak financially and they were also indebted to this bad man and landlord. That is why he could not speak in favor of his daughter." (R3)

"Our economic situation has always been weak, so according to my mother, she married a good man to change her day." (R4)

2. *Loss of loved one*. Loss of loved one is a loss of a friend or family member, as it is actually traumatic event. Four out of five reported loss of loved ones (N=4, 80%)

"When that man came to our house, my mother was pregnant and he aborted her child because it was problem for her." (R4)

"My mother did not want my life to be ruined. So she stood firm in front of dad. And she used to say, "Surely you have to divorce, so give it to me, but I will not allow my daughter to be married, for she is only ten years old." In the reckoning, dad and my mother had a quarrel and dad hit them on the head with a stick and killed her." (R5)

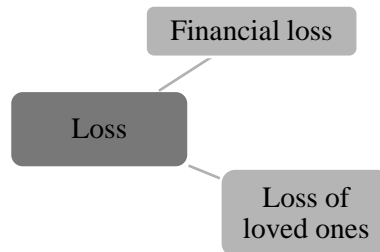


Figure 4: *Sub Themes of Loss*

Theme IV.

Distorted cognition. Cognitive distortions are ways that our mind persuades us regarding something that is irrational. These irrational contemplations are generally used to eliminate the negative reasoning or feelings, disclosing to ourselves things that are rational and precise, however truly just to keep us feeling bad about ourselves.

"No one cares for me. Matters are never in my favor. People eat other alive rather sacrificing is a distant thing. But people are very cruel never excuse others. I think everyone is mean." (R2)

"I think this world is mean and selfish, nobody cares about anyone. I want to show the world that I can do everything I am not a weak person. Every time I think like a torment that my father will kill me" (R5)

Following are the subordinate themes of cognitive distortion.

1. *Self-blame*. Self-blame is a cognitive cycle in which an individual credit the event of an unpleasant occasion to oneself. Five out of five reported self-blame (N=5, 100%).

"I'm an unbearable person. My mood always changes. I don't have freedom.

We respond to one thing after another. I think I have no caste. Other castes rule over my caste. What can i do for anyone I can't do anything for myself." (R2)

"People don't think well of me and I think I'm not good." (R4)

2. *Suicidal ideation* (or suicidal thoughts). Suicidal ideation (or suicidal musings) is self-destruction with intentional thought or arranging. Three out of five reported suicidal ideation (N=3, 60%).

"Suicidal ideation often comes in my mind. I want to kill myself so that I can get rid of these problems so that ami can live happily after. " (R4)

"I attempted to kill many times before this; I thought that this was the only way to get rid of these problems but now I am very strong." (R5)

3. *Paranoia*. Paranoia is an example of being dubious of others and considering them to be mean or resentful. Five out of five reported paranoia (N=5, 100%).

"There are people who take advantage of me, many people dislike me and become an opponent. It is often suspected that warden is plotting against me and will hand me over to the beast. Who does not care about me; I do not care about them either." (R2)

"My mother is a very bad woman. He accuses my father that I chosed this direction after bearing your fathers torture. But she is a mean woman she never ever cares of her daughter that she involved me in this mud as well." (R4)

4. *Obsession*. Obsession is a relentless idea, thought, picture, or drive that is capable of interfering with individuals' regular thoughts and results in constant restlessness, trouble, or distress. Five out of five reported obsessions (N=5, 100%).

"When I hear the mention of aunty from any member of the family, a strange fear comes.it reminds me all the pain we suffered due to her in childhood. I am very much afraid of my aunt and uncle's interference; I think he will snatch my father from us." (R2)

"She forbids my husband to come to me and just come to her. Is there anything more selfish than her." (R5)

5. *Infidelity*. Infidelity is the discrediting the marital or relational commitment to stay exclusive to the romantic partner. Three out of five reported infidelity (N=3, 60%).

"I don't trust my father or my husband at all both are my enemies. I restricted my mother and sisters not to tell about my daughter to anyone. Sometimes I even get away from my mother and sisters and think that they hurt me so much if they would care for me than never left helpless then I think that my mother and sisters are probably more compelled than me who are still suffering are tolerated." (R3)

"I hate my father in fact I hate every man I think all the man specie are insane that's why I never want to get married." (R4)

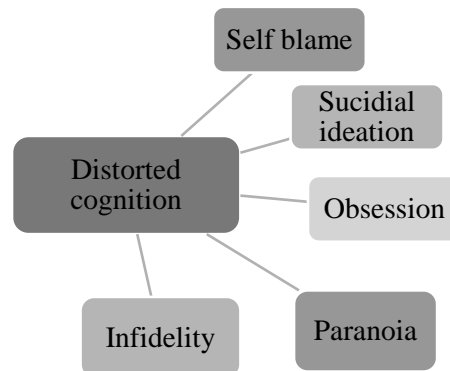


Figure 5: *Sub Themes of Distorted cognition*

Theme V.

Emotional disturbance. A fear, anxiety, or other emotional conditions that result in maladaptive behaviors ranging from withdrawal and detachment to aggression and anger outbursts which effect a person's social functioning.

"No one cares or feels for me, I often feel inferior. It seems that what others have, I can never have." (R3)

"I always regret why I didn't avenge my mother why I couldn't save my mother I regret that she saved me and lost her life. I love my mother very much and I miss all her words. I have a lot of revenge and I am very sad to miss my mother. " (R5)

Following are the subordinate themes of emotional disturbances.

1. *Low mood.* A low mood is normally set off by psychological stressors; for instance, frustrations, stress, monetary concerns, emotional issues with others. Five out of five reported low mood (N=4, 80%).
 "I often sit alone and cry a lot for no reason. I want to be silent or cry all the time." (R4)
 "I miss my mother and get sad, I miss her a lot and often weep during nights." (R5)
2. Emotional liability is an emotional cycle portrayed by regular, impulsive, and serious changes in feelings bringing about a powerlessness to keep a steady emotional state. Five out of five reported emotional liability (N=5, 100%).
 "I have no control over my emotions; even a small thing hurts me a lot." (R1)
 "Sometimes I feel inferior that I have nothing, and sometimes I feel extremely powerful." (R5)
3. *Fear.* Fear is a feeling initiated by apparent risk or danger, which causes physiological changes and causing social changes, for example, escaping, or freezing from apparent traumatic accidents. Four out of five reported fear (N=4, 80%).
 "I feel like scared of people and gathering I feel that I can't escape from this." (R2)
 "I miss my mother and sisters very much. I am also afraid of what people think of me." (R3)
4. *Aggression.* Aggression is a term that we utilize each day to describe the conduct of others and maybe even of ourselves. Five out of five reported aggression (N=5, 100%).
 "There is a lot of anger in talking about things for no reason." (R3)
 "I can't control my emotions; I gets angry for no reason." (R4)
5. *Irritability.* Irritability is the emotional capacity that makes individuals to react to changes in their current circumstances. Four out of five reported irritability (N=4, 80%).
 "I feel irritable." (R5)
 "I feel restless in gathering." (R3)
6. *Anxiety.* Anxiety is a feeling portrayed by sensations of strain, stressful thoughts and events causing physiological changes like fast pulse, palpitations and shortness of breath. Five out of five reported anxiety (N=5, 100%).
 "I get anxious and entangled for no reason." (R1)
 "I feel anxious. I am scared of people and crowds, I think these people will look inside me and see my flaws." (R2)
7. *Hate.* Sigmund Freud characterized hate as a personality trait that desires to destroy the source of its sadness, in addition to that it hatred is used as a mechanism of self-conservation. Four out of five reported hate (N=4, 80%).
 "I hate that khansama who ruined my life I want to kill him." (R1)
 "I hate my father. This type of men is insane that he is no more my father." (R5)

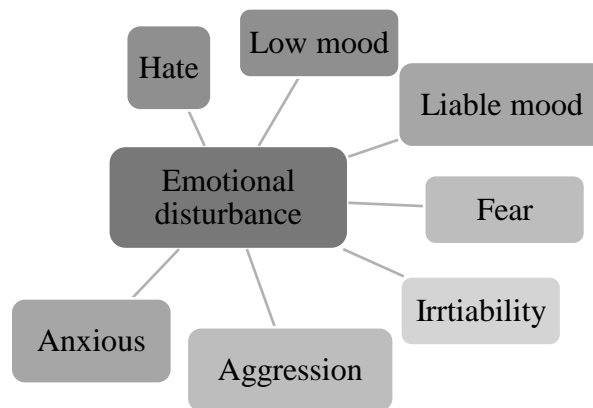


Figure 6: Sub Themes of Emotional disturbance

Theme VI.

Behavioral problems. Behavioral problem is an example of troublesome behaviors which are not considered regular or normal and hinders an individual's working. Problem behaviors are those that aren't considered normally satisfactory. Almost everybody can have a phase of problematic behavior or an error in judgment. But problem behavior is a steady example. Problem behaviors can fluctuate in the intensity and severity.

"I have become a completely different person. There is a lot of anger and irritability in my behavior. I rarely get along with others. I often fight with others." (R3)

"I don't trust others. I feel different. I feel like I'm not like them. I'm not as confident and good-natured as people." (R5)

Following are the subordinate themes of behavioral problems.

1. *Verbal aggression.* Verbal aggression can be characterized as intentionally destructive behavior that is aggressive and repetitive. Five out of five reported verbal aggression (N=5, 100%).

"I become very rigid, often I get aggressive on my children." (R4)

"I have become a completely different person. There is a lot of anger and irritability in my behavior. I rarely get along with others. I often fight with others." (R5)

2. *Self-harm, or self-mutilation.* Self-harm, or self-mutilation, is the demonstration of purposely committing torture and harm to one's own body. Four out of five reported self-harm (N=4, 80%).

"I tried to eat sleeping pills once." (R1)

"I started eating saparia and paan to harm myself." (R3)

3. *Avoidance/avoidant coping.* Avoidance/avoidant coping or escape coping is a maladaptive coping strategy described by the effort to avoid the management of a stressor. Four out of five reported avoidances (N=4, 80%).

"I avoid the place or situation where there is a chance of discussion about aunt." (R2)

"People take advantage of my personality, that's why I avoid relying on others.

" (R4)

4. *Submissive (or passive) behavior.* Submissive (or passive) behavior implies avoiding saying what you truly mean and not seeking to as for one's needs, especially when another person has different requirements. A submissive individual is a passive receiver of violence, trying not to disturb others either because of the fact that they dread them or they dread to offend them. Four out of five reported submissive behaviors (N=4, 80%).

"I depend on others for my work. I think people will misunderstand me and will get benefit. When I am wrong, I easily excuse from others." (R2)

"I don't talk to anyone, I live in my heart, I'm far from religion, I don't spend much time with others, and I don't share much. I avoid people and even run away from friends." (R3)

5. *Approval seeking behavior.* Approval seeking behavior is expectation to get more approval and regard from others. Four out of five reported approval seeking (N=4, 80%).

"I like the approvals of others. And I do that task with more motivation that are more approved by others." (R1)

"When someone compliments me or likes me, I have great thoughts about it. I don't try to improve my condition anymore, otherwise I would have left with him." (R5)

6. *Lying.* Lying is a form of correspondence that includes two major elements: the liar and the deceived. Individuals tend to lie because of multiple reasons, few of such are reported by respondents. Five out of five reported lying (N=5, 100%).

"I sometimes lie for my own benefit and deceive others for my own benefit." (R1)

"I often make my own decisions or lie to save myself." (R3)

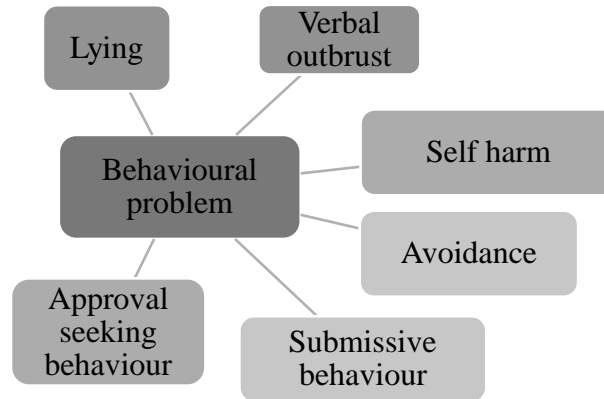


Figure 7: *Sub Themes of Behavioral Problems*

Discussion

The present study used phenomenological research design to explore Childhood Traumatic Experiences, Early Maladaptive Schemas and Personality Dysfunction in shelter home residents. All the themes extracted from data are interconnected among childhood traumas, early maladaptive schemas and personality dysfunctions i.e. *maa baap ki apas ma bht larrai hoti th aur ya bt mgy bht takleef dati th mgy lgta ha k ma kitni badnaseeb hu bachpan sa isi persahani ma rh rh hu mgy apni shaksait bht namukamal lgti ama ksi pa itabar ni kr pati*. Although childhood traumatic experiences are a noteworthy dynamic for the later onset of psychopathology, it suggests that individuals who have experienced such negative occasions will face serious psychological impacts later in their lives (Trickett, Reiffman & Putnam, 2001).

In the cognitive literature, it has been anticipated that core cognitive schemas show a mediating part in clinical symptoms were connected with childhood traumatic experiences (Hankin, 2005; Rekart, Mineka, Zinbarg & Griffith, 2007). These fundamental cognitive strategies have been mentioned to as interpersonal schemas or primary beliefs or early maladaptive schemas (EMS) (Beck, 1995). A number of studies enlightening the relationship between EMSs and late commencement of psychopathology have been directed and the focus has been getting augmented consideration. Cognitive theory of personality disorders was presented by Bernstein (2002) in patients with accounts of emotional abuse or neglect originated on individual's conception of maladaptive schemas, measuring the bond between early abusive/traumatic experiences and advanced psychopathology.

Six super-ordinate themes are extracted from the data provided by the participant's i.e. abuse, rejection, loss, distorted cognition, emotional disturbances, and behavioral problems. The sub-ordinate themes emerged from abuse is Physical abuse, Emotional abuse, Sexual abuse, and Verbal abuse. The sub-ordinate themes emerged from Rejection is Parental rejection, Social rejection, Peer rejection, and Romantic rejection. The sub-ordinate themes emerged from Loss is Financial loss, and Loss of loved ones. The sub-ordinate themes emerged from distorted cognition is self-blame, suicidal ideation, obsession, infidelity, and paranoia. The sub-ordinate themes emerged from emotional disturbances is low mood, liable mood, fear, irritability, aggression, anxious, and hate. The sub-ordinate themes emerged from behavioral problems is verbal outburst, self-harm, avoidance, submissive behavior, approval seeking behavior, and lying.

Conclusion

The study focused on exploring more about the phenomenon of Childhood Traumatic Experiences, Early Maladaptive Schemas and Personality Dysfunction in shelter home residents. This topic has not been explored enough in Pakistan before and whatever research

that has been carried out on Childhood Traumatic Experiences, Early Maladaptive Schemas and Personality Dysfunction in shelter home residents in the west or in Pakistan, is less congruent with this current research. The results and findings of this study show how commonly these Childhood Traumatic Experiences, Early Maladaptive Schemas and Personality Dysfunction can be found shelter home residents. The results of this study are consistent with the previous literature that has been found on shelter home residents. The findings of this study can be used as a measure and a reference point for future researchers who can utilise these findings. The themes that have been found using a qualitative approach can also be used as quantitative measures in future for further exploring the phenomenon.

Limitations and Suggestions

Although this research provides a basic framework it can be extended by conducting research on each of the themes established in this study individually. Furthermore, findings of this study can be quantified to generate a questionnaire on the subject in Pakistani context. This research can help researchers and the clinicians in order to resolve traumas and enhance the quality of life of shelter-home residents by shedding light on some core and deep factors.

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