

imPACT 2022



12TH INTERNATIONAL CBT CONFERENCE

OCT 14 - 16[™], 2022

THEME:

YOUTH, PSYCHOSIS & CBT

Website

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Dr. Afzal Javed

Consultant Psychiatrist (UK and Pakistan)
Honorary Professor. Institute of Applied Health Research,
University of Birmingham, United Kingdom
Honorary Clinical Associate Professor, Warwick Medical School,
University of Warwick, United Kingdom

Patron in Chief

address you all, with much pride and happiness that the PACT team is passionate and dedicated as ever to promote and facilitate education, training, and provision of CBT not only to professionals and patients but also to the public for the promotion of mental health. On the occasion of the 12th International CBT Conference, I hope that our message will go global and inspire others to join us on our quest to make CBT well understood, accepted and available.



Dr. Farooq Naeem

MD, MRCPsych, MSc Research Methods, PhD Professor, University of Toronto & Staff Psychiatrist, Centre for Addiction & Mental Health, Toronto, Canada

Founder President

Association of Cognitive Therapists (PACT), would help introduce cognitive behavioral therapy as a front runner in management of many psychological and psychiatric conditions and today I am pleased that PACT is on-track to achieve its purpose. In these testing times, youth is our greatest resource, and amidst the many problems our youth faces today, wherein mental health is most at risk, cognitive therapy is offering a glimmer of hope, for the prevention and management of psychosis and keeping our youth, healthy and happy.



Prof. Dr. M. Ayub

MBBS, MRCPsych, MSc., MD, President PACT, Senior Research Fellow at University College London (UCL)

President

congratulate the PACT team for holding this annual conference. It is culmination of a calendar full of academic successes. The PACT has been instrumental in adapting psychological interventions for Pakistan and has set trends for international efforts in this area. During this year we have increased our outreach in South Asia.

We have prioritized complex conditions like trauma focused CBT, Personality difficulties, youth mental health and psychosis for our focus.

I am looking forward to another successful year ahead.



Dr. Mirrat Gul

Ph.D., MSCP. ADCP, MScPsy Senior Clinical Psychologist Vice President PACT Finance Secretary PACP

Vice President

oday marks the 12th international conference of PACT. The first ever national Cognitive Therapy organization in Asia and Middle East. Our hard work and struggle to promote and facilitate education, training and provision of CBT across the country is on apex and is evident by our accomplishments.

When we think of it, it comes to mind that," Why is our association stressing so much about Cognitive Therapy?"

It is because CBT has proved to be highly effective evidence based psychotherapy in a range of conditions, from the promotion of mental health to the treatment of various psychiatric disorders, its education, training, and practice. However, when we started our organization during 2009, in Pakistan the use of CBT was limited, restricted and unstructured. This poses an ethical question to all mental health professionals here as to why our population has been deprived so far of availability of such a popular and efficacious intervention, and now with our efforts we were able to produce more than 100 CBT therapists in Pakistan and more than 10 international CBT therapists from Nepal and UAE.

On this occasion I would like to mark Pakistan Association of Cognitive Therapies as an emblem of the promotion of Cognitive Therapy for better mental health to the general public. Moreover, we promise that it shall serve as a resource for matters related to all the new waves of Cognitive Therapies as well.



Dr. Madeeha Latif

PhD, M.Phil, PMD (Clinical Psychology) General Secretary PACT, Asst. Prof. Sindh Institute of Physical Medicine & Rehabilitation, Karachi.

General Secretary

t gives me immense pleasure to write for the impact of 12th International CBT conference organized by the Pakistan Association of Cognitive Therapies, under the theme, "Youth, psychosis and CBT.

Research has proved that CBT iseffective in the short term and long-term management of mental health disorders. For this conference, very insightful research abstracts have been received from the students and practitioners in the field ofmental health. Further, topic of the Presentations will address the cultural aspects of youth, psychosis and CBT including contextual cues that inform our hypothesis development and treatment strategies with clients. Our program will showcase research, clinical practice and training that increases our understanding of the mental health problems and mechanisms, improves the efficacy and effectiveness of CBT for diverse groups, and enables us to disseminate these evidence-based treatments across professions.

I am thankful to the whole team for working tirelessly in organizing the conference. I wish all the very best to each and every one with the belief that any amount of hardship in life would be overcome by our collective efforts.



Dr. Aatir H. Rajput

MBBS, CDE, Dip Applied Psychology, MSc Psychology, Dip CBT, CRCP, CHPE, CME, MD - Psychiatry Senior Registrar - Dept. of Psychiatry & Behavioral Sciences - LUMHS Deputy Director - Centre for Psycho-Social & Academic Wellbeing, Liaquat University of Medical and Health Sciences, Jamshoro Manager - Research & Development, Pakistan Association of Cognitive Therapist

Editor Impact

ear reader, I present to you, the new edition of your favorite imPACT. Until last year, I was among the loyal readership of this periodical, and this year, I have the good fortune to address you as the editor. I have seen this periodical grow and prosper, and the readership expand exponentially each year for the past 12 years. I would try my best to fuel the trajectory with more interesting, innovative, and important content. This year, the theme is, "Youth, CBT and Psychosis" and we bring to you, transcripts of the talks, of international experts participating in this year's International CBT Conference. Good luck and happy reading!

Speakers



Prof. Dr. Firdaus Mukhtar
Clinical Psychologist
Deputy Dean at School of Graduate Studies,
University Putra Malaysia,
President Asian CBT Association



Dr. Nimisha KumarPhD (DU), MSc CBT, PG Cert Clin Sup (UK)
Founder President, IACBT
President-Elect, Asian CBT Association



Isabel Clarke
Consultant Clinical Psychologist
Southern Health NHS Foundation Trust, UK.



Dr. Fiona Kennedy
Consultant Clinical Psychologist
Therapist, Trainer, Researcher, Author.
Associate Editor, The Cognitive Behaviour Therapist
Director, GreenWood Mentors Ltd, Cowes, UK

PACT Team Members



Falahat Maqbool Coordinator CBT Diploma



Kainaz Zia
Joint Secretary



Mifrah Rauf Sethi Chief Coordinator



Dr. Rizwana Amin
Coordinator Research Grant
& Funding



Taj Muhammad Coordinator Social Media



Dr. Aizaz Jamal Information Secretary



Dr. Ahmed Bilal Incharge Research Ethics Board



Dr. Anila Sadaf
Incharge Event Planning
& Management



Khadija Aslam Coordinator Continuous Professional Development



14th October 2022

Date and Time	Venue	Topic	Presenter
14 th Oct 2022,	Human Rights	Cognitive	Dr. Madeeha Latif
10 am to 12 pm	Commission of	behaviour therapy	PhD, M.Phil, PMD (Clinical
	Pakistan	for Trauma	Psychology)
	Aiwan-i-Jamhoor, 107	Survivors	General Secretary PACT,
	Tipu Block		Asst. Prof. Sindh Institute of
	New Garden Town,		Physical Medicine &
	Lahore, Pakistan		Rehabilitation, Karachi.
14 th Oct 2022,	Centre for Clinical	Pre-psychotic	Prof. Dr. M. Ayub
02 pm to 04 pm	Psychology, New	states and	MBBS, MRCPsych, MSc., MD,
	Building, University of	transition to	President PACT,
	the Punjab	psychosis	Senior Research Fellow at
	Lahore, Pakistan		University College London (UCL)

Inauguration Ceremony Moderator: Ms. Falahat Maqbool

Time	Topic	Expert
8: 30 am to 9:00 am	Registration	
9:00 am to 9:05 am	Recitation of Holy Quran	
9:05 am to	Welcome address by	Prof. Dr. M. Ayub
9:15 am	President PACT	
9:15 am to 9:25 am	PACT Annual Report by General Secretary PACT	Dr. Madeeha Latif
9:25 am to	Message by President World	Dr. Afzal Javed
9:30 am	Psychiatric Association (WPA)	Consultant Psychiatrist (UK and Pakistan) Honorary Professor. Institute of Applied Health Research, University of Birmingham, UK Honorary Clinical Associate Professor, Warwick Medical School, University of Warwick, UK
9:30am to	Address by President Pakistan	Prof. Dr. Imtiaz Doger
9:35 am	Psychiatric Society (PPS)	Chairperson Professor of Psychiatry at Punjab Medical College, Faisalabad
9:35am to	Address by President Punjab	Dr. Iram Z. Bokharey
9:40 am	Chapter PACP	Chief Clinical Psychologist- Punjab
9:40 am to 9:45 am	Address by the Chief President of the Punjab Chapter of the Pakistan	Prof. Dr. Ali Madeeh Hashmi Tenured Professor of Psychiatry, King Edward
7.43 am	Psychiatric Society (PPS)	Medical University/Professor of Psychiatry,
		Punjab Institute of Mental Health
9:45 am to 9:50 am	Message by the President of the Pakistan Psychological Association (PPA))	Prof. Dr. Muhammad Jahanzeb Khan Vice Chancellor at FATA University
9:50 am to 9:55	Message by Expert	Prof. Dr. Bashir Ahmad Khyber Medical College/KTH, Peshawar Postgraduate qualification in Cognitive Behaviour Therapies from the institute of psychiatry King's College London and Postgraduate qualification in Medical Education from Oxford University England.
9:55am to	Address by the Medical	Dr. S. Imran Murtaza
10:00 am	Superintendent, Fountain House, Lahore	Consultant Psychiatrist
10:00 am to 10:05 am	Address by the President of the Society for the Advancement of Muslim Psychology	Dr. Amjad Tufail Head Dept. of Psychology, MAO College Lahore.
10:05 am to 10:10 am	Address by the President of the Young Psychologists Association (YPA)	Ms. Mubashra Tayyab
10:10 am to 10:15 am	Message by the President of the British Association for Behavioural and Cognitive Psychotherapies (BABCP)	Saiqa Naz PWP, CBT Therapist, Co-author Improving Access to Psychological Therapies (IAPT) BAME (mental health) guide, Treasurer Multi- Faith Rochdale.
10:15 am to 10:20 am	Message by the President, Asian CBT Association	Prof. Dr Firdaus Mukhtar Clinical Psychologist, Deputy Dean at School of Graduate Studies, Universiti Putra Malaysia.
10:20 am to 10:25 am	Message by the President-Elect, Asian CBT AssociationMessage by the President-Elect, Asian CBT Association	Dr. Namisha Kumar PhD (DU), MSc CBT, PG Cert Clin Sup (UK) Founder President, IACBT
10:25 am to 10:30 am	Comments by Special Guest, Director HRCP	Madam Farah Zia Editor, The News Sunday.
10:30 am to 10:35 am	Comments by Special Guest, Director HRCP	Shahid Siddiqui Column Writer
10:35 am to 10:40 am	Address by Founder President PACT	Prof. Dr. Farooq Naeem
10:40 am to	Vote of Thanks by	Dr. Mirrat Gul
10:45 am	Secretary Organising Committee Vice President - PACT	
10:45 am to 11:00 am	Distribution of Souvenirs	
11:00 am	Tea	

Plenary Session / Talk of Experts

Day 15th October 2022, 11:30 am to 1:00 pm

Chair of the Session: Prof. Dr. Altaf Qadir & Dr. Tanveer Nasr Moderator: Ms. Anum Gull

Session 1	Toute.	E
11: 30 am to	Topics Psychoeducation of the families of	Dr. Tanveer Nasr
11:37 am	patients with schizophrenia to	Ex- Chief Clinical Psychologist
11.57 am	prevent Relapse	Punjab.
11.38 am to	New Trends in Youth and Future of	Prof. Dr. Imran Ijaz Haider
11:45 am	CBT	Chairperson Department of Psychiatry and
11110 4111		Behavioural Sciences, Fatima Memorial
		Hospital, Lahore
11:46 am to	Psychosis in children and	Prof. Dr. Nazish Imran
11:53 am	adolescents: An overview of	Chairperson Department of Child Psychiatry,
	Clinical Presentation in public	KEMU/ Mayo Hospital, Lahore
	sector inpatient setting in Lahore.	
11: 54 am to	Early psychosis and Its Prevention	Dr. Sumeera Q. Bokhari
12: 01 pm		Chairperson Department of Psychiatry and
		Behavioural Sciences, Fatima Memorial
		Hospital, Lahore
12: 02pm to	Psychosis & Youth Psychosocial	Dr. Ayesha Rashid
12:09 pm	Challenges	Chairperson Department of Psychiatry and
		Behavioural Sciences, Fatima Memorial
12 10		Hospital, Lahore
12: 10 pm to	Is Love a cognitive Distortion? A	Prof. Dr. Nadeem Ahmad Bajwa
12: 17 pm	talk on Psychology of love and its	Sialkot Medical College
12: 18 pm to	Cognitive Distortions. CBT with emerging youth	Sialkot Dr. Mahwesh Arooj Naz
12: 18 pm to	CB1 with emerging youth	Incharge Clinical Psychology Unit
12. 23 pm		GC University, Lahore
12: 26 pm to	Remedial role of friendship in Early	Dr. Afsheen Gul
12: 32 pm	Psychosis	Head Department of Clinical Psychology
F	,	Kinnaird College for Women, Lahore
12: 34 am to	Psychosis- The Realistic Realities	Dr. Sarah Subhan
12:41 pm	of Illusion	Acting Chair & Dean, Department of Clinical
•		Psychology, School of Professional
		Psychology. UMT, Lahore
12:42am to	Cognitive behavior therapy in	Dr Alvin Lai Oon Ng Professor of Psychology.
12: 49 pm	Malaysia: Historical development	Department of Psychology, School of Medical
	and status	and Life Sciences, Sunway University,
		Malaysia
12: 49 pm	Concluding remarks by	
	chairpersons	
1:00 pm to	Lunch Break	
1:30 pm		

Scientific Program Conference Day Day 15th October 2022

Scientific Session-1 Psychosis, Youth & CBT- 1:30 pm to 3:00pm

Chair of the Session: Dr. Shazia Hassan & Dr. Usman Amin Hotiana Moderator: Ms. Hafsa Farrukh

Chair of the Session: Dr. Shazia Hassan & Dr. Usman Amin Hotiana Moderator: Ms. Haisa Farrukh				
Time	Scientific papers	Presenter	Institute	
1:30 pm to 1:37 pm	End of Silent Talk: Breaking 14 Years Mutism of a Psychotic Patient with Cognitive Behavioral Therapy	1-Zain-ul-Abideen Gulbaz 2-Nazish Habib	I-Centre for Clinical Psychology, University of the Punjab, Lahore, Pakistan. 2-Clinical Psychologist, Punjab Institute of Mental Health, Lahore, Pakistan.	
1:38pm to 1:45pm	Effectiveness of Mindfulness Based Cognitive Behavioral Techniques: A Therapeutic Approach for Obsessive Compulsive Disorder	1-Doaa Shamim 2- Zaofishan Qureshi	Air University, Islamabad	
1:46pm to 1:52pm	Efficacy of CBT in the Management of Cyberchondria: A Comparative Study	1-Ms. Aiman Rahim (Corresponding Author) 2-Ms. Humaira Naz (Assistant Professor/Consultant Clinical Psychologist)	1-Department of Centre for Clinical Psychology, Punjab University, Lahore, Pakistan 2- Centre for Clinical Psychology, Punjab University, Lahore, Pakistan	
1:53pm to 2:00pm	Cognitive Behavioral Therapy for Bipolar I Disorder: A Clinical Case Study	Fajar Rafi Dr. Mirrat Gul	Department of Psychiatry and Behavioral Sciences, Mayo Hospital, Lahore	
2:28pm to 2:35pm	A Whirling Storm: Effectiveness of CBT with Early Detected Case of Psychosis.	1-Tania Anwar 2- Nazish Habib	I-Centre for Clinical Psychology, University of the Punjab, Lahore, Pakistan. 2- Clinical Psychologist, Punjab Institute of Mental Health, Lahore, Pakistan	

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2:01pm to 2:08pm	Effectiveness of Mindfulness Based Cognitive Therapy (MBCT) in reducing Psychological Distress and Enhancing Quality of Life among Female Transgenders	1-Rabia Rasheed, MS (CP) 2-Ambreen Fatima, PhD Scholar 3-Rizwana Amin, PhD	Department of Professional Psychology Bahria University, Islamabad Campus
2:09pm to 2:15pm	Integrating Cognitive Behavioral Therapy with Mindful Detachment: A Case Study of an Adult Male with Obsessive Compulsive Disorder and Depression	Amna Shafique, MS (CP)	RIPHAH International University, Islamabad
2:16pm to 2:22pm	Efficacy of Cognitive Behavioura therapy (CBT) in children with DHD: A Pilot Study	Mifrah Rauf Sethi	Peshawar Medical College, Riphah International University, Islamabad
2:23pm to 2:30pm	Management of Positive and Negative Symptoms of Schizophrenia with Cognitive Behaviour Therapy: A Case Study	1-Sumayya Shakir 2-Warisha Zaffar	I-Centre for Clinical Psychology, University of the Punjab, Lahore, Pakistan. 2-Clinical Psychologist, Sir Ganga Ram Hospital, Lahore, Pakistan
2:31 pm to 2: 38pm	Schizophrenia: A Case Study on a Male Having Paranoia	Ms. Rikza Sajjad Dr. Mirrat Gul	Department of Psychiatry and Behavioral Sciences, Mayo Hospital, Lahore
2:39pm to 2:46pm	The Voice – Efficacy of Cognitive Behavioral Therapy in Treating a Psychotic Patient	Aiza Muhammad Imtiaz Dr. Mirrat Gul	1-Centre for Clinical Psychology, University of The Punjab, Lahore 2-Department of Psychiatry and Behavioral Sciences, Mayo Hospital, Lahore
2:47pm to 3:00 pm	QUESTION- ANSWER SESSION	Certificate Distribution	

Scientific Session- 2 Psychosis, Youth & CBT- 3 pm to 4:30pm

Chair of the Session: Dr. Aisha Sitwat & Dr. Rubina Aslam Moderator: Ms. Bushra Zafar

Time	Scientific papers	Presenter	Institute
3:00pm to 3:07pm	Systematic review on randomized control trials of CBT in improving functioning for first episode psychosis	Nazish Habib Resham Kukab Prof. Dr. Saima Dawood Prof. Dr. Saeed Farooq Prof. Dr. Farooq Naeem Prof. Dr. M. Ayub	Punjab Institute of Mental Health (PIMH)
3:07pm to 3:14pm	Efficacy of doing what Matters in times of stress: An illustrated guide for reducing stress among caregivers of children with Neurodevelopmental disorders	I-Arooj Maria Paulus (Research Assistant) 2-Dr. Ayesha Aziz (Assistant Professor) 3-Sonia Naeem (Assistant Professor)	I-Department of Applied Psychology-Kinnaird College for Women 2- Department of Professional Psychology- Bahria University Islamabad 3-Department of Applied Psychology Kinnaird College for Women
3:14pm to 3:21pm	The effectiveness of Cognitive Behavioral Therapy on a case of Schizophrenia	Ramish Moosa Dr. Tehreem Arshad	Centre for Clinical Psychology University of the Punjab, Lahore
3:21pm to 3:28 pm	CBT as Intervention for Depressive Disorders with Psychotic Features: A Case Study	Sadia Sohail Anila Sadaf Mubashir	I-Department of Behavioral Sciences (Fatima Jinnah Women University, Rawalpindi) 2-Department of Applied Psychology (National University of Modern Languages, Rawalpindi)
3:28pm to 3:35pm	The application of CBT on a patient suffering from schizophrenia	Syeda Kanza Fatima Dr. Mirrat Gul	1-Centre for Clinical Psychology, University of the Punjab, Lahore, 2-Department of Psychiatry and Behavioral Sciences, Mayo Hospital, Lahore

3:35pm to 3:42pm	Cognitive Behavioral Therapy is an Effective Treatment of Bipolar II Disorder: A Case Study	1-Dr. Syeda Razia Bukhari (Consultant Clinical Psychologist) Higher Education Commission (H EC, Pakistan) Approved PhD Supervisor Assistant Professor & Student Counselor Faculty of Education and Social Sciences 2- Rimsha Khan MS Scholar Faculty of Social Sciences	1-Shaheed Zulfikar Ali Bhutto Institute of Science and Technology, H-8/4 Islamabad (SZABIST, Islamabad Campus). 2-Shaheed Zulfiqar Ali Bhutto Institute of Science and Technology H8/4, Islamabad
3:42pm to 3:49pm	The efficacy of Cognitive Behavioral Therapy on Patient having Schizophrenia	Alia Akram Dr. Mirrat Gul	1-Centre for Clinical Psychology, University of the Punjab, Lahore, 2-Department of Psychiatry and Behavioral Sciences, Mayo Hospital, Lahore
3:49pm to 4:00pm	The efficacy of CBT for treating first episode psychosis	Sana Jaffar Nazish Habib	I-Centre for Clinical Psychology, University of the Punjab, Lahore, Pakistan. 2- Clinical Psychologist, Punjab Institute of Mental Health, Lahore, Pakistan.
4:00pm to 4:07pm	Impact of Hypochondriasis on social adjustment & Inception of delusional symptoms among adults	Nimra Mushtaq AQ MS. Maria Rafique Qureshi	RIPHAH International University Gulberg Greens, Islamabad
4:07pm to 4:14pm	CBT for Schizophrenia: A case study	1-Uzma Perveen 2- Dr. Mirrat Gul	1-Centre for Clinical Psychology, University of the Punjab, Lahore, 2-Department of Psychiatry and Behavioral Sciences, Mayo Hospital, Lahore
4:14pm to 4:30pm	QUESTION- ANSWER SESSION	Certificate distribution	

Post Conference Workshop 16th October 2022

Date and Time	Venue	Topic	Presenter
10 am to 12 pm	Online Session on	Working with	Dr Fiona Kennedy
	Zoom	Dissociation across	Consultant Clinical Psychologist
		diagnoses	Director, Greenwood Mentors Ltd
			Therapist, Trainer, Researcher,
			Author- Associate Editor, The
			Cognitive Behaviour Therapist
02 pm to 04 pm	Online Session on	Engaging with	Isabel Clarke
	Zoom	psychosis from the	Consultant Clinical Psychologist
		inside; the	Southern Health NHS Foundation
		Comprehend, Cope	Trust, UK.
		and Connect (CCC)	
		perspective.	
04 pm to 06 pm	Online Session on	Emotion processing in	Dr Nimisha Kumar
	Zoom	CBT	PhD (DU), MSc CBT, PG Cert Clin
			Sup (UK)
			Founder President, IACBT
			President-Elect, Asian CBT
			Association
02 pm to 03 pm	Online Session on	DBT for Borderline	Prof. Dr Firdaus Mukhtar
	Zoom	Personality Disorder	Clinical Psychologist
			Deputy Dean at School of Graduate
			Studies, Universiti Putra Malaysia,
			President Asian CBT Association,

Post Conference Workshop

17th October 2022

Date and Time	Venue	Topic	Presenter
9 am to 12 noon	Faisalabad	CBT with Psychosis	Prof. Dr. Farooq Naeem

END OF SILENT TALK: BREAKING 14 YEARS MUTISM OF A PSYCHOTIC PATIENT WITH COGNITIVE BEHAVIORAL THERAPY

Zain-ul-Abideen Gulbaz & Nazish Habib Centre for Clinical Psychology, University of the Punjab, Lahore, Pakistan ¹, Clinical Psychologist, Punjab Institute of Mental Health, Lahore, Pakistan.

The patient was 37 years old man who was graduated and belonged to low socioeconomic class. The patient came to Punjab Institute of Mental Health, Lahore with the presenting complaints of over-suspiciousness, long term mutism, belief that his family will kill him, aggressiveness, odd behaviors, running away from the home and irritability. He was informally assessed by clinical interview, mental status examination, subjective rating of symptoms and evaluative belief questionnaire. Similarly, he was formally assessed by using Positive and Negative Syndrome Scale (PANSS). He was diagnosed with 295.90 (F20.9) Schizophrenia, Multiple episodes, currently in acute episode. The management plan of the patient consisted of cognitive behavioral therapy comprising of techniques like rapport building, psycho-education, relaxation exercise, normalizing, peripheral questioning, evidence for and against, reality testing. self-esteem building exercises, scheduling, medicine adherence and relapse prevention. The patient had a total of 17 sessions with the therapist. The patient's delusions related to paranoia were weakened and the major breakthrough of the therapy was the termination of 14 years long mutism. Overall, the patient reported almost 70% improvement in his symptoms after the completion of therapy.

Keywords: Mutism, Schizophrenia, Cognitive Behavioral Therapy, Evidence for and against, Peripheral Questioning, Paranoia.

EFFECTIVENESS OF MINDFULNESS BASED COGNITIVE BEHAVIORAL TECHNIQUES: A THERAPEUTIC APPROACH FOR OBSESSIVE COMPULSIVE DISORDER

Doaa Shamim & Zaofishan Qureshi *Air University, Islamabad*

The present study aimed to investigate the effectiveness of Mindfulness Based Cognitive Behavioral Techniques on individuals with Obsessive Compulsive Disorder (OCD). It was hypothesized thatMindfulness Based Cognitive Behavioral Techniques will significantly reduce OCD symptoms. The data was collected from 10 individuals (5males, 5females) that were diagnosed with Obsessive Compulsive Disorder (OCD). The data was collected from various hospitals and private clinics based in Islamabad, Pakistan. Yale Brown Obsessive Compulsive Scale (Y-BOCS; Goodman, et al., 1989)was administered before and after the intervention and scores

were maintained. After intervention, OCD symptoms scores (M=15.60, SD=3.98) are significantly less than the scores before intervention (M=22.30, SD=3.30). The findings of the study revealed that Mindfulness Based Cognitive Behavioral Techniques significantly reduced the symptoms of OCD. The result indicates that Mindfulness Based Cognitive Behavioral Techniques are beneficial in the symptom reduction of OCD.

Keywords: Obsessive Compulsive Disorder, Mindfulness Based Cognitive Behavioral Techniques.

COGNITIVE BEHAVIORAL THERAPY FOR BIPOLAR I DISORDER: A CLINICAL CASE STUDY

Fajar Rafi, Dr. Mirrat Gul Department of Psychiatry and Behavioral Sciences, Mayo Hospital, Lahore

Bipolar I Disorder is characterized by extreme mood fluctuations with episodes of mania (with hypomania /depression). Mania is characterized by elevated mood and energy, euphoria or irritable mood, racing thoughts, over activity, and reduced need for sleep. The case highlights the management of Bipolar I Disorder, with psychotic features in a 24 year old unmarried woman. The client presented in with the complaints of decreased need for sleep, running away from home, undressed herself, talking excessively and increased pressure to keep talking, loosening of associations (jumps from one topic to another), visual and auditory hallucinations (seeing scary figures and hearing their voices), increased distractibility, decreased appetite, behaving aggressively, self-beating, laughing and crying spells. Assessment was done informally through Baseline Charts, DSM-5 checklist, and Mental Status Examination while for formal assessment, Young Mania Rating Scale and PANSS were administered. Considering the scores and complaints, the client was diagnosed with Bipolar I Disorder with psychotic features; current manic episode. Psychotherapeutic intervention was comprised of Cognitive Behavioral Therapy (rapport building, psychoeducation, medicine adherence, reassurance and emotional ventilation, activity scheduling, social rhythm therapy, monitoring behavior and mood, contingency cognitive restructuring, management, behavioral experiments) which resulted in improvement in the client's overall symptoms. Follow-up sessions also showed improvement in the client.

Keywords: Bipolar I Disorder, mania, psychotic features, CBT

A WHIRLING STORM: EFFECTIVENESS OF CBT WITH EARLY DETECTED CASE OF PSYCHOSIS.

Tania Anwar & Nazish Habib Centre for Clinical Psychology, University of the Punjab, Lahore, Pakistan ¹, Clinical Psychologist, Punjab Institute of Mental Health, Lahore, Pakistan.

The patient was 19 years old girl enrolled in first year of BS (hons) and belonged to a middle socioeconomic status. The patient came to Punjab Institute of Mental Health, Lahore with the presenting complaints of aggressiveness, delusions related to mother and maternal family, irritability, auditory hallucinations and difficulty in studies. She was informally assessed through clinical interview, mental status examination, subjective rating of symptoms, hallucinations and delusion record chart. While formally assessed through Positive and Negative Syndrome Scale (PANSS). The patient was diagnosed with 295.90 (F.20.9) Schizoaffective Disorder. Her case was conceptualized on Kingdon and Turkington (1994) model and the management plan was devised on cognitive behavior therapy according to the idiosyncratic needs of the patient. The management goals were achieved through various techniques such as rapport psycho-education, through befriending, normalization of her symptoms, peripheral questioning, anger management, challenging her delusional beliefs through behavioral experiment and evidence for and against. Furthermore, for management of auditory hallucinations coping strategy enhancement, activity scheduling, reattribution of voices was used along with relapse prevention. Total nineteen therapeutic sessions were conducted with the patient. There was marked improvement in her condition indicated by post assessment.

Keywords. Delusions, Auditory Hallucinations, Schizoaffective Disorder.

EFFECTIVENESS OF MINDFULNESS BASED COGNITIVE THERAPY (MBCT) IN REDUCING PSYCHOLOGICAL DISTRESS AND ENHANCING QUALITY OF LIFE AMONG FEMALE TRANSGENDERS

Rabia Rasheed, MS (CP); Ambreen Fatima, PhD Scholar & Rizwana Amin, PhD

Department of Professional Psychology - Bahria University, Islamabad Campus

The purpose of the study was to investigate the effectiveness of Mindfulness Based Cognitive Therapy in reducing psychological distress levels among female Transgenders. Small N subject design with single baseline pre testing and post testing was implemented on the sample of 5 female Transgenders. Participant's age ranged 18-44 years (Mean= 25.6; SD=1.140). It was hypothesized that MBCT intervention will reduce psychological distress

and enhance mindfulness that will improve quality of life among all participants. In order to measure the variables, Urdu versions of Kessler Psychological Distress Scale K10, and World Health Organization Quality of Life Scale WHOQOL-BREF and Mindfulness Attention Awareness Scale MAAS were used. 8 week intervention Plan of Mindfulness Based Cognitive therapy (Segal & William, 2002) was used. The results showed that psychological distress was reduced and quality of life was improved in the psychological domain and acceptance of environment with the increase level of mindfulness in all participants. It was also identified that all participants psychological distress was caused by people negative views, bullying and teasing attitude due to being transgender. Everyone has a need to create awareness about transgenders psychological health problems and show calming attitude towards them.

Key words: Mindfulness Based Cognitive Therapy, Psychological distress, mindfulness, Quality of life, Transgenders.

SCHIZOPHRENIA: A CASE STUDY ON A MALE HAVING PARANOIA

Ms. Rikza Sajjad, Dr. Mirrat Gul Department of Psychiatry and Behavioral Sciences, Mayo Hospital, Lahore

Schizophrenia is chronic mental disorder characterized by a set of symptoms such as delusions, hallucinations, distortion in thinking, distorted motor behavior and negative symptoms. This case report presents role of cognitive therapy, supportive work and skill training in managing paranoid symptoms of a patient diagnosed with schizophrenia. A 23 years old, unemployed male adult was found as being afraid in going out, meeting people and using social media as he felt someone will arrest him on his wrongdoings. His family was observing his odd behavior from few weeks and took him to psychiatrist for evaluation. He was further referred to a clinical psychologist for psychotherapy for early management conjoined with the dosage of risperidone, diazepam and naze. He was assessed on PANSS, Brief Psychotic Rating Scale and subjective rating. Management plan was based on CBT which comprised of techniques such as rapport building, psychoeducation, behavior activation and mastery, sleep hygiene, relaxation techniques, anger management techniques, identifying negative thoughts their distortions, behavioral experiment and surveys, identifying and challenging maladaptive beliefs and relapse prevention. Overall, 17 sessions were done which showed improvement in his symptoms. Follow up sessions also showed improved quality of life.

Keywords: psychosis, CBT, Management and assessment

INTEGRATING COGNITIVE BEHAVIORAL THERAPY WITH MINDFUL DETACHMENT: A CASE STUDY OF AN ADULT MALE WITH OBSESSIVE COMPULSIVE DISORDER AND DEPRESSION

Amna Shafique RIPHAH International University, Islamabad

Intrusive thoughts, images, and urges are core features of OCD. According to Wells, cognitive attentional syndrome (CAS) is activated when an individual focuses excessively on intrusive thoughts. 2005). engagement precipitates worry, and rumination and continues unabated, leading to OCD prolongation of depression. The following case report describes the use of cognitive behavioral therapy based on detached mindful treatment for OCD co-morbid with Major Depressive Disorder a male adult experienced intrusive thoughts, images of sexual nature, and religious nature, which caused marked anxiety or distress, so he tried to stop them by mental rituals. He also had complaints of decreased appetite, insomnia, hopelessness, and guilt. He had been managing her worry and intrusive thoughts with both behavioral and experiential forms of avoidance. The therapy encompasses 10 weekly, 50 min sessions, extended by two booster sessions. Treatment focused on managing intrusive thoughts, marked anxiety and distress, thought suppression, insomnia, hopelessness, inappropriate guilt, and loss of interest in all activities. Outcome measurement Yale-Brown Obsessive Compulsive Scale & Beck Depression Inventory) were used and results are presented as a single-case experimental design in 'AB' format (i.e. baseline period and post-intervention) the results showed a significant difference between pre and post-measurement. Likewise, it offers the opportunity to critically appraise the limitations of the intervention as well as practical challenges and suggestions thought to be useful for therapists willing to implement CBT with detached mindfulness in the future.

Keywords: Cognitive Behavioral Therapy, Metacognitions detached mindfulness, Obsessive Compulsive Disorder, Major Depressive Disorder.

EFFICACY OF DOING WHAT MATTERS IN TIMES OF STRESS: AN ILLUSTRATED GUIDE FOR REDUCING STRESS AMONG CAREGIVERS OF CHILDREN WITH

NEURODEVELOPMENTAL DISORDERS

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The current study assessed the efficacy of "Doing What Matters in Times of Stress: An Illustrated Guide" among

caregivers of children with neurodevelopmental disorders in Pakistan. It hypothesized that experimental group A receiving intervention is likely to have less psychological stress than waitlist control group B, at the post-intervention level as compared to pre-intervention level. Further, resilience among parents is likely to be measured as a therapeutic outcome. A within-between subjects research design was used to select a sample of caregivers of children with neurodevelopmental disorders (N = 20) from Amin Maktab Centre for Special Education by purposive sampling ($M_{age} = 36.85$, SD = 3.72). DSM-5 Level 1 Cross-Cutting Symptom Measure (APA, 2013), WHO Disability Assessment Schedule (WHO, 2012) and Connor Davidson Resilience Scale (Connor & Davidson, 2003) were used as measures. Wilcoxon signed-rank test showed that there is a significant within-group mean rank difference in pre, post, and follow-up intervention assessment on disability and resilience scores. Further, Mann-Whitney U test showed that group A had significantly less disability (MR = 5.65, p = .00) and greater resilience (MR = 15.50,p = .00) as compared to the waitlist control group B at post-intervention level. These findings imply that this WHO intervention is effective for those who are caring for children with neurodevelopmental disorders. It highlights mindfulness and resilience as protective factors against stressors. Improved well-being of caregivers will also improve the caregiving role and children with neurodevelopmental well-being of disorders as well.

Keywords: Doing What Matters in Times of Stress, Caregivers, Neurodevelopmental Disorders, Stress, Disability, and Resilience.

IMPACT OF ONLINE SHOPPING ADDICTION ON COMPULSIVE BUYING BEHAVIOR AND LIFE SATISFACTION AMONG UNIVERSITY STUDENTS

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This study investigated the impact of online shopping addiction on compulsive buying behavior and life satisfaction on university students which include both male and females from different cities of Pakistan. The purpose of the study was to find scientifically that whether online shopping addiction has impact on compulsive buying behavior and life satisfaction or not. Research participants were 300 individuals, 150 males and 150 females with age range of 20 to 30 years. The study is quantitative in nature. Purposive sampling technique has been used. The Online Shopping Addiction Scale by Zhao, Tian, & Xin in 2017 (Zhao et al, 2017). Compulsive Buying Behavior Screening tool Maccarrone-Eaglen and Schofield (Maccarrone-Eaglen& Schofield, 2017) and Satisfaction with Life scale by Diener, Emmons, Larsen & Griffin in 1985 (Diener et al., 1985) were administered on the participants. To test the hypothesis, descriptive statistics, linear regression, Pearson bivariate correlation and t test, were used. The findings of the present study highlights that online shopping addiction is strong predictor of compulsive buying behavior and life satisfaction. It also indicated that online shopping addiction and compulsive buying behavior are having significant positive correlation between them while online shopping addiction and compulsive buying behavior have significant negative correlation with life satisfaction. The results also shows that female students have higher score on online shopping addiction and compulsive buying behavior while male students have higher score on life satisfaction. Hypothetical and actual results are closely related.

Keywords: Online shopping addiction, compulsive buying behavior, life satisfaction

IMPACT OF HYPOCHONDRIASIS ON SOCIAL ADJUSTMENT AND INCEPTION OF DELUSIONAL SYMPTOMS AMONG ADULTS

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The present study intended to see the impact of Hypochondriasis on social adjustment and inception of delusional symptoms among adults. The purpose of this study is to find it scientifically that whether significant difference exists in the hypochondriasis, social adjustment and inception of delusional symptoms among adults with respect to gender or not and to examine the impact of hypochondriasis on social adjustment and inception of delusional symptoms among adults. Research participants are 200 adults, 100 females and 100 males. Ranging from 20 to 30 years old. This study is quantitative in nature. Several measures are used to investigate the variables of the study - Short Health Anxiety Inventory to measure Hypochondriasis (health anxiety), Work and Social Adjustment Scale to measure social adjustment and Brown Assessment of beliefs Scale to measure inception of delusional symptoms. Convenient sampling technique has been used.Pearson Bivariate correlation, Independent Sample T test analysis and Linear Regression analysis were employed for the analysis of data. The results of the present study indicated that hypochondriasis has significantly positive correlation with social adjustment and inception of delusional symptoms. The results also show that female and male adults have non-significant difference on hypochondriasis. The findings of the present study highlight that hypochondriasis is a strong predictor of social adjustment and inception of delusional symptoms. Hypothetical and actual results are closely related.

Keywords: Hypochondriasis, Social Adjustment, inception of delusional symptoms.

THE VOICE – EFFICACY OF COGNITIVE BEHAVIORAL THERAPY IN TREATING A PSYCHOTIC PATIENT

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The patient was a 23 years old divorced woman and educated till Intermediate. She belonged to middle socioeconomic status. She came with presenting complaints of Odd /bizarre behavior (burning shoes and tearing them apart, contaminate dishes and her hands with her feces, destroying things), Complying to Voices of a pious female, Lack of trust on family, Sleep Disturbance, anger outburst, sitting alone, Disturbed patterns of eating, Sadness, Crying spells, Lack of selfhygiene. She was informally by clinical interview, mental status examination, subjective rating of symptoms, baselines for delusions and hallucination and Belief about Voices Questionnaire. Similarly, she was formally assessed by using Positive and Negative Syndrome Scale (PANSS). She was diagnosed with 295.90 (F20.9) Schizophrenia, Single episodes, currently in acute episode. Her case was conceptualized on Kingdon and Turkington (1994) model. The management plan was devised on CBT according to the idiosyncratic needs of the patient. Total 18 sessions were conducted with the patient in which various techniques such as psychoeducation, normalization, anger management, challenging delusional beliefs, behavioral experiment, coping strategy enhancement, verbal reattribution, activity scheduling, personal and sleep hygiene techniques along with relapse prevention were used along with the other techniques as per need of the patient. Patient and her mother reported significant improvement in her complaints.

SYSTEMATIC REVIEW ON RANDOMIZED CONTROL TRIALS OF CBT IN IMPROVING FUNCTIONING FOR FIRST EPISODE PSYCHOSIS

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CBT has been recommended along with antipsychotic medication in the management of first episode psychosis. Several randomized control trials have established the efficacy of CBT for treating first episode psychosis. In this paper a systematic review of randomized control trials of CBT with first episode psychosis was done with special focus on increasing functioning. The main objective of this systematic review will be to see effects of CBT on functioning, quality of life, insight and medication adherence in first episode psychosis. Three databases MEDLINE, EMBASE and PsycInfo were

searched from inception to June 29, 2022. The titles from all the three databases were combined and then duplicates were removed. Full text articles for 39 papers were acquired. Out of these 24 papers were selected for inclusion in the systematic reviews. Out of these only 15 had data on variables of interest. The studies in which at least 80% of the participants have first episode of psychosis and the trials where one group received CBT (with or without other treatments) and there was a comparison group, were included. The data was extracted about the four outcomes; functioning, insight, treatment adherence and quality of life. Out of twentyfour trials of first episode psychosis only fifteen included these as a measure. A small number of trials studied insight, quality of life and medication adherence. The sample size varied between 36 and 444. Only four studies had sample size greater than 100. For data synthesis a narrative review of the outcome was provided. Our main finding is that majority of these studies are small in size and underpowered. Functioning as outcome has been studied by 15 trials which is encouraging and there is evidence to support its usefulness but further research is required. The other variables are not examined by majority of the studies.

ATTENTION DEFICITS HYPERACTIVE DISORDER (ADHD): A PILOT STUDY

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Objective: To find out the efficacy of Cognitive behavioural therapy (CBT) in children with ADHD in terms of its impact on ADHD symptoms and behavioural problems. Methodology: This was a Quasi experimental Pre- Post study design on children with ADHD studying in different special schools of Peshawar with the age of 6 to 10 years. Questionnaires included demographic information sheet, Vanderbilt teachers Rating Scale and Strength and Difficulty Questionaire (SDQ) to fill out by the teachers. The same set of forms was filled one week after the CBT sessions. Students was undergo a cognitive-behavioral therapy sesions. The data was analysed by using SPSS v.25. **Results:** The mean age of the sample (n=31) was 8.77 ± 1.33 years. Majority of the students (n= 22, 71%) were Boys and were studying in Play group (n=8, 25.8%). The Cronbach's alpha reliability was 0.850 for the Vanderbilt ADHD Scale and 0.75 for the Strength and Difficulty Questionnaire. Majority of the students were in Experimental group (n=17, 54.8%). Significant difference was observed between pre and post-test assessment on ADHD and SDQ (P=0.000) on paired sample t-test. Similarly on independent sample t-test experimental group showed a significant difference than participants of treatment as usual group (p=0.000). The chisquare test showed a non-significant difference on ADHD symptoms, SDQ and their subtypes (p> 0.001), except Emotional, anxiety and depressive symptoms. Conclusion:

The current study concluded that applying Cognitive behaviour therapy had a positive effect on paying attention, decreasing hyperactivity, controlling impulsive behaviour, anxiety and depressive symptoms of children with ADHD. **Key Words:** Attention Deficit Hyperactivity Disorder, Children, Cognitive Behaviour Therapy.

CBT AS INTERVENTION FOR DEPRESSIVE DISORDERS WITH PSYCHOTIC FEATURES: A CASE STUDY

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Cognitive Behavioral Therapy (CBT) is an evidencebased therapy that has long been used effectively for the treatment of psychiatric conditions such as Depressive Disorders. Specialized CBT has also been effectively used with those experiencing psychotic symptoms such as delusions and hallucinations. The present case study is of a 25 years old married woman, who presented to the hospital setting with complaints of sadness, worthlessness and hopelessness, guilt, lack of interest and pleasure in daily activities, fatigue, crying spells, disturbed sleep and appetite, along with auditory hallucinations of voices invoking guilt and urging her to take her own life. Informal psychological assessment was done through behavioral observation, clinical interview and Mental State Examination (MSE) while formal assessment was done through the Psychotic Depression Assessment Scale (PDAS), the Depression, Anxiety and Stress (DASS)-42-Urdu translated version, Columbia Suicide Severity Rating Scale (C-SSRS) Clinical Practice Screener (Urdu), the HouseTreePerson Test and the Ten Item Personality Measure (TIPI)-Urdu translated version. A diagnosis of 296.34 (F33.3) Major Depressive Disorder, Recurrent Episode, Moderate, with (mood-congruent) Psychotic Features, was given, according to the DSM-5 criteria. The management plan included, primarily, the use of CBT as an intervention, tailored in accordance with the client's symptoms. Post intervention assessment showed marked improvement in client's symptoms. Limitations and follow-up monitoring were suggested.

Keywords: Cognitive Behavioral Therapy; Depressive Disorders; Psychotic Features

SCHIZOPHRENIA: A CASE STUDY ON A FEMALE PATIENT

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This case represents the application of CBT on a patient suffering from schizophrenia who presented to the hospital with presenting complaints of aggressiveness, odd behavior of either pacing restlessly or sitting quietly for hours, loss of appetite, sleep disturbances, hearing voices at night, suspiciousness, and rigid beliefs that her uncle raped had her and her mother and that she was pregnant. The patient was informally assessed through clinical interview, Mental Status Examination (MSE), and subjective rating of her beliefs. The formal assessment was carried out using Positive And Negative Syndrome Scale (PANSS) (Stanley Kay, Lewis Opler, & Abraham Fiszbein, 1989). Her scores on Positive and Negative Scale placed her on 93 percentiles for both scales. The case was conceptualized using stressvulnerability model (Zubin & Spring, 1977) and cognitive model of persecutory delusions schizophrenia (Garety& Freeman, 2002). Using Cognitive-Behaviour Therapy management schizophrenia, the patient was engaged in the process of therapy by building therapeutic alliance, normalized and educated, encouraged to explore her beliefs through peripheral questioning and actively participate by examining the evidence for and against her distressing beliefs, challenge the habitual patterns of thinking about those belief, and develop rational and acceptable alternative explanations. The outcome of the treatment showed considerable reduction in patient's subjective conviction in her beliefs and severity of her symptoms on Positive and Negative scale of PANSS placing her on 31 and 27 percentiles respectively.

SCHIZOPHRENIA: A CASE OF 33 YEAR OLD FEMALE

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This study was conducted to access the efficacy of Cognitive Behavioral Therapy on Patient having Schizophrenia. AB was a 33 year old female who was educated up till matric. She came to the psychiatry Department of Mayo Hospital with complaints of hearing voices and distress. She further reported inability to sleep and eat properly due to these voices. Assessment was done on formal and informal level. Informal assessment included clinical interview, mental state examination and visual analogue. On formal level assessment included PANNS, Voice Differential Power Scale. Patient was diagnosed with Schizophrenia with good insight. Her conceptualized on bio psychosocial was Vulnerability Model by Geraty (2001). Management was also done on Cognitive Behavioral Therapy. Treatment goals were achieved by the use of rapport building, collaborative empiricism, Case conceptualization on the model, Daily activity schedule, Self-hygiene, Deep breathing, PMR and Humming technique, Guided imagery/Safe Place, Socialization with other people, Normalizing the voices, Questioning the evidence, Emphasizing benefits of resistance, Rational and irrational belief, Questioning the voice command, Turning voices on and off and therapy blue print. The patient showed significant improvement in her symptoms after 13 sessions which revealed on visual analogue as well as on other measures at post assessment level. Patient reported 75% improvement in her symptoms.

A CASE STUDY OF 30 YEAR OLD FEMALE PATIENT HAVING SCHIZOPHRENIA

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The patient S.N was a 30-year-old married female. The patient was admitted to the female ward of the psychiatry department of Mayo Hospital, Lahore, with complaints of tooth decay, hair loss, fat loss in hands and feet, suspiciousness, decreased motivation for activities, poor hygiene, decreased speech, sleeplessness and decreased appetite. The patient was referred to the trainee clinical psychologist for psychological assessment management.Informal assessment included clinical interview, Mental State Examination (MSE) dysfunctional thought record. Formal assessment was carried out usingPositive and Negative syndrome Scale (Kay et al., 1989). According to DSM-5-TR, the patient is given the diagnosis of, F20.9, Schizophrenia. Case conceptualization was carried out using the stressvulnerability model (Zubin & Spring, 1977). The management plan involved and eclectic approach and integrated therapeutic techniques primarily from Cognitive Behavior Therapy (CBT) and Behavior Therapy (BT). The therapeutic techniques included building, collaborative rapport empiricism, psychoeducation, ABC model, sleep hygiene, Socratic questioning, cognitive restructuring, behavioral experiments, life skill training, activity scheduling, social skill training and token economy. Therapy blueprint was given to the patient during the terminating session. A total of 25 sessions were conducted with the patient. A comparison of pre-treatment assessment and post-test assessment revealed significant improvement in the patient's symptoms. The patient was later referred to a senior clinical psychologist for continuation of long-term goals. The therapy proved to be 78% effective in treating the patient's problem.