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Early Maladaptive Schemas and Agreeableness in Personality Five Factor Model

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Abstract

According to Young's schema therapy the Early Maladaptive Schemas (EMSs) are the deepest level of cognition, and innate personality tendencies are important for the understanding of early maladaptive schemas. Early maladaptive schemas are thought to be trait-like in that they are stable over time. This study examined the relationship between early maladaptive schemas with personality trait, agreeableness of Five-factor model (FMM). One hundred and eighty-six students (100 boys, 86 girls) were included in this study. All participants completed the subscale of agreeableness of NEO PI-R, and the Young Schema Questionnaire-Short Form (YSQ-SF). The result of Correlational analyses showed that the early maladaptive schemas negatively associated with Agreeableness. Regression analyses indicated that the early maladaptive schemas such as Mistrust / Abuse (MA), Social Isolation / alienation (SI), Unrelenting Standards / hypercriticalness (US) and Failure (FA) schemas can predict Agreeableness. Implications of these findings are discussed.

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Keywords: Early maladaptive schemas, agreeableness, five-factor model, NEO PI-R, schema questionnaire;

1. Introduction

Agreeableness emerged as the first factor in Digman and Takemoto-Chock's factor analysis of trait adjectives, and the second factor in Goldberg's (1990) factor analysis of personality adjectives. Agreeableness is related to a variety of antisocial tendencies. For example, high levels of agreeableness have been linked to reduced anger and reduced aggression (Gleason, Jensen-Campbell, & Richardson, 2004; Meier, Robinson, & Wilkowski, in press). Individuals high in Agreeableness also make use of more effective conflict resolution strategies (e.g., Jensen-Campbell & Graziano, 2001), and tend to argue less in the course of their everyday lives (Meier & Robinson, 2004). In the five-factor model, Agreeableness, which describes the humane aspects of people, such as altruism, nurturance, caring, and emotional support at one end and hostility, indifference to others, self-centeredness, spitefulness, and jealousy at the other end. The behavioural tendencies typically associated with this factor include being courteous, good-natured, co-operative, soft-hearted, and tolerant. Agreeableness is often viewed in terms of its interpersonal correlates. Experience-sampling studies have found that, in comparison to disagreeable individuals, agreeable individuals generally engage in less quarrelsome behaviour and more cooperative behaviour in daily life (Moskowitz, 1994). In terms of the social cognitive basis of agreeableness, this trait dimension has been associated with less perceived interpersonal conflict in laboratory interaction paradigms (Graziano, Jensen-

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Campbell, & Hair, 1996) and agreeable individuals exhibit a preference for more socially adaptive modes of conflict resolution (Graziano et al., 1996; Jensen-Campbell & Graziano, 2001). As can be considered many studies have investigated the relationship between Agreeableness with many behaviors. However, these studies have many benefits; development of these traits should not be ignored. The current study tries to fill this gap in the previous studies with investigating have relation between Agreeableness and EMSs.

Schemas are a major determinant of how individuals think, feel, behave, and interact socially. According to Young's schema therapy the EMSs are thought to be trait-like in that they are stable over time. Schema therapy (Young, 1990) is an integrative therapy approach and theoretical framework used to treat clients with personality disorders, characterological issues, some chronic Axis I diagnoses, and various other difficult individual and couples' problems. Schema therapy evolved from Beck's cognitive therapy to integrate aspects of cognitive therapy, behavioural therapy, object relations, Gestalt therapy, constructivism, attachment models, and psychoanalysis. Schema therapy targets the chronic and characterological aspects of a disorder rather than the acute psychiatric symptoms (Martin, & Young, 2010). In schema therapy (Young, 1999; Young, Klosko, & Weishaar, 2003), EMSs, are proposed as the core and main target for treatment of personality disorders and longstanding characterological problems. The current definition of an EMSs is "a broad, pervasive theme or pattern, comprised of memories, emotions, cognitions, and bodily sensations, regarding oneself and one's relationships with others, developed during childhood or adolescence, elaborated throughout one's lifetime and dysfunctional to a significant degree" (Thimm, 2010a). According to Young et al. (2003), EMSs arises from the frustration of psychological core needs in childhood (e.g., secure attachment, expression of valid needs, realistic limits) through ongoing patterns of adverse experiences with family members or peers, traumatisation, or inappropriate boundaries. A mismatch between parental rearing behaviour and the innate temperament of the child may also lead to the development of EMS (Thimm, 2010b). EMSs perpetuate themselves through cognitive distortions, self-defeating life patterns, and maladaptive coping styles and lead directly or indirectly to psychological distress and to personality disorders (Young, 1999; Young et al., 2003). Schemas are a major determinant of how individuals think, feel, behave, and interact socially (Martin, & Yuong, 2010).

Early maladaptive schemas operate on the deepest level of cognition, usually outside of awareness, and make the individual psychologically vulnerable to develop depression, anxiety, dysfunctional relationships, addiction, childhood trauma, social phobia, substance abuse, eating disorders, personality disorders, panic disorder with agoraphobia and psychosomatic disorders (e.g., Thimm, 2010a, Young, 1999; Young et al., 2003; Cecero, Nelson, & Gillie, 2004; Waller, Kennerly, & Ohanian, 2007; Jovev & Jackson, 2004; Reeves, & Taylor, 2007; Hedley, Hoffart, & Sexton, 2001). The purpose of this study is examining the relationship between early maladaptive schemas and personality trait, Agreeableness. Based on schemas content and Agreeableness in five-factor model, we hypothesized that the Emotional Deprivation (ED), Social Isolation (SI), Mistrust / Abuse (MA), and Failure (FA) schemas would independently predict a significant portion of Agreeableness.

2. Method

2.1. Participants

Participants of this study were 200 students (100 men, 100 women, 16 missing) from the University of Tehran. The mean age of the sample was 24.62 years ($SD = 2.91$); the mean age of male student was 25.71 ($SD = 2.63$), and for female student was 23.42 years ($SD = 2.75$). Age ranged between 19 and 37 years.

2.2. Measure

Schema Questionnaire–Short Form (SQ-SF). The Schema Questionnaire–Short Form (SQ-SF) measures 15 EMSs. EMSs are grouped in five broad domains: Disconnection and Rejection, Impaired Autonomy and Performance, Impaired Limits, Other-Directedness, and Overvigilance and Inhibition. Respondents are asked to rate statements on a six point Likert scale from "completely untrue of me" to "describes me perfectly". The SQ-SF has in different studies shown adequate reliability, validity in predicting psychopathology, and factor structure. (e.g., Calvete, Estevez, Lopez de Arroyabe, & Ruiz, 2005; Waller, Meyer, & Ohanian, 2001). In Iran, Yousefi, Etemadi, Bahrami, Ahmadi, & Fatehizade (2010) examined the validity and reliability of EMSs questionnaire on a

sample of 579 people (in two stages of 394 and 185 people), and using split-half Cronbach's alpha, the reliability for the whole sample, females and males was reported as 91% and 86%, 87% and 84%, and 84% and 81% respectively. The calculated Cronbach's alpha for all factors was above 81%, and it was 91% for the whole questionnaire. The highest and lowest Cronbach's alpha was calculated for SI ($\alpha=91\%$) and IS ($\alpha=81\%$) respectively.

NEO-FFI. FFM personality traits were measured by the NEO Five Factor Inventory (NEO-FFI), a shortened version of the Neo-PI-R (Costa & McCrae, 1992). The NEO-FFI contains 60 items that are to be rated on a 5-point scale (1–5; totally disagree, disagree, neutral, agree, totally agree) and derives scores for the personality traits neuroticism, extraversion, openness to experience, agreeableness, and conscientiousness. A score was calculated if no more than nine items in total or three items per subscale were left unanswered. Missing and ambiguous answers were substituted with the neutral option. In this study we used one subscales of this questionnaire, Agreeableness. In Iran, Kiamehr (2001) examined the validity and reliability of NEO questionnaire. The calculated Cronbach's alpha for all factors was 0.54-0.79, and it was 91% for the whole questionnaire.

2.3. Procedure

At the beginning of a lecture, students were invited to participate in the study. It was emphasized that participation was not obliged. The students who agreed to participate filled out an informed consent. Then the questionnaires were administered in a random order to avoid order effects in the data.

3. Results

Correlation coefficients were used to examine the association of the early maladaptive schemas with the agreeableness. Table 1 describes correlations between the variables of the study. Correlational analyses showed that ED, MA, SI and EI schemas have significant negatively associated With the Agreeableness. Correlation coefficients showed that SI has maximum and ED has minimum associated with Agreeableness.

Table1. Correlation coefficients between EMSs and, N and E

| | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 10 | 11 | 12 | 13 | 14 | 15 | 16 |
|--------|---------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|----|
| 1. A | 1 | | | | | | | | | | | | | | | |
| 2.ED | -0.15* | 1 | | | | | | | | | | | | | | |
| 3.AB | -0.12 | 0.27 | 1 | | | | | | | | | | | | | |
| 4.MA | -0.24** | 0.37 | 0.45 | 1 | | | | | | | | | | | | |
| 5.SI | -0.28** | 0.66 | 0.43 | 0.47 | 1 | | | | | | | | | | | |
| 6.DS | -0.11 | 0.40 | 0.39 | 0.29 | 0.56 | 1 | | | | | | | | | | |
| 7.FA | 0.00 | 0.44 | 0.39 | 0.34 | 0.55 | 0.62 | 1 | | | | | | | | | |
| 8.DI | -0.04 | 0.33 | 0.40 | 0.41 | 0.46 | 0.4 | 0.57 | 1 | | | | | | | | |
| 9.VH | -0.05 | 0.37 | 0.36 | 0.26 | 0.47 | 0.55 | 0.65 | 0.65 | 1 | | | | | | | |
| 10.EM | -0.03 | 0.22 | 0.41 | 0.32 | 0.35 | 0.40 | 0.51 | 0.55 | 0.6 | 1 | | | | | | |
| 11.SB | -0.01 | 0.41 | 0.45 | 0.27 | 0.47 | 0.50 | 0.60 | 0.62 | 0.73 | 0.62 | 1 | | | | | |
| 12.SS | 0.11 | 0.11 | 0.20 | 0.21 | 0.15 | 0.09 | 0.18 | 0.24 | 0.16 | 0.28 | 0.35 | 1 | | | | |
| 13.EI | -0.16* | 0.30 | 0.28 | 0.27 | 0.42 | 0.37 | 0.36 | 0.39 | 0.34 | 0.33 | 0.39 | 0.14 | 1 | | | |
| 15. US | 0.07 | 0.07 | 0.12 | 0.23 | 0.28 | 0.22 | 0.04 | 0.07 | 0.08 | 0.32 | 0.27 | 0.23 | 0.28 | 1 | | |
| 14.ET | -0.06 | 0.30 | 0.15 | 0.33 | 0.32 | 0.18 | 0.05 | 0.32 | 0.20 | 0.25 | 0.26 | 0.26 | 0.23 | 0.58 | 1 | |
| 16.IS | -0.06 | 0.30 | 0.39 | 0.28 | 0.41 | 0.30 | 0.40 | 0.44 | 0.42 | 0.47 | 0.50 | 0.25 | 0.30 | 0.36 | 0.55 | 1 |

* $p<0.05$

** $p<0.01$

Entering EMSs of Agreeableness, linear regression was conducted. The regression resulted in a significant overall model predicting approximately 19% of the variance in Agreeableness ($R^2 = 0.19$, $p < 0.05$). Based on schemas content and Agreeableness in five-factor model, we hypothesized that the ED, Failure, SI, and DI schemas would independently predict a significant portion of Agreeableness; however only Mistrust / Abuse ($\beta = -0.30$, $t = 3.31$, p

< 0.05) and Social isolation / Alienation ($\beta = -0.23$, $t = -2.00$, $p < 0.05$), Failure ($\beta = 0.30$, $t = 2.66$, $p < 0.05$) and Unrelenting Standards ($\beta = 0.20$, $t = 2.17$, $p < 0.05$) schemas emerged as independent predictors of Agreeableness.

4. Discussion

This study aimed at investigating the relationship between early maladaptive schemas, and the agreeableness trait in the five-factor model personality dimensions. The results confirm that Agreeableness negatively associated with the early maladaptive schemas, as proposed Young et al (2003).

These findings were largely consistent with the previous researches (Thimm, 2010). In the five factor model, agreeableness, which describes the humane aspects of people, such as altruism, nurturance, caring, and emotional support at one end and hostility, indifference to others, self-centeredness, spitefulness, and jealousy at the other end. The behavioral tendencies typically associated with this factor include being courteous, good-natured, cooperative, soft-hearted, and tolerant.

To explanation the relationship between Mistrust / Abuse, Social isolation / Alienation, Unrelenting Standards and Failure with agreeableness it should referred to the characteristics of these schemas and Agreeableness. According to Young et al., (2003) individuals with Mistrust / Abuse schema tend to avoid intimacy. They do not share their innermost thoughts and feelings or get too close to others; and, in some cases, they end up cheating or abusing other people in a sort of pre-emptive strike. These patients do not trust other people to be honest and straightforward, and to have their best interests at heart. Rather, they are guarded and suspicious (Young, Klosko, & Weishaar, 2003). So gained negative association is consistent with characteristics of individuals with Agreeableness and Mistrust / Abuse schema. In other words individuals with Agreeableness are well-known with characteristics such as kindness, forgiveness, being compassionate, trusting, cooperative, humble, and softhearted attitude towards other people, and these characteristics are in opposition with persons who have the schema, so the person with Mistrust/Abuse schema is a person with high levels of Agreeableness. This conclusion is consistent with the results of the current research.

Patients with Social isolation / Alienation schema believe that they are different from other people. They do not feel that they are part of most groups and feel isolated, left out, or “on the outside looking in.” Anyone who grows up feeling different might develop the schema. Typical behaviours include staying on the periphery or avoiding groups altogether. These patients tend to engage in solitary activities: Most “loners” have this schema. Some of them may feel alienated from all groups but have some intimate relationships, or be disconnected from virtually everyone (Martin, & Jeffery, 2010). The persons with agreeableness close to others easily make relation with them. Based on this theory these persons can not have the Social isolation schema, so the absence of Social isolation causes the formation of consistent characteristics with big trait of Agreeableness.

Patients who have a Failure schema believe that they have failed relative to their peers in areas of achievement such as career, money, status, school, or sports. They feel that they are fundamentally inadequate compared to others at their level—that they are stupid, inept, untalented, ignorant, or unsuccessful, and that they inherently lack what it takes to succeed (Young, klosko, & wieshaare, 2003). Likely because these persons feel that others are better than them, do not approach to others and do not empathy with them so according to gained negative communication in this study it can be considered that the persons with agreeableness are successful persons.

Patients with Unrelenting Standards / Hypercriticalness schema present as perfectionistic and driven. Patients with this schema present as perfectionistic and driven It is difficult to have unrelenting standards, and it is often difficult to be with someone who has unrelenting standards. Another common feeling in patients with this schema is irritability, usually because not enough is getting done quickly enough or well enough. Yet another common feeling is competitiveness. Most patients who are classified as “type A”—that is, as demonstrating a chronic sense of time pressure, hostility, and competitiveness—have this schema (Young, klosko, wieshaare, 2003; Martin, & Young, 2010). These individuals cannot get close to other peers due to the fact that they can not help others, because of high standards that this characteristic cause to getting away from others, but individuals with

Agreeableness are helper and don't blame others. So there must be a negative association between this personality trait and Unrelenting standards schema as findings of this study show such negative association.

Beside the theoretical significance of these findings that allows integration of two competing approaches of personality and psychotherapy, it promotes our understanding of psychological pathology. Despite theoretically-relevant findings some important study limitations warrant consideration. First, this study relied on self-report of schemas and self-report traits personality. Although the YSQ-SF is a well-validated measure, direct questions about schemas may not actually measure implicit aspects of cognitive processing relevant to personality traits. Second, this study used a cross-sectional design to examine the relationships between schemas and personality traits. Although the current study suggests that schemas may lead to particular types personality traits, longitudinal research is needed to establish temporal associations. Young et al. (2003) have stated that maladaptive coping strategies, such as avoidance and emotional inhibition, can maintain schemas that contribute to personality disorder severity; further research might examine the association of schemas, coping strategies, and personality traits. Another area for further investigation might involve examination of schema modes and the association of current contextual variables with schema activation. For instance, Stopa and Waters (2005) found that a depressed mood induction resulted in increased scores on Emotional Deprivation and Defectiveness schema scales.

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