

Predicting Social Intimacy by Early Maladaptive Schemas and Attachment Styles

Ali Afshari¹

¹PH.D. Department of Psychology, Human Science Faculty, University of Maragheh, Maragheh, Iran

Submitted: 26 July 2017

Accepted: 19 November 2017

Int J Behav Sci. 2017; 11(2): 61-66

Corresponding Author:

Ali Afshari,
PH.D. Department of Psychology,
Human Science Faculty,
University of Maragheh,
Maragheh,
Iran
E-mail: a_afshari@maragheh.ac.ir

Abstract

Introduction: The present study was aimed to predict social intimacy by early maladaptive schemas and attachment styles.

Method: This descriptive study was conducted on high school students. In the study, about 400 subjects were selected as the sample through multistage cluster random sampling technique. Data collection was done by using Young's Early Maladaptive Schema Questionnaire, Hazan & Shaver Attachment Style Questionnaire, and the Miller Social Intimacy Scale. The data were analyzed by Descriptive statistics, Pearson correlation and enter regression analysis.

Results: The results showed that early maladaptive schemas and insecure attachment styles are not able to predict social intimacy. This is while, secure attachment styles have the ability to predict social intimacy and that; social intimacy has a significant negative relation to insecure attachment styles and early maladaptive schemas.

Conclusion: According to the research findings, secure attachment style is a good predictor of social intimacy. It seems necessary to pay attention to secure attachment style in order to increase social intimacy.

Keywords: Early Maladaptive Schemas, Attachment Styles, Social Intimacy

Introduction

The ability to build an intimate relationship with others is one of the key factors in health and well-being [1]. A friendly relationship among people is very important. Such a relationship has an effect on physical and psychological well-being. It influences people's ability of effective performance on different fields of personal, vocational and family accomplishment. Establishing and sustaining a friendly relationship is reinforced by a certain emotional ties. In the same way as healthy relationships in life bring benefits and produces positive outcomes, unsatisfactory relationships endanger people's physical and psychological health. Intimacy is not just a desire or aspiration, it is a real and basic need. It is a broad concept encompassing self-disclosure, sexual relation, and emotional, physical and intellectual closeness [1]. Peterson [2] identifies adolescence as a stage of life, which is started by biological developments and ended by social changes. Adolescence is a period of life in which many developments take place in the biological, psychological and social processes and in which, the desire for intimate relationships and self-disclosure are increased. Social intimacy is one of the main factors of establishing healthy relationships in the society. According to Ericsson's theory, if healthy social intimacy takes shape in adolescence, it will bring about amity and the want for marriage in adulthood. In case of the occurrence of an unhealthy development of social intimacy, it leads to social isolation of the person. Bagarozzi [3] defines intimacy as including 9 aspects of emotional, psychological, intellectual, sexual, physical, kinesthetic, social, recreational and temporal

intensity of intimacy and its 9 aspects differs from person to person. Intimate relationship with or emotional sympathy toward intimate people like parents, spouse and children, is one of the most prominent human needs. The endeavor to establish and maintain relationships with important people in life is a motivational attitude in life and goes along with a person throughout life.

Predisposing factors leave many people helpless while facing upcoming problems of life. Orientations of many theoretical models as well as the results of different studies in this domain are indicative of some experiences institutionalized in a person throughout the very earlier period [4]. Bowlby [5] argued that parents' behavior in childhood leads to the creation and development of models within the cognitive organization of the person – which is referred as schema. Later in life, these schemas act as prisms which shape a person's interpretation, selection and assessment out of his/her experiences. Although multiple researches at any time studied these schemas within their own theoretical framework, the results always confirmed the validity of the claim. According to Young [6,7], configuration of early maladaptive schemas has an effect on a person's way of thinking, feeling and behaving in the intimate relationships and other aspects of life. Young believed that these schemas could be developed as a result of the unsatisfied basic emotional needs of childhood. These needs include: secure attachment, self-control, competence and identity, freedom to express normal needs and emotions, recreation and self-arousal, realistic restrictions and Self-discipline. Csukly et al. [8] stated that schemas are assumptions or underlying rules that bring a person's thoughts and behaviors under its control. Schemas cover all, both conscious and unconscious, life. We cannot easily relinquish schemas because they are our knowledge about ourselves and the world around us. They specify what we are and determine how to understand the world –that is why cognitive psychologists believe that schemas are difficult to change [9]. Schemas are formed from the beginning of life and affect people throughout their lives [6]. However, early schemas are beliefs that people hold about themselves, others and the environment. They usually stem from the childhood unsatisfied basic needs particularly emotional ones [10]. In fact, early maladaptive schemas remain constant throughout life and form the basis for cognitive structures of the person. These schemas help people to construct their experiences about the world and process the information received [11]. Since the schemas are used as a frame for processing information and determine one's emotional reaction to interpersonal relations and life situations, they are said to have a relation with life satisfaction [12]. The studies conducted on early maladaptive schemas and the symptoms of psychopathology, confirmed the significance of schemas in the development of the symptoms. Early maladaptive schemas are figured out of initial interactions with caregivers. Both concepts are very important for the subsequent functions. Therefore, studying the relationship between these two concepts is essential.

Schemas are dimensional, which means they differ from each other according to "severity" and the "scope of activities in mind". As much as the schema is severe, a larger number of situations can bring it back. For example, if a person was severely and permanently criticized by his/her parent in childhood, it is almost possible that the schema of defectiveness arose in him/her when conducting with everyone. If an individual was criticized slightly and occasionally by only one of his parents, the schema of defectiveness arose only when conducting with power resources of the same gender as the critical parent. In as much as the schema is severe, its arousal and activity persist longer time in mind. Early maladaptive schemas, defined by Young, can be categorized into five domains of schemas: Disconnection / Rejection, Impaired Autonomy and Performance, Impaired Limits, Other-Directedness, over vigilance and Inhibition. So far, a total of 18 early maladaptive schemas have been detected [13]. Establishing relationship and attachment is necessary for psychological development, personality development and emotional health. It has effects on emotional health, feeling of security and mental health of people. Attachment pattern takes shape in childhood and remains relatively stable throughout the life. Over life, attachment is transmitted from the mother to close relatives and ultimately to wider groups. It turns into an important factor for the construction of personality and exerts an effect on the person's upcoming intimate relations so that by building any intimate relationship, attachment threw the person into a panic, which leads to the breakdown of the relationship and fear of intimacy. Bowlby [5, 13,14] described the process of the development of infant-mother attachment (emotional tie) and showed how system of attachment feelings and behaviors determines the nature of one's perceptions and experiences from interpersonal relations and emotional bonds. Following Bowlby's studies, Ainsworth, Blehar, Waters and Wall [15] recognized three styles as Secure Attachment, Avoidant Attachment and Ambivalent Attachment. Continuity of the attachment style in the process of transformation was recent research topics in this domain –the results of which confirmed the continuity [16]. Bowlby [14] stated that infants use their experience with caregivers in the construction of internal attachment figures or internal working models of self and others in relationships. Then, these attachment figures shape the expectations about future and relations. Besides, schemas include evaluative beliefs about self and others. It was said that attachment patterns can be conceptualized as cognitive schemas which was shaped in response to the experience with the caregiver at childhood. John Bowlby and Young [17] argued that early childhood experiences affect serious psychological functions. Bowlby believed that internal working models and attachment styles are principle components of personality. Young also claimed that developed personal schemas affect personality traits. Bowlby and Yang agreed that the results from personal mental models of early child-parent interaction are often valid at all times because people tend to elicit the information, which confirms previous models. Platts et al.

[18] noted that the notion of internal working models of attachment has a clear relationship with cognitive schemas. Platts suggested that attachment styles could act as a conceptual link between early experiences and the development of cognitive styles. This pattern of relationship, which is derived from the early interaction caregivers, affects emotional and psychological functions yet to come. According to what was said and based on the previous studies in this domain, there is a significant relationship between social intimacy and both early maladaptive schemas and attachment styles separately. It seems that we can recognize these relations and help people to solve their problems of adaptability by providing them with suitable solutions. Considering the importance of the issue, we tried to examine the utility of early maladaptive schemas and attachment styles in predicting social intimacy and analyze their effects on one another.

Method

The study is a correlation research. Descriptive statistics, Pearson correlation coefficient and enter regression analysis were used to analyze research data. The statistic population of the study included all high school students, out of whom, 384 male students were selected by multistage cluster random sampling method using Krejcie and Morgan's table. For this purpose, among all high schools, 12 high schools were randomly selected and students from second grade to senior year with different disciplines were sampled in a multi-stage cluster. The order of clusters was the schools of each region, followed by the educational level, then the field of study and the class. Finally the students were randomly chosen from the class list.

Research Instruments

Miller Social Intimacy Scale (1982)

This scale was developed by Miller and Lefcourt (1982). It includes two groups of questions. Six questions are designed to describe frequency of intimacy and other 11 questions are related to intimacy severity experienced by the person at the moment. Each of the items is rated on Likert 10-point scale, ranging from very rarely (1) to almost always (10). Items 2 and 14 of the questionnaire are scored inversely. In their numerous researches, Miller & Lefcourt reported Cronbach's alpha coefficient of the scale at 0.86 to 0.91. In Miller & Lefcourt's [18] studies,

test-retest reliability of the questionnaire, with an interval of two months and one month, was concluded at 0.84 and 0.96 respectively.

Young's Schema Questionnaire

Young's Schema Questionnaire Short Form (SQ-SF) is used to measure maladaptive schemas. The questionnaire is a 90 questions instrument to measure early maladaptive schemas, which graded as 6 options rating from completely true to completely untrue. The instrument measures 5 domains of maladaptive schemas including: Disconnection & Rejection, Impaired Autonomy & Performance, Impaired Limits, Other-Directedness, Over Vigilance & Inhibition. Cronbach's alpha of the questionnaire was obtained at 63%. Construct validity of Young's SQ-SF was achieved by using coefficients and regression analysis and showed significant at subscales, which means that the questionnaire has high construct validity.

Adult Attachment Scale

Adult Attachment Scale was developed by using the materials of Hazan and Shaver attachment test (1987). It is a 15-question test scored on a 5 point Likert-type scale and measures the three attachment styles named Secure, Avoidant and ambivalent. Cronbach's alpha coefficient for Secure, Avoidant, and Ambivalent Attachment styles concluded at 0.85, 0.84 and 0.85 respectively, which is indicative of a satisfactory internal consistency of the scale. Besides, Kendall's coefficient of concordance for Secure, Avoidant, and Ambivalent Attachment styles concluded at 0.80, 0.61 and 0.57 respectively. [20]

Results

In this section, the results of the analysis of the research data are mentioned. First, some of the descriptive statistics indexes, including the mean and standard deviation of the research variables, are presented, and are then analyzed by the hypotheses of the research.

In Table 1, descriptive information is provided for research variables. The contents of the table are the mean and standard deviations for the predictor variable of attachment styles, early maladaptive schemas and social intimacy.

Table 1 shows values of mean and standard deviation as well as the attachment styles, early maladaptive schemas and social intimacy in the study.

Table 1. Descriptive data of the research variables

	Variable	Mean	Standard deviation
Attachment styles	Secure style	12.68	4.28
	Ambivalent Unsecure style	13.15	5.14
	Avoidant Unsecure style	13.60	5.07
Early maladaptive schemas	Disconnection & Rejection	91.47	30.95
	Impaired Autonomy & Performance	79.40	23.30
	Impaired Limits	34.91	10.98
	Other-Directedness	55.94	13.63
	Over vigilance	73.79	22.34
Social intimacy	Social intimacy	102.84	30.04

Table 2 shows the correlation matrix of social intimacy with attachment styles and early maladaptive schemas. Accordingly, all early maladaptive schemas demonstrate a negative and inverse relationship with the secure attachment style. This is while, they have a significant positive relationship with avoidant and ambivalent unsecure attachment styles. Except for Other-Directedness, all early maladaptive schemas have a negative and inverse relationship with social intimacy. Finally, there is a negative and inverse relationship between social intimacy and attachment styles, but for secure attachment style.

According to table 3, multiple correlation coefficient of social intimacy with attachment styles and early maladaptive schemas were calculated at 0.76 in the students. In other words, early maladaptive schemas and attachment styles explain about 59 percent of the variance of social intimacy of the students. Furthermore, regression

effect of early maladaptive schemas and attachment styles on social intimacy of the students was significant at $F=70.069$ and $P<0.001$.

Table 4 represents the regression coefficients for predicting social intimacy by the components of attachment styles and early maladaptive schemas. Among the five components of early maladaptive schemas, Other-Directedness had the highest ratio of predicting variance of social intimacy which can significantly predict social intimacy. So, given the beta value of 0.093 and $t=2.72$ at $P<0.007$, it is a reliable predictor for students' social intimacy. In addition, among the three components of attachment styles, secure attachment style had the highest ratio of predicting variance of social intimacy and it can significantly predict social intimacy. Given the beta value of 0.679 and $t=14.75$ at $P<0.001$, it is an accurate predictor for the social intimacy of the students.

Table 2. The correlation matrix between research variables

Variable	1	2	3	4	5	6	7	8
1 Disconnection& Rejection	1							
2 Impaired Autonomy	0.506**	1						
3 Impaired Limits	0.398**	0.352**	1					
4 Other-Directedness	0.270**	0.181**	0.167**	1				
5 over vigilance	0.430**	0.479**	0.401**	0.080	1			
6 Secure style	-.233**	-.270**	-.170**	-.048	-.387**	1		
7 Ambivalent style	0.323**	0.370**	0.270**	0.120*	0.425**	-.690**	1	
8 Avoidant style	0.357**	0.399**	0.311**	0.149**	0.455**	-.673**	0.925**	1
9 Social intimacy	0.180**	-.220**	-.153**	0.045	-.360**	756**	-.559**	-.565**

**p<0.01 *p<0.05

Table 3. Regression model and variance analysis

Model	Sum of squares	df	Mean square	F	P	R	R2	SE
Regression	212248.641	8	26531.080	70.069	0.001	0.768	0.589	19.45
Residual	148049.119	391	378.642					
Total	360297.760	399						

Table 4. Summary results of standardized regression coefficients

Variable	Unstandardized coefficients		Standardized coefficients	T	Sig.
	B	Standard error	β		
Interaction	43.550	8.474	-	5.140	0.001
Secure attachment style	4.760	0.323	0.679	14.755	0.001
Ambivalent unsecure attachment style	0.209	0.510	0.036	0.410	0.682
Avoidant unsecure attachment style	-.728	0.527	-.123	-1.381	0.168
Disconnection & Rejection	0.012	0.040	0.012	0.304	0.761
Impaired Autonomy & Performance	0.017	0.053	0.013	0.329	0.742
Impaired Limits	-.014	0.102	-.005	-.136	0.892
Other-Directedness	0.204	0.075	0.093	2.725	0.007
over vigilance	-.099	0.055	-.074	-1.789	0.074

Discussion

The present study was intended to predict social intimacy by the early maladaptive schemas and attachments styles of students. The results confirmed the hypotheses that early maladaptive schemas and attachments styles can predict social intimacy of the students.

To explain the results, it can be said that early maladaptive schemas are nothing but self-harming emotional and cognitive patterns, which are formed at the beginning of the development in the mind and replicated in the course of life. Therefore, it can be said that a

person's behavior is not considered as part of the schemas. Rather, as Young argued, maladaptive behaviors are created in response to the schemas. Then, behaviors are brought on by schema but they are not regarded as part of schema. Therefore, it can be said that people with neurotic personality have negative feelings such as great fear, anger, guilt and stress. Thus, people with these personalities are apt to suffer from maladaptive schemas [8]. An important point about the internal active patterns is that individual differences in attachment styles are the reflection of systematic differences in the basic patterns of self and others, which are shaped in early childhood

and modified by subsequent experiences. In different stages of development, these patterns are consciously or unconsciously (mostly unconsciously) generalized at the level of interpersonal relationships. They play an important role in the formation of our cognitions, emotions and behaviors and are usually resistant to modifications. Internal active patterns help people to understand and predict their environment, to use adaptive behaviors such as maintaining proximity and consolidating psychological feeling of safety [22, 23]. Considering the above, we can say that secure attachment style is a firm predictor of social intimacy and that, 5 domains of early maladaptive schemas as well as both the avoidant and ambivalent attachments fail to predict social intimacy because they are dependent relations and abnormal and defective circumstances of schemas. Accordingly, a series of early maladaptive schemas and attachment styles have been activated by internal active pattern since childhood and they change people's outlook to life events and everyday issues. Consequently, the type and amount of social intimacy can be identified and predicted by these characteristics, which are being developed from childhood to adulthood.

Fear of intimacy is a personality trait. Those with these characteristics have problems in their relationships with others. They usually maintain their relationship not more than a few months. They are less satisfied with the quality of their romantic relationships and they feel uncomfortable in closeness with others. Having these problems, it is not surprising that people with fear of intimacy are far lonelier than others. Schemas in the domain of Impaired Autonomy and Performance have to do with expectations about oneself and the environment that interfere with one's ability to separate and function independently and one's perceived ability to survive alone. The typical family of origin is enmeshed, undermining the child's judgment, or overprotective. Therefore, the child lacks independence and he/she is afraid of expressing his/her emotions and compassion and intimacy. As healthy relationships in life bring benefits and positive outcomes, unsatisfactory relationships endanger people's physical and psychological health. Intimacy is not just a desire or aspiration, it is a real and basic need. It is a broad concept encompassing self-disclosure, sexual relation, and emotional, physical and intellectual closeness. People, who experience lonely feelings, fail to establish and maintain a close and friendly relationship because they enter into the path of dialogues with negative expectations and predictions [24]. Therefore, we can understand the negative and inverse relationship of social intimacy to the early maladaptive schemas. Those who have higher social intimacy enjoy adaptive and favorable schemas.

Conclusion

Therefore, it can be concluded that the willing to engage in close, warm, communicative and committed interactions is an indication of the ability to develop intimacy which plays a basic role in one's successful and productive life. As the theory predicted, people with

different attachment types reported different childhood experiences. The first group, who had a sense of emotional security, reported positive family relationships. This is while, the second group, who were rejected in childhood, had problems with their mothers and the third group with their fathers [25]. Therefore, it can be anticipated that people with secure attachment, show healthy schemas and demonstrate healthy mental frames and enjoy great social intimacy at adulthood.

Acknowledgment

We would like to thank the high school officials of Tabriz and also all the subjects who collaborated with us in this research.

References

- Noller P. Feeney J A. Peterson C. Personal relationships across the Lifespan. New York: Brunner- Routledge.2001.
- Petersen AC. Adolescent development. In M. R. Rosenwein (Ed.), Annual review of psychology.1988; 583-607. Palo Alto, C. A: Annual Reviews, Inc.
- Bagarozzi D. Enhancing intimacy in marriage. USA: Brunner-Routledge. 2001; 25-6.
- Harris AN E. Curtin L. Parental Perceptions, Early Maladaptive Schemas, and Depressive Symptoms in Young Adults, Cognitive Therapy and Research.2002; 26, 3, 405-416.
- Bowlby, J. Attachment and loss, (Vol 1). 1969. Attachment. New York
- Young JE. Cognitive therapy for personality disorders: A schema-focused approach (3rd Ed.). 1999. Sarasota, FL: Professional Resource Press.
- Young JE. Klosko JS. & Weishaar, M.E. Schema Therapy: A Practitioner's Guide, New York: Guilford. 2003.
- Csukly G. Telek R. Filipovits D. What is the relationship between the recognition of emotions and core beliefs: Associations between the recognition of emotions in facial expressions and the maladaptive schemas in depressed patients? J Behav Ther Exp Psychiat.2011; 42, 129-37.
- Young JE. Brown G. Young schema questionnaire- L3a. Cognitive Therapy Center of New York: Authors.2003.
- Cockram D. Drummond P. Lee W. Role and Treatment of Early Maladaptive Schemas in Vietnam Veterans with PTSD. Clinical Psychology and Psychotherapy. 2010; 17, 165-182.
- Mandelson P. Maladaptive schemas in non-clinical adolescents: Relations to Perceived parental rearing behaviors, big five personality factors and psychopathological symptoms. Clinical Psychology and Psychotherapy. 2008; 13, 40513.
- Wright MO. Crawford E. Del Castillo D. Childhood Emotional Maltreatment and Later Psychological Distress among College Student: The Mediating Role of Maladaptive Schemas, Child Abuse & Neglect: The International Journal. 2009; 33, 1, 59-68.
- Baranoff J. Oei T P.Young Schema Questionnaire: Review of Psychometric and Measurement Issues, Australian Journal of Psychology. 2007; 59, 2, 78-86.
- Bowlby J. Loss: Sadness & Depression. Attachment and Loss (vol.3), (International psycho-analytical library no.109). London: Hogarth Press.1980.
- Ainsworth MD. Blehar MC. Waters E. Wall S. Patterns of attachment: A Psychological study of the Strange Situation. Hillsdale, NJ: Erlbaum. 1978.
- Main M. Kaplan N. Cassidy J. Security in infancy, childhood and adulthood: A move to the level of representation. In I. Bretherton & E. Waters (Eds.), Growing points of attachment :Theory and research (pp.66- 104) (Monographs of the Society for Research in Child Development. 1985; 50, 1-2. Chicago :University of Chicago Press.
- Wearden A. Peters I. Berry K. Barrowclough CH. Liverside T. Adult attachment, parenting experience, and core beliefs about self and others. Personality and individual difference.2008; 44, 1246-1257.
- Platts H. Mason O. Tyson M. Early maladaptive schemas and adult attachment in a UK clinical sample. Psychology and Psychotherapy: Theory Research and Practice.2005; 78:549-564.
- Miller RS. Lefcourt HM. The assessment of social intimacy. Journal of

- Personality Assessment.1982; 46(5) 514– 518.
20. Hazan C. Shaver P. Romantic love conceptualized as an attachment process. *Journal of Personality and Social Psychology*. 1987; 42,511-542.
 21. Collins NL & Feeney BC. Working models of attachment shape perceptions of social support: Evidence from experimental and observational studies. *Journal of Personality and Social Psychology*. 2004; 87, 363-383.
 22. Kaftsiou K. Attachment and emotional intelligence abilities across the life course *Personality and Individual Differences*. 2004; 37, 129–145.
 23. Steiger RS. Parenting and attachment: an examination of mediation and moderation in the prediction of adolescent psychopathology (Unpublished doctoral dissertation).Simon Fraser University. 2008.
 24. Haddadi Koohsar, A A. Relation between emotional intelligence and quality of attachment in high school administrators, *presented in the 1st national congress on social factors effective in college student's health* oct. Tehran, Iran 2010; 13-14.