



TECHNIUM
SOCIAL SCIENCES JOURNAL

Vol. 17, 2021

**A new decade
for social changes**

www.techniumscience.com

ISSN 2668-7798



9 772668 779000

The relationship between maladaptive cognitive patterns and self-esteem in adolescents

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Abstract. The motivation for choosing this topic is based on our desire to understand how the cognitive patterns formed in the early periods of adolescent development, influence and affect the formation and development of self-esteem during adolescence. Adolescence is a crucial and critical period in the development of the individual, a period of transition between childhood and adulthood, and self-esteem plays a very important role for the development of the individual during this period. The mental development of the adolescent is largely determined by the family. Love and trust, answers and competent advice are the fundamental "tool" of parents that help children become autonomous and competent adults.

Keywords. relationship, cognitive schemas, self-esteem, adolescent

1. Adaptive cognitive schemas - conceptual delimitation

Pattern therapy is a global, integrated psychotherapy developed by Dr. Jeffrey Young and colleagues (1990, 2003) that essentially extends to traditional concepts and treatments of cognitive behavior.

This therapy integrates elements from different psychological theories, such as behavioral-cognitive therapy, object relations, psychoanalytic school and Gestalt therapy in a single unified approach to treatment (Young et al. 2003) regarding the treatment of personality disorders.

Young et al (2003) noted that specific regimens prevented rather than promoted therapy. Thus, they began to explore a new approach to treatment. They did not intend to develop another mode of treatment, but rather to expand on previous therapies.

Their new approach to treatment, called the therapy regimen, has proven effective and appropriate in treating many personality disorders, especially Borderline personality (Nordahl and Naeaseter, 2005).

Young and colleagues agree with the psychoanalytic school on the importance of the early childhood environment in the development of psychological problems. They hypothesized that early negative experiences with caregivers (usually parents) cause the child to develop a distorted view of himself, others, and the world, or lead to what Young called early maladaptation schemes (EMS).

These patterns begin adaptively and become embedded throughout life, causing maladaptive behaviors and responses. Young himself postulated that these schemes of struggle for survival are part of human motivation for consistency (Young et al., 2003 p.61). Young and his collaborators highlighted 18 maladaptation schemes, divided into five areas.

These schemes are triggered when the person encounters a situation similar to the one that produced his schemes. In the triggering phase, the person experiences intense negative effects.

To avoid these conditions or to adapt to the pattern, people use coping strategies. According to Young, the scheme itself does not contain a behavior, but rather leads to the behavior that becomes part of the coping responses. (Young, et al., 2003)

Aaron Beck (1967) defined the scheme as a (cognitive) structure for screening, coding, and evaluating stimuli that affect the body (p. 238) and as specific rules governing information processing and behavior (Beck et al., 1990, p. 8).

In the literature, schemas have been defined in several ways, and to add even more confusion it seems to be used interchangeably with the term basic faith (Weishaar & Beck, 2006). Conceptually, this fact retains a certain level of ambiguity between the two terms. Despite their association, a schema seems to be a cognitive processing, an informational structure that works in accordance with the pre-existing beliefs contained in it.

2. Early maladaptive patterns and adolescence

EMS research among young people is considered to remain poor compared to that of adult tests. Even so, EMS is thought to have originated in early life, born of family adversity in childhood.

Only a small number of studies have attempted to address the first key assumption of schema theory, that schemas have their origins in childhood.

Stallard (2007), in a six-month study with non-clinical children, 9/10 years, found that the patterns were present and moderately stable over time. However, the methodological limitations of the study must be taken into account.

Stallard reported that the same EMS were found in a sample of young children (8-13 years old) as in adolescents and adults, however, only eight of the 15 EMS were supported. This finding was a result of some schemes (self-sacrifice), being associated with positive effects in childhood, which suggests that these schemes are not maladaptive. This hypothesis could be true, as autonomy is a task for the development of adolescence, while in childhood a close relationship with parents is considered to be protective. In addition, self-sacrifice, which includes the need to please others, can be seen as a prosocial behavior in childhood (Rijkeboer and de Boo, 2010).

Young (1990) theorized that EMS is congruent with psychological symptoms and should correlate significantly with those symptoms. A small number of studies have investigated whether the content of specific regimens preferentially relates to specific symptomatology in adolescents, but most studies have been performed in adults. Some of the studies that investigated adult evidence found particular patterns that discriminate between different types of psychological disorders (Schmidt et al. 1995).

3. Self-esteem in adolescents

The first influential definition of self-esteem dates back to James (1980), who defined self-esteem as “the relationship between success in relevant areas of life, focused on the individual processes that form self-esteem” (Sowislo & Orth, 2013).

For example, Cooley (1902), in his conception of himself, stated that explicit or implicit feedback from others serves as a basis for self-opinions.

This affective self-assessment is not objective and is not related to specific behaviors.

According to Rosenberg (1989), high self-esteem “expresses the feeling that one is good enough. The individual simply feels that he is a person worth. He does not necessarily consider himself superior to others”(p. 31).

Global self-esteem is the positivity of a person's self-evaluation (Baumeister, 1998, p. 694) or the level of global respect he has for himself as a person.

Adolescence is important for the process of self-esteem formation. The formation of self-esteem can be stimulated, encouraged by both parents and teachers. The level of self-esteem is reflected in the attitude and behavior of the adolescent, both at home and at school.

Adolescents with a high level of self-esteem have the following characteristics: they are able to positively influence the opinion and behavior of others; approaches new situations positively and confidently; have a high level of tolerance for frustration; they accept early responsibilities, evaluate situations correctly; communicate positive feelings about themselves; they manage to have a good self-control.

On the other hand, high self-esteem functions as a role of resilience or positive adaptation.

The correlations between self-esteem and self-esteem stability are generally low, suggesting that they are independent manifestations of self-esteem, although they are both related to psychological well-being (Kernis and Goldman, 2003).

The processes related to the formation and development of self-esteem determine the perimeters of the relationship between the adolescent and the world around them, contribute to the development of their skills and the quality of activities performed.

Rosenberg found that higher self-esteem is largely driven by parents' interest in their children.

The study model of self-esteem based on the discrepancy between real and ideal self, considers the lack of correspondence between them to have high unrealistic ideal standards in a particular field or as a result of the individual's perception of insufficiently good performance in a particular area. When the individual believes that his real and ideal selves are incompatible, he tries to reduce the discrepancy between them, and the search for self-worth is one of the strongest motivating forces in human behavior in adolescents and adults.

The perception of the discrepancy between the real and the ideal self is associated with frustration, inferiority and depression.

The social situation in which the adolescent finds himself depends largely on the mental development determined by the family. Parents and other significant family members need to know the specifics of adolescence and help the child overcome difficulties, treating the future citizen with love, respect and trust. While self-esteem appears to decrease during adolescence, it increases in young adulthood (Tsai, Ying, & Lee, 2001).

Huang (2010) proposed that global self-esteem can change when people go through changes in their lives and that it can increase when people manage to face challenges in the process of development, maturation and changes in their lives medium.

4. Research objectives

The research objectives were to investigate the relationship between maladaptive cognitive patterns and self-esteem in adolescents. The aim was to highlight the differences, if any, between adolescents from bi-parental families and single-parent families and also to follow the gender distribution of the adolescent population investigated.

5. Research hypotheses

1. It is assumed that there are significant differences between adolescents from biparental families and single-parent families, in terms of the formation and development of early cognitive patterns.
2. Adolescents are presumed to have different self-esteem depending on the family of origin (biparental or single parent).
3. It is assumed that there are significant gender differences in the development of maladaptive cognitive patterns in adolescents.
4. It is assumed that there is a negative correlation regarding the development of maladaptive cognitive patterns in adolescents and self-esteem.

6. Research methods and techniques

The tools used for this research were the Young Cognitive Scheme Questionnaire - Short Form (YSQ - S3) and the Unconditional Self-Acceptance Questionnaire (USAQ).

7. Research participants

This study was conducted on a sample of 60 high school students, aged 15-17 years.

From the very beginning, the establishment of two samples on the basis of gender criteria and family structure was considered: bi-parental family and single-parent family, for statistical processing.

As the research was conducted online, the participation group was extended to students from several geographical areas in Romania, although most of the respondents came from Constanța County.

8. Data analysis and processing

Hypothesis 1: It is assumed that there are significant differences between adolescents from families nuclear and those from single-parent families, in terms of the formation and development of early cognitive patterns.

Table 1. Test statistic Mann-Whitney-Wilcoxon

Test Statistics ^a	
	SchemeCogn itiveYoung
Mann-Whitney U	22,500
Wilcoxon W	487,500
Z	-6,323
Asymp. Sig. (2-tailed)	,000

a. Grouping Variable:
StructuraFamiliala

We observe that $Z = -6,323$ at a significance threshold $p < 0,01$, therefore there are significant differences between adolescents from nuclear families and those from single-parent families - hypothesis is confirmed.

The family is a basic unit of society that has evolved with the changing needs and requirements of individuals and society.

The single-parent family is a kind of family in which either the father or the mother is absent due to various causes such

as: divorce, marital separation or death.

Single-parent status affects children mentally, emotionally and psychologically.

According to Young et al. (2003), maladaptive patterns are formed as a result of the interaction between children's emotional disposition and terrible events in childhood or

adolescence. One of the most difficult life events for children was the separation or divorce of the parents, as well as the death of the father or mother.

The results of the statistical analysis, as well as the qualitative analysis of the answers indicated that adolescents from single-parent families scored higher on social isolation / alienation, failure, dependence / incompetence, compared to adolescents from bi-parental families.

The results showed that there was a significant difference in terms of social isolation / alienation, failure, dependence / incompetence, schemes of subjugation and self-sacrifice between the two groups. In addition, the results revealed that there was a significant difference in subscales of anxiety / depression, depression, social problems, attention problems and aggressive behavior between the two groups.

Hypothesis 2: It is assumed that adolescents have different self-esteem depending on the family of origin (biparental or single parent).

Analyzing the results of the Levene Test (Table 4.7) which shows us the homogeneity of the variances. $F = 7,114$ at a significance threshold $p = 0.010$ As p is statistically significant it follows that the hypothesis is confirmed.

Table 2. T test for two independent samples

		Independent Samples Test								
		Levene's Test for Equality of Variances		t-test for Equality of Means						
		F	Sig.	t	df	Sig. (2-tailed)	Mean Difference	Std. Error Difference	95% Confidence Interval of the Difference	
									Lower	Upper
USAQ	Equal variances assumed	7,114	,010	-12,778	58	,000	-53,133	4,158	-61,457	-44,810
	Equal variances not assumed			-12,778	49,071	,000	-53,133	4,158	-61,489	-44,778

Analyzing the results of the Levene Test (Table 2) which shows us the homogeneity of the variances. $F = 7,114$ at a significance threshold $p = 0.010$ As p is statistically significant it follows that the hypothesis is confirmed.

Thus, the hypothesis that we assume that there are significant differences between adolescents from nuclear families and those from single-parent families, in terms of their self-esteem, is confirmed.

The results indicated that adolescents from single-parent families had a lower self-esteem compared to adolescents from two-parent families.

It seems that adolescents from single-parent and nuclear families with two parents are different in terms of self-esteem. Self-esteem is the psychological term that refers to a person's overall assessment or appreciation of his or her own worth.

Hypothesis 3: It is assumed that there are significant gender differences in the development of maladaptive cognitive patterns in adolescents.

Table 3. Mann-Whitney statistical test

Test Statistics^a

	USAQ
Mann-Whitney U	420,000
Wilcoxon W	885,000
Z	-.444
Asymp. Sig. (2-tailed)	.657

a. Grouping Variable: Gen

We observe that $Z = -0.444$ at a significance threshold $p > 0.05$. It follows that there are no significant differences between adolescents according to gender - the hypothesis is not confirmed.

Hypothesis 4: It is assumed that there is a negative correlation in terms of the development of maladaptive cognitive patterns in adolescents and self-esteem.

Table 4. Correlation between YSQ-S3 and USAQ

Correlations

		SchemeCognitiveYoung	USAQ
Spearman's rho	SchemeCognitiveYoung	Correlation Coefficient	1,000
		Sig. (2-tailed)	.000
		N	60
	USAQ	Correlation Coefficient	-.752**
		Sig. (2-tailed)	.000
		N	60

** . Correlation is significant at the 0.01 level (2-tailed).

According to Table 4, the significance threshold is $p < 0.05$ (0.000) and the correlation coefficient is $-.752$, so the correlation is significant.

In the following figure we graphically represented the correlation between the two variables using the point cloud.

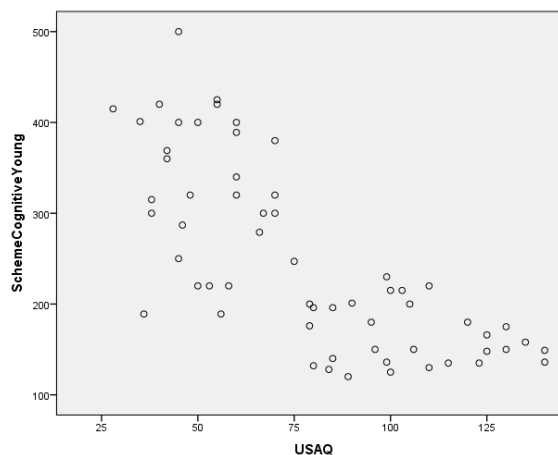


Figure 1. YSQ-S3 and USAQ point cloud

The point cloud is the graphical representation of the correlation between the two variables. The dots are oriented to the left, which shows a negative correlation between the two variables - the hypothesis is confirmed.

Conclusions

Research in developmental psychology highlights the self-patterns of young people as a possible way to improve the functioning of adolescents and promote positive developmental results.

As we have seen, studying the literature, adolescence is a crucial and critical period in the development of the individual, a period of transition between childhood and adulthood, and self-esteem plays a very important role in the development of the individual during this period.

The mental development of the adolescent is largely determined by the family. Love, trust, answers and competent advice are the fundamental "tool" of parents that help their children become autonomous and competent adults.

The research aimed to identify the relationship between maladaptive cognitive patterns and self-esteem in adolescents.

The current study tried to answer the question: Are there statistically significant differences in early maladaptive patterns and self-esteem among adolescents according to gender or family structure from which they come?

Identifying factors related to single-parent status and the basic differences between adolescents from single or bi-parental families can be a real help in creating appropriate conditions for education.

We aimed to investigate and identify the relationship between maladaptive cognitive patterns and self-esteem in adolescents. The aim was to highlight the differences between adolescents from bi-parental and single-parent families and also to follow the sex distribution of the adolescent population investigated.

The conclusions on the results of the current study will be guided by the initial research questions:

The family is a basic unit of society that has evolved with the changing needs and requirements of individuals and society.

The single-parent family is a kind of family in which either the father or the mother is absent due to various causes such as: divorce, marital separation or death. Single-parent status affects children mentally, emotionally and psychologically.

According to Young et al. (2003), maladaptive patterns are formed as a result of the interaction between children's emotional disposition and terrible events in childhood or adolescence. One of the most difficult life events for children was the separation or divorce of the parents, as well as the death of the father or mother.

The results of the statistical analysis, as well as the qualitative analysis of the answers indicated that adolescents from single-parent families scored higher on social isolation / alienation, failure, dependence / incompetence, compared to adolescents from bi-parental families.

Also, the results of this study indicate and confirm the existence of significant differences between adolescents, depending on the type of family they come from, in terms of self-esteem. Therefore, childhood events affect a person's self-esteem, so it is not surprising that a teenager who experiences the absence of parents also has a lower self-esteem.

However, very high self-esteem can have negative consequences leading to aggressive, anti-social behaviors. Also, a very high self-esteem makes people more vulnerable to criticism and more difficult to accept negative feedback. .

Extensive research has shown that low self-esteem increases the risk of developing depressive symptoms during adolescence. However, the mechanism underlying this association remains largely unknown, as well as how long adolescents with low self-esteem remain vulnerable to the development of depressive symptoms. A perspective on this mechanism can not only lead to a better theoretical understanding, but also provide indications for possible interventions.

Also, the analysis of the statistical answers of this paper confirms the existence of a negative correlation between maladaptive cognitive patterns and self-esteem. The lower the self-esteem, the higher the scores obtained in the measurement questionnaire.

No significant gender differences were identified in the development of maladaptive cognitive patterns in adolescents who participated in the current study.

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