

Explaining the Structural Model of Social Anxiety Based on Early Maladaptive Schemas and Family Performance

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Abstract

Background: The purpose of study was to determine the mediation role of early maladaptive schemas in the relationship between family performance and social anxiety features of students.

Materials and Methods: This study utilized a descriptive correlational design and statistical population of this study was included of all students of Marivan city, with the quantity of 4134 in 2016-2017, through them by an available sampling, 400 students were selected. Research tools were family assessment device by Epstein et al (1983), schema questionnaire- short form by Young (1990), social anxiety by Connor et al (2000).

Results: Results showed that early maladaptive schemas mediate the relationship between family performances and social anxiety features ($\beta=0.52$, $p=0.001$).

Conclusion: Since parental behaviors is one of the most important affecting factors on early maladaptive schemas and formulation of social anxiety features subsequently; Therefore it is necessary for the prevention and treatment of social anxiety disorder pay special attention to the parent's behaviors and early maladaptive schemas.

Keywords: Early maladaptive schemas, Family performance, Social anxiety features

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Introduction

Social anxiety disorder is the second most common type of anxiety disorder (Hallinger and Whitburne¹) is characterized by perceived fear or anxiety about one or more specific social situations. In these situations, the individual is concerned that will be carefully examined, evaluated or negatively evaluated, or treated as humiliating or humiliating². Social anxiety is due to the prediction or existence of evaluations in real or subjective social situations that are characterized by experience of tension, distress and fear in social situations. This disorder affects a variety of person's lives and challenges people with many problems in the field of work, education and social life^{3,4}. The interaction between children and their

parents causes their physical, emotional and cognitive development⁵. Parents and other child careers play an important role in shaping, expressing and regulating the child's emotional world⁶. Like any social system, the family has basic needs, among which one can point out that a sense of value, physical security, intimacy, affiliation, sense of responsibility, trust, need for confirmation of others, the need for joy and success, which includes a subset of the psychoanalytic needs, They are social⁷. Family and function is the first social institution that plays an important role in the psychological development of children⁸. Family function is based on a system-based system approach based on the structure, organization, and exchange patterns among its members, and the health of its various dimensions has led to the creation and

expansion of understanding and increasing intimacy among members, guaranteeing its stability and survival, as a system of provision⁹. The model of the Epstein family of families, Bishop and Levin 1978; 1983 relies on a systemic approach in which the structure, organization, and exchange patterns are examined. The basic principles of this model are: the relationship between parts and components of the family together, the incomprehensibility of a component separate from other components of the family, the important role of family structure and interactive patterns in determining the behavior of family members and that family function is something more than the sum of its components. The McMaster model describes the family function in three basic functions (including innate things such as providing food and shelter, charity, affection, etc.), tasks (including personal growth issues such as infancy, childhood, etc.). And family-related issues such as the first marriage, the first pregnancy, the birth of the first child) and risky events (including illness, accident, unemployment, etc.). According to this model, the important dimensions of family function are: problem solving, communication, roles, emotional response, emotional blend and behavior control^{9,10}. Emotional relationships and the way parents communicate with their children is an important factor for the development and learning of children and the formation of cognitive structures, including early maladaptive schemas¹¹. It has been suggested that early maladaptive schemas can also come from intrusive experiences¹². Parental performance affects the formation of thoughts, behaviors and emotions of children and should address the root of many psychiatric disorders in the primary education of the family¹². Early maladaptive schemas are emotional and cognitive self-harm patterns that are formed in the early stages of development and evolved in the mind and are repeated in the course of life. In the schematic model, eighteen schemas are divided into five delusive emotional needs, which are called "schema domains", which are cuts and exclusion, self-regulation and disrupted performance, disruptive constraints, and other forms of obstruction and inhibition¹³. In the study, Calwight, Urou et al¹⁴ showed that the domain of other maladaptive schemas is a predictor of the onset and

continuation of social anxiety. Callivit¹⁵ in a research study showed that the treatment schema and changes in early maladaptive schemas lead to improvement of emotional symptoms such as social anxiety in the victims. In Orou, Calwight and Padilla¹⁴, another schema was predictive of social anxiety symptoms with rumination mediation.

Contrary to numerous research evidence that confirms the relationship between family function and social anxiety, few studies have looked at potentially mediating variables in this regard. According to the above, it seems that early maladaptive schemas are potential intermediary cognitive factors in relation to family behaviors and family functioning and social anxiety and family performance can negatively predict social anxiety.

Since research on social anxiety, family performance and early maladaptive schemas can be considered, a model can be designed and early maladaptive schemas explain the relationship between family function and social anxiety symptoms. Therefore, determination of relationships between family function variables, early maladaptive schemas, social anxiety signs using structural equation modeling method, the purpose of this research and the following questions were tested.

1. Is the conceptual model of research, in which variables of family function and early maladaptive schemas in the form of a pattern of social anxiety patterns, are fitted with the collected data?
2. Do the initial maladaptive schemas predict the relationship between family function and social anxiety signs?

Methods

The research method was descriptive-correlational and the statistical population included all the students in Marivan city with 4134 students in the academic year of 2011-2012. Gadagnoli and Waalser (1998) suggest that in a research with a modeling and path analysis approach, a sample of 300 people or more is necessary, therefore, by sampling available to 400 students was selected. The criteria for entry of subjects to the research included the supervision of both parenthood in childhood and adolescence, and withdrawal criteria including taking medication, receiving parallel therapies and physical disabilities, and other chronic diseases.

Family Measurement Tool: The Epstein, Bishop and Levin family of instruments (1983) consists of 60 items that have 7 subscales of problem solving, communication, roles, emotional accompaniment, emotional interactions, behavior control, and overall performance in a 4-degree Likert spectrum of strongly agree=1, agree=2, opponent=3, strongly opposed=4. Epstein et al. (1983) used Cronbach's alpha coefficients for problem-solving subscales, relationships, roles, emotional accompaniment, emotional association, behavioral control, and overall performance, 0.74, 0.75, 0.77, 0.83, 0.78, 0.72 and 0.92, respectively. In Epstein et al. (1983), a family measurement tool was able to predict the symptoms of clinical patients as an indicator of instrumental validity.

Social phobia questionnaire: The social consciousness questionnaire, Conover, Davidson, Corchill, Sherwood, Fava et al. (2000) has three subscales. Fear with phrases Nos. 1, 3, 5, 10, 14, 15; avoiding phrases Nos. 4, 6, 8, 9, 11, 12, 16; physical by expressions 2, 7, 13, 17 in the Likert spectrum of in any case, very low=0, low=1 up to 2, very high=3, infinite=4. Hasanvand Amozadeh, Shoori and Bagheri (2010) referring to Hasanvand Amozadeh (2012) reported the Cronbach's alpha coefficient 0.74, 0.75 and 0.75 for the scales of fear, avoidance, and physical fitness and acceptable validity for this questionnaire. In this study, Cronbach's alpha coefficient for fear, avoidance, and physical subscales was 0.82, 0.83, and 0.74, respectively.

Short version of Young Schema Scale. The short version of the 75 questions of this scale was created by Yang (1998; quotes from Waller, Mayer and Hannian, 2001), which comprised 15 initial maladaptive schemas in the Likert spectrum on a 6-point scale perfectly true about me=6 to be completely wrong about me=1 evaluates. These schemas include the emotional deprivation of questions 1-5; the release/insecurity of questions 6 to 10; the distrust/misconduct of questions 11 to 15; social isolation/alienation of questions 16 to 20; the defect/shame of questions 21 to 25; the failure of the question 26 to 30; dependence/insecurity of questions 31 to 35; vulnerability to illness 36-40 questions; non-self-directed/questioned 41-45 questions; obedience to questions 46 to 50; question solicitation 51 to 55;

emotional restraint of questions 56-60; stubborn/over-critical criteria of questions 61 to 65; deserving/magnifying questions from questions 66 to 70; self-control/insufficient self-control questions 71 to 75. Scheme areas Raids include cuts and rejection, self-regulation and disrupted function, disrupted constraints, and other disorientation, and excessive restraint and inhibition (Yang et al., 2003; quoted by Hamidpour and Endouz, 2009). Waller et al. (2001) obtained Cronbach's alpha as an indicator of internal consistency for sub-scales above 0.80 and for the whole scale of 0.96, indicating that this questionnaire has a very distinctly different narrative. The standardization of this scale in Iran was carried out by Sadoughi, Agilar-Vafaei, Rasoul-zadeh Tabatabai and Isfahanian (2008), and its Cronbach's alpha was in the range of 90/0 to 62/0. In this study, the Cronbach's alpha coefficient for creep/exclusion subscales was 0.92, self-regulation/operation was 0.94, disruptive constraints were 0.84, 0.82 and 0.89, and hearing loss and inhibition 0.79.

Manner of execution: After went to schools, selected classes, and obtaining permission from teachers, students of each class completed the questionnaires internally within the classroom. In order to prevent possible bias in response to questionnaires and to strengthen the reliability of the collected results, the balancing method was used. By changing the order in which the questionnaires were presented, the field of balance maintenance in the validity of the responses to the questionnaire items Forms were provided. In this research, moral considerations including informed consent, privacy and privacy were observed.

Results

In this study, 200 female students and 200 male students participated and 46 of them were excluded. 211 of these were 10th grade (52.75%), 115 were 12th grade (28.75%) and 74 were undergraduate (18.5%).

In this study, a structural equation model was used. This pattern consists of two components, a structural pattern and a measurement pattern (Sarmad, Bazargan, and Hejazi, 2012). In this research, these patterns were performed by confirmatory factor analysis. In the study of assumptions, it is necessary to explain the

Table 1: Primary and Modified Measuring Patterns Fitness Indicators.

Fitness Indicators	Softened squares	mean error of approximation squares	Goodness of fit	GoF	CFI
Patterns	2.646	0.047	0.948	0.931	0.926

Table 2: Route coefficients.

Route	b	β	R ²
Schema - Social Anxiety	0.304	0.363	0.11
Family function - social anxiety	-0.287	-0.349	0.10
Family Performance - Scheme - Social Anxiety	0.51	0.52	0.26

Table 3: Summary of the results of repeated measure variance analysis. The study of the effect of treatments on the variance of craving.

Source of dispersion	sum of squares	Df	Main of squares	Analysis of variance	Sig
Dementia subscales, negative advancement in drug use, lack of control for substance use, craving for substances and groups	257698.62	2	1288.3144 9	13.549	0.000
Intergroup interaction	2.722	1	2.722	19.50972	0.000
Interaction between groups × time	32270.1624	2	1613.0815 2	11.649	0.000
Error	1.348.7746	75	1379.9487		

assumption that the conjecture assumption, which is one of the fundamental assumptions of the structural-equation model, was established among the data of the present study. The use of scatter matrix matrices showed that none of the relationships among the markers has a clear bias in linearity. One-variable and multivariate fluctuations were investigated. The use of Mahlonoby's separation method showed that the data of 46 subjects from all 400 subjects were multifactorial fluctuations.

Discussion

In various researches, for example, Sarithas of Atalara and Gencoz¹⁶, in their research, the schema of cutting and mediating rejection was found to be the relationship between the perception of mother abandonment in childhood and signs of anxiety in adulthood. Salome, Macquist, Anderson, and Stewart (2015) have shown that the controversial schemata area is predictive of an anxiety disorder. Therefore, different forms, family composition and structure may affect the development of children's personality in

different ways. The development of children is one of the dimensions of parental functioning and the most important part of this process is parents¹⁷. Family function patterns, the functional dimensions of the family, are reflected in parenting styles and related to parenting styles¹⁸. Schemes are cognitive and sustainable cognitive structures that interact with the individual's genetic predisposition and environmental factors, including individual relationships with parents and important individuals, and the result is the formation of a set of beliefs and beliefs about oneself. And others through which the conditions are evaluated and interpreted¹⁹. Individuals with abandoned schemas do not expect the security, stability, affection, empathy, emotion, acceptance, and respect to be met in a predictable way. In the area of self-regulation and performance schemes, the individual's perceptions of himself and the environment interfere with his perceived ability to separate, survive and perform independently, or successfully carry out tasks. The scope of the disadvantaged constraints schemas indicates a defect in internal constraints, a sense of responsibility towards others, or a long-term orientation

towards life. The focus of excessive echo and inhibition with extreme emphasis on rebounding the person's spontaneous emotions, impulses and choices, or fulfilling the inflexible and intangible rules and expectations of behavior and ethical behavior, often leads to Blending happiness, expressing opinions, relaxing, close relationships, and good health. Schemas of the other area of commonality are commonly found in families that have adopted the child on an ad hoc basis, and the child, in such circumstances, must ignore the important aspects of his personality in order to gain the attention, love and acceptance of others¹³. In fact, the environment of primary life and parenting methods are among the factors that play a role in the formation of schemas. On the one hand, the type of cognitive factors that are involved in the continuation of social anxiety disorder are schemas (Bacher, Minka and Holi, 2014; Seyed Mohammadi, 2015). Therefore, it can be concluded that in order to prevent the formation of early maladaptive schemas it is necessary to target families and the way parents interact, and prevent disorders such as social anxiety disorder.

Conclusion

The results of this study showed that the early maladaptive schemas mediator had a relationship between family function and social anxiety symptoms. In this study, early maladaptive schemas were associated with various types of psychological symptoms such as symptoms of anxiety disorders.

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