

Parental Authority and Early Maladaptive Schemas

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The relationship between Young's (1999) Early Maladaptive Schemas (EMSs) and Baumrind's (1971) parental authority prototypes (i.e., permissive, authoritarian, and authoritative) were investigated. As hypothesized, parental authoritarianism positively predicted the prevalence of EMSs, whereas authoritativeness was inversely related to EMS scores. Together, parental authoritarianism and authoritativeness explained 31.7% of the variance in the Total EMS scores.

For over a century, psychologists have argued that numerous parental behaviors have wide-ranging and significant implications for the thoughts, behaviors, and emotions of children and adolescents (Maccoby, 1992, 2007). Within this context, Piaget (1954) and Bowlby (1980)

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were instrumental in positing that parental practices play a unique role in the early development of internal working models of reality (i.e., schemas). Since these seminal assertions, it has repeatedly been argued that these schemas then become the basis for the later interpretations of reality, serving as an organizational framework from which people select, organize, interpret, evaluate, and explain their life experiences (e.g., Barlow, 2014; Beck & Beck, 2011; Beck, Davis, & Freeman, 2014; Beck & Rush, 1987; Persons, 1989).

Investigations by Young and his associates (Young, 1999; Young, Klosko, & Weishaar, 2003) have revealed that many schemas originating in childhood tend to persist into adolescence and adulthood. While some of these schemas provide a constructive framework for the interpretation of one's experiences, others provide less healthy cognitive knowledge structures through which an individual may make sense of his or her reality. With respect to the latter, Young (1999) has proposed that there are 18 unhealthy childhood schemas, which he has termed Early Maladaptive Schemas (EMSs).

These EMSs provide a broad and pervasive set of cognitive perceptions through which individuals frequently derive maladaptive interpretations of their life experiences. Furthermore, once activated, people frequently respond in ways that perpetuate these schemas, which makes them highly stable over time (Riso et al., 2006). Research has revealed that these EMSs are associated with a wide range of negative psycho-social outcomes—for example, depression (Calvete, Orue, & Hankin, 2013b; Lumley & Harkness, 2007), eating disorders (Cooper, Rose, & Turner, 2006; Unoka, Tolgyes, Czobor, & Simon, 2010), anxiety (Camara & Calvete, 2012; Delattre, Servant, Rusinek, Loreet, Parquet, Goudemand, & Hautekeete, 2004), bipolar disorder

(Hawke & Provencher, 2012; Newman, Leahy, Beck, Reilly-Harrington, & Gyulai, 2002), schizophrenia (Bortolon, Capdevielle, Boulenger, Gely-Nargeot, & Raffard, 2013), and social avoidance behavior (Calvete, Orue, & Hankin, 2013a; Pinto-Gouveia, Castilho, Galhardo, & Cunha, 2006).

Young et al. (2003) have posited that EMSs begin to form at a young age, and that unhealthy interactions within the family of origin (and especially with one's parents) are central to their development. In the present study, the relationship of EMSs to one particular domain of parental behavior—parental authority—has been investigated.

Baumrind (1971) posited a model of three parental authority prototypes (i.e., permissive, authoritarian, and authoritative). Within this model, permissive parents have been described as making relatively few demands on their children, allowing them to make their own decisions and to regulate their own activities as much as possible. Thus, permissive parents tend to be relatively non-controlling, non-demanding, and non-punitive. Authoritarian parents, on the other hand, tend to be highly directive with their children, often expecting unquestioning obedience. As a result, authoritarian parents tend to restrict the autonomy of their children, generally discouraging verbal give-and-take, and instead, favoring punitive measures (when necessary) to control their children's behavior. Authoritative parents, however, tend to fall somewhere between these extremes. Their authority is characterized by clear limits and, at times, firm direction for their children, but this disciplinary clarity is moderated by nurturance, flexibility, and verbal give-and-take. Thus, authoritative parents tend to be directive, but also warm, as they exercise their authority within the home.

Numerous studies have revealed that authoritarian parenting is associated with a variety of unhealthy developmental outcomes, whereas authoritative parenting has been associated with more adaptive psycho-social outcomes. For example, those who grow up with authoritarian parents tend to be less independent, less self-reliant, and less socially responsible than those raised by authoritative parents (Baumrind, 1971, 1991). Similarly, authoritarian parenting is associated with low self-esteem, whereas authoritative parenting is associated with high self-esteem (Buri, Louiselle, Misukanis, & Mueller, 1988). Furthermore, compared to those reared in authoritarian homes, children with authoritative parents demonstrate fewer behavioral and emotional problems (McKinney & Renk, 2008; Paulussen-Hoogeboom, Stams, Mermanns, Peetsma, & Wittenboer, 2008), they are more apt to have an internal locus of control (e.g., McClun & Merrell, 1998), they perform better in school (Dornbusch, Ritter, Liederman, Roberts, & Fraleigh, 1987), they exhibit a greater sense of personal competence (Lamborn, Mounts, Steinberg, & Dornbusch, 1991), and they tend to demonstrate a greater level of maturity overall (Steinberg, Elmen, & Mounts, 1989).

In the present study, university students were asked to complete Young's (1999) EMS questionnaire. The parental authority prototypes of each participant's mother and father were also assessed. Since negative psycho-social outcomes have been found to be associated with both high levels of EMSs and authoritarian parenting, and since more adaptive psycho-social outcomes are associated with both low levels of EMSs and authoritative parenting, the following hypotheses have been proposed.

Hypothesis 1: The greater the authoritarian parenting, the greater the prevalence of the EMSs.

Hypothesis 2: The greater the authoritative parenting, the less the prevalence of the EMSs.

Method

Participants

A total of 118 university students (77 women, 41 men) participated in this study. All participants were recruited from general psychology courses in partial fulfillment of a research requirement for the course.

Material and Procedure

All participants were provided a consent form in which they were advised that all data collected in the study would be confidential and that they were free to withdraw from participation at any time. All testing took place in a large-group classroom setting. All participants were asked to complete the following questionnaires.

Parental Authority. Buri's (1991) Parental Authority Questionnaire (PAQ) was used to measure the permissiveness (PER), authoritarianism (TAR), and authoritative (TAT) exercised in the home. There are 10 items in the PAQ to measure each of the three parental authority prototypes. A sample item from each of these prototypes (from the mother's version of the PAQ) follows: "As I was growing up, my mother allowed me to decide most things for myself without a lot of direction from her" (PER), "As I was growing up, my mother let me know what behaviors she expected of me, and if I didn't meet those expectations, she punished me" (TAR), and "As the children in my family were growing up, my mother consistently gave us direction and guidance in rational and objective ways" (TAT). Participants were asked to

respond to each of the 30 statements in the PAQ on a 5-pt. scale ranging from 1 (*strongly disagree*) to 5 (*strongly agree*). Participants completed two versions of the PAQ, one evaluating the parental authority of their mother, and the other evaluating the parenting style of their father.

Early Maladaptive Schemas (EMSs). Young’s (1999) EMS questionnaire (YSQ-L3) was used to measure the prevalence of the early maladaptive schemas for each participant. This questionnaire consists of 232 items to which participants responded on a scale from 1 (*completely untrue of me*) to 6 (*describes me perfectly*). Responses to these 232 items were used to measure the prevalence of each of 18 EMSs. The scores on these 18 EMSs were then used to derive scores for each participant for each of the following five EMS core domains: (a) Disconnection and Rejection, (b) Impaired Autonomy and Performance, (c) Impaired Limits, (d) Other Directedness, and (e) Overvigilance and Inhibition. Descriptions of each of the 18 EMSs (and the five schema domains) have been presented in Table 1.

Table 1

Summary of Young’s Early Maladaptive Schemas (Young et al., 2003)

<u>Schema</u>	<u>Description</u>
ED = Emotional Deprivation	Expectation that one’s desire for emotional support will not be adequately met
AB = Abandonment	Perceived instability or unreliability of those available for support
MA = Mistrust	Expectation that others will hurt, abuse, humiliate, cheat, lie, or manipulate
SI = Social Isolation	Feeling that one is isolated from others, different from others, or not belonging
DS = Defectiveness	Feeling that one is defective, bad, unwanted, inferior, or invalid
Disconnection and Rejection Domain = ED + AB + MA + SI + DS	
FA = Failure to Achieve	Belief that one has failed, will inevitably fail, or is fundamentally inadequate
DI = Dependence	Belief that one is unable to handle everyday responsibilities competently

VU = Vulnerability to Harm	Exaggerated fear that catastrophe will occur that one cannot prevent
EU = Enmeshment	Excessive emotional involvement / closeness with significant others
Impaired Autonomy and Performance Domain = FA + DI + VU + EU	
ET = Entitlement	Belief that one is superior to other people and entitled to special privileges
IS = Insufficient Self-Control	Pervasive difficulty or refusal to exercise self-control; low frustration tolerance
Impaired Limits Domain = ET + IS	
SB = Subjugation	Excessive surrendering of control to others because one feels coerced
SS = Self-Sacrifice	Excessive focus on voluntarily meeting the needs of others
AS = Approval Seeking	Excessive emphasis on gaining approval, recognition, or attention from others
Other Directedness Domain = SB + SS + AS	
EI = Emotional Inhibition	Excessive inhibition of spontaneous action, feeling, or communication
US = Unrelenting Standards	Belief that one must meet very high internalized standards for performance
NP = Negativity / Pessimism	Pervasive focus on the negative aspects of life while minimizing the positive
PU = Punitiveness	Belief that people should be harshly punished for their mistakes
Overvigilance and Inhibition Domain = EI + US + NP + PU	

Results

The bivariate correlations between each parental authority prototype and the EMSs was determined. As predicted, the majority of the authoritarianism scores of both the mother and the father were inversely related to the prevalence of the EMSs. Similarly, as predicted, in the majority of cases the authoritativeness of both the mother and the father was directly related to the EMS scores. None of the EMS measures were significantly related to permissiveness. These bivariate correlations have been presented in Table 2. [Please note: Given the large number of bivariate correlations computed in the present study, the significance level was set at .01 in an effort to decrease the probability of a Type I error.]

In an effort to determine the proportion of the variance in the EMSs explained by the parental authority prototypes, hierarchical regression analyses were completed. These R^2 values have been included in Table 2. In each case, these R^2 values were derived by regressing the EMS on all of the statistically significant parental authority prototypes. As can be seen from these R^2 values, the proportion of the variance explained by parental authority was greatest for the Disconnection and Rejection core domain (39.2%), and it was least for the Other Directedness core domain (10.7%). Furthermore, the values in Table 2 reveal that for the Total EMS scores, $R^2 = 31.7\%$.

Table 2

Bivariate Correlations of EMSs with Each Parental Authority Prototype (DVs) and Proportion of Variance in EMSs Explained by These DVs

	<u>PER-M</u>	<u>TAR-M</u>	<u>TAT-M</u>	<u>PER-F</u>	<u>TAR-F</u>	<u>TAT-F</u>	<u>R²</u>
TOTAL EMS	.068	.297***	-.320***	-.097	.384*****	-.488*****	31.7%
Emotional Deprivation	.089	.253**	-.512*****	-.071	.314***	-.632*****	47.4%
Abandonment	.036	.249**	-.351***	-.102	.317***	-.539***	33.3%
Mistrust	.101	.219**	-.278**	.121	.352***	-.477*****	27.1%
Social Isolation	.033	.253**	-.265**	.001	.272**	-.443*****	24.0%
Defectiveness	.051	.259**	-.369**	-.053	.293***	-.539*****	33.7%
DISCONNECTION & REJECTION	.071	.271**	-.387*****	-.083	.347***	-.583*****	39.2%
Failure To Achieve	.026	.265**	-.259**	-.003	.261**	-.413*****	22.1%

Dependence	-.071	.327**	-.229**	-.083	.298***	-.379*****	22.9%
Vulnerability To Harm	.059	.176	-.222**	-.027	.217**	-.253**	10.3%
Emmeshment	.060	.157	-.150	-.082	.271**	-.306***	12.4%
IMPAIRED							
AUTONOMY	.023	.291***	-.274**	-.056	.324***	.425*****	24.9%
Entitlement	.099	.150	-.115	-.073	.194	-.201*	6.3%
Insufficient Self-Control	.004	.255**	-.303***	-.086	.234**	-.356***	18.5%
IMPAIRED LIMITS	.044	.233**	-.236**	-.103	.238**	-.309***	14.2%
Subjugation	.016	.186	-.250**	-.027	.218**	-.301***	12.7%
Self-Sacrifice	.141	.119	-.096	-.032	.239**	-.221**	7.5%
Approval Seeking	-.031	.208	-.113	.094	.131	-.166	6.4%
OTHER							
DIRECTEDNESS	.056	.213**	-.169	.012	.247**	-.268**	10.7%
Emotional Inhibition	.086	.214**	-.392***	-.139	.282***	-.442*****	26.4%
Unrelenting Standards	.102	.141	.066	-.070	.361***	-.141	13.1%
Negativity/Pessimism	.021	.255**	-.303***	-.127	.340***	-.384*****	22.7%
Punitiveness	.047	.272**	-.223**	-.190	.403*****	-.273**	21.1%
OVERVIGILANCE							
& INHIBITION	.063	.236**	-.153	-.171	.371***	-.260**	16.6%

** $p < .01$ *** $p < .001$ ***** $p < .0001$

PER-M = Mother's Permissiveness; TAR-M = Mother's Authoritarianism; TAT-M = Mother's Authoritativeness; PER-F = Father's Permissiveness; TAR-F = Father's Authoritarianism; TAT-F = Father's Authoritativeness

For the purposes of further analyses of the data in the present study, each parent's authority was designated as permissive, authoritarian, or authoritative. To do this, each parent's PER, TAR, and TAT raw scores were converted to z -scores. These standard scores were then used to categorize each parent as employing predominantly a permissive, an authoritarian, or an authoritative style of authority. Using the criterion of at least a 5% difference under the normal curve, only in eight cases did this raw score conversion to z -scores fail to clearly differentiate a parent's authority style. These eight cases were dropped from the present analyses.

Thus for each participant there were two parental authority prototypes determined, one for the mother and one for the father. Since the previous analyses (i.e., bivariate correlations and multiple regressions) suggested that the effects of parental authority on the prevalence of EMSs were not differentially impacted by whether the authority prototypes were practiced by the mother or the father, for the present analyses we disregarded whether a particular style of authority had been exercised specifically by the mother or the father. In other words, for the present analyses, two prototypes—one for the mother and one for the father (irrespective of which parent actually employed them)—were assigned to each participant.

Using the Total EMS scores, the participants were then divided into a high EMS group and a low EMS group, as determined by the upper forty percent and lower forty percent of the distribution, respectively. The frequency with which each possible pair of authority prototypes was associated with the high EMS and low EMS groups has been presented in Table 3.

Table 3

Frequency of Parental Permissiveness, Authoritarianism, and Authoritativeness Among High EMS and Low EMS Participants

	<i>Combination of Parental Authority Prototypes</i>					
	(irrespective of which parent employed each prototype)					
	PER/PER	TAR/TAR	TAT/TAT	PER/TAR	PER/TAT	TAR/TAT
High EMS	8	10	4	12	2	7
Low EMS	5	4	15	3	10	7

PER = Permissiveness; TAR = Authoritarianism; TAT = Authoritativeness

Statistical analyses of these data yielded a $X^2 = 20.35$ ($p < .0005$). As can be seen in Table 3, high EMS scores were found among the following combinations: (a) both parents TAR and (b) one parent TAR / one parent PER. Low EMSs were found among these combinations: (a) both parents TAT and (b) one parent TAT / one parent PER.

Discussion

Young et al. (2003) stated that “toxic childhood experiences are the primary origin of Early Maladaptive Schemas. The schemas that develop earliest and are the strongest typically originate in the nuclear family” (p. 10). Furthermore, they have suggested that parents’ interactions with their children are often central to the development of these maladaptive schemas. Yet to date, there has been little empirical evidence as to which aspects of parents’ interactions with their children may be especially instrumental in the early development of these unhealthy cognitive knowledge structures.

In the present study, evidence has clearly implicated parental authority in the origins of EMSs. For example, multiple regression analyses revealed that parental authoritarianism and authoritative-ness explained 37% of the variance in the Total EMS scores. Furthermore, for some of the individual EMSs (i.e., Emotional Deprivation), as much as 47% of the variance was explained by these parental authority variables.

Authoritarian parenting is characterized by a pattern of autocratic, controlling, and punitive interactions of parents with their children. In such a family milieu, a child is provided limited opportunities for the experience of his or her personal importance, value, and self-efficacy. On the other hand, authoritative parenting, with its clear channels of communication and ongoing opportunities for give-and-take, tends to create a family environment in which each child's individuality and sense of personal contribution and personal control can be recognized and encouraged. In light of these characterizations, it is interesting to note that in the present study, the parental variables of authoritarianism and authoritative-ness best predicted the variance in the EMS domains of Disconnection and Rejection (39.2%) and Impaired Autonomy (24.9%). In contrast, these parental authority variables explained less of the variance in the domains of Overvigilance and Inhibition (16.6%), Impaired Limits (14.2%), and Other Directedness (10.7%).

There is one other interesting set of findings that emerged from the present study. When analyzing directly the role of permissive parenting in the development of EMSs (i.e., via bivariate correlations), there were no instances in which parental permissiveness was significantly related to the prevalence of individual EMSs. This might suggest that

permissiveness neither facilitates nor impedes the development of EMSs. However, the chi-square analyses revealed a potentially different pattern.

As one might expect from the regression analyses, when both parents were judged to be authoritarian (for the chi-square analyses), many more participants scored high in EMSs; furthermore, when both parents were authoritative, there were more participants low in EMSs. However, when one parent was authoritarian and the other was permissive, then there were many more participants who scored high in EMSs. Similarly, when one parent was authoritative and the other was permissive, more participants were low in the prevalence of EMSs.

These findings suggest that parental permissiveness may play a significant role in the development of EMSs; however, its role may not be a direct one. In other words, in the present study, permissiveness was not significantly correlated with any of the EMS measures. However, when a permissive parent was paired up with either an authoritarian parent or an authoritative parent, then a clear pattern emerged in the data—i.e., a prevalence of high EMSs when the other parent was authoritarian, and a prevalence of low EMSs when the other parent was authoritative. These findings suggest that permissiveness may provide a family environment in which a more assertive parental prototype (i.e., authoritarianism or authoritativeness) may be allowed to exert its influence. This is an intriguing possibility that may provide a fruitful path for future investigation.

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