



Emotional abuse as a predictor of early maladaptive schemas in adolescents: Contributions to the development of depressive and social anxiety symptoms[☆]



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ABSTRACT

The schema therapy model posits that maltreatment generates early maladaptive schemas (EMSs) that lead to the development of emotional disorders throughout the life span. The model also stipulates that temperament moderates the influence of maltreatment on EMSs. This study examines (a) whether emotional abuse perpetrated by parents and peers, both alone and interactively with temperament, predicts the worsening of EMSs; and (b) whether EMSs in turn predict an increase in depressive and social anxiety symptoms in adolescents. A total of 1,052 adolescents ($M_{age} = 13.43$; $SD = 1.29$) were assessed at three time points, each of which was separated by 6 months. The subjects completed measures of emotional abuse by parents and peers, neuroticism, extraversion, EMSs, depressive symptoms, and social anxiety. The findings indicate that emotional bullying victimization and neuroticism predict a worsening of all schema domains over time. Contrary to expectations, there was no significant interaction between temperament dimensions and emotional abuse. The results confirmed the mediational hypothesis that changes in EMSs mediated the predictive association between bullying victimization and emotional symptoms. This study provides partial support for the schema therapy model by demonstrating the role of emotional abuse and temperament in the genesis of EMSs.

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Introduction

Childhood maltreatment is a strong predictor of psychological disorders, such as depression and anxiety, during adolescence and throughout the life span (e.g., Alloy, Abramson, Smith, Gibb, & Neeren, 2006; Cicchetti & Valentino, 2006; Hankin, 2005; Harkness, Bruce, & Lumley, 2006; Kim & Cicchetti, 2010; Simon et al., 2009). Specifically, emotional abuse seems to be particularly relevant for the development of depression (Gibb, Butler, & Beck, 2003; Gibb, Chelminski, & Zimmerman, 2007) and social anxiety (Bruce, Heimberg, Blanco, Schneier, & Liebowitz, 2012; Simon et al., 2009). In addition to maltreatment perpetrated by parents, abuse perpetrated by peers has also been identified as a risk factor for the development of depression and social anxiety (e.g., Cole et al., 2013; Reijntjes, Kamphuis, Prinzie, & Telch, 2010).

Cognitive theories posit that the impact of childhood maltreatment on subsequent psychopathology may be mediated by cognitive vulnerabilities, which include negative inference styles and dysfunctional schemas (Gibb, Abramson, & Alloy, 2004; Hankin, 2005). As support for this assumption, diverse models hold that maltreatment experiences contribute to the development of cognitive vulnerabilities (Ingram, 2003). The influence of maltreatment on cognitive vulnerabilities would

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be particularly strong when early experiences interact with specific temperament dimensions, an aspect that has received scant attention so far. The present study expands these ideas to the concept of early maladaptive schemas (EMSs), a central construct of schema therapy (Young, Klosko, & Weishaar, 2003), and explores the role of emotional abuse, both alone and in interaction with temperament, in the development of EMSs and depression and social anxiety symptoms in adolescents.

The schema therapy model

Schema therapy is an integrative model of therapy developed by Young and colleagues (Young, 1999; Young et al., 2003) that has been applied to several psychological problems, including depression and anxiety (e.g., Hinrichsen, Waller, & Emanuelli, 2004; Rijkeboer, van den Bergh, & van den Bout, 2005). EMSs constitute the key construct within this model. EMSs are defined as broad, dysfunctional, and pervasive patterns consisting of memories, emotions, cognitions, and bodily sensations about oneself and relationships with others (Young et al., 2003). EMSs are hypothesized to originate early in childhood and to be elaborated on throughout one's lifetime under the influence of experiences and temperament.

The schema theory proposes the existence of 18 schemas grouped into five broad categories of unmet emotional needs or schema domains. Recent studies conducted with adolescents indicate that three of these schema domains (disconnection/rejection, impaired autonomy and performance, and other-directedness) predict depressive and social anxiety symptoms (Calvete, Orue, & Hankin, 2013a, 2013b). The disconnection/rejection domain includes schemas such as abuse and defectiveness, which involve the expectation that one's needs for acceptance and respect will not be predictably fulfilled. The domain of impaired autonomy consists of expectations about oneself and the environment that interfere with one's perceived capacity to function independently or perform successfully. It includes the failure schema, which describes the belief that one has failed, will inevitably fail, or is fundamentally inadequate relative to one's peers in areas of achievement. Finally, the schemas within the domain of other-directedness consist of an extreme focus on others' desires at the expense of one's own needs (e.g., the need for acceptance and subjugation). The disconnection/rejection and the impaired autonomy and performance domains predict the increase of depressive symptoms (Calvete et al., 2013a), whereas the disconnection/rejection and other-focused domains are predictive of increases in social anxiety (Calvete et al., 2013b).

The role of maltreatment in the development of EMSs

Young et al. (2003) theorized that EMSs originate as the result of the interaction between early experiences and the child's temperament. In particular, those experiences that prevent the child from satisfying emotional needs would play a central role in the development of EMSs. According to their model, a relevant experience that can contribute to the development of EMSs is victimization. The child who is harmed or victimized within the family can develop schemas such as abuse, defectiveness, or vulnerability to harm.

Several cross-sectional studies have found significant associations between maltreatment perpetrated by parents and EMSs (Calvete & Orue, 2013; Carr & Francis, 2010; McCarthy & Lumley, 2012; Muris, 2006; Thimm, 2010a; Wright, Crawford, & Del Castillo, 2009). Overall these studies indicate that experiences of emotional maltreatment and neglect are mainly associated with schemas within the disconnection/rejection and impaired autonomy domains. Nevertheless, the vast majority of these studies were conducted with adult samples (for exceptions see Calvete & Orue, 2013; Muris, 2006), and the participants were asked to retrospectively report early experiences of maltreatment and dysfunctional parenting. This adult focus and retrospective reporting limits the validity of the results because current emotional states and schemas could have biased memories of past maltreatment events. In contrast with the lack of prospective evidence for the link between parental maltreatment and EMSs, a few longitudinal studies have shown how parental emotional abuse predicts other cognitive vulnerabilities, such as inferential styles (Gibb & Abela, 2008; Padilla & Calvete, *in press*) and ruminative responses (Padilla & Calvete, *in press*).

Although EMSs are hypothesized to originate early in childhood, Young's model posits that they are further elaborated on throughout one's lifetime under the influence of new experiences (Young et al., 2003). Thus, in addition to family, other influences, such as peers and school, become increasingly important as the child matures and may contribute to the construction of schemas. This continuous process of construction of schemas is supported by the scarce studies on EMSs in childhood, which suggest that schemas are present in children (Stallard & Rayner, 2005) but are still moderately stable (Rijkeboer & de Boo, 2010; Stallard, 2007). This is also supported by findings that indicate that other cognitive vulnerabilities are still under construction in youth (Cole et al., 2008; LaGrange et al., 2008). For instance, the nature of attributional style changes qualitatively over the course of middle childhood and early adolescence, and such cognitions do not begin to show stylelike characteristics until early adolescence (Cole et al., 2008).

In adolescence, peer relationships become a primary source of intimacy, self-disclosure, and nurturance (McCarthy & Lumley, 2012). Therefore, experiences of victimization by peers can also contribute to the construction of dysfunctional schemas of oneself and of social relationships. In accordance with the increased role of peer relationships, a number of studies have found that victims of bullying experience profound changes in their cognitions as a consequence of victimization. For instance, a few studies have obtained support for the hypothesis that bullying victimization predicts other cognitive vulnerabilities, such as negative inference style (e.g., Gibb & Abela, 2008; Gibb, Stone, & Crossett, 2012; Mezulis, Hyde, & Abramson, 2006) and hopelessness (Hamilton et al., 2013). In contrast, research on bullying victimization's impact on EMSs is scarce and is limited to cross-sectional studies. For example, McCarthy and Lumley (2012) explored the roles of

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