

Research Paper

Comparing Early Maladaptive Schemas with Theory of Mind Among Single Girls and Married Women Over 35 Years Old

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ABSTRACT

This research compares the early maladaptive schemas with theory of mind among single girls and married women over 35 years old. Its statistical population includes all unmarried girls and married women over 35 years old in Tabriz. The sample size is 93 married women and 88 unmarried girls over 35 years old. Method was a non-random sampling at convenience. The two groups were matched in terms of the control variables of age, economic status, and job status. The research was descriptive and causal comparative. It used the Young Schema Questionnaire to collect the information and the eyes test to evaluate the general theory of mind. Baron Cohen et al. were used to testing the research hypotheses. It used the independent t-test because of the non-establishment of the assumption of homogeneity of the variance-covariance matrix. Statistical analysis was done with SPSS software version 22. The results showed that schemas of deprivation, emotional and social isolation, defect of dependency/incompetence and entrapment schema, among the components of the early maladaptive schemas, were significantly in unmarried girls more than married women of the same age. There is no significant difference between married women and unmarried girls over 35 years old in the schemas of rejection, abandonment, mistrust, misbehavior, failure, vulnerability to harm or disease, obedience, sacrifice, emotional inhibition, inflexible criteria, entitlement, self-control, and theory of mind.

Keywords: *Early Maladaptive Schemas, Theory of Mind, Unmarried Girls, Age of Marriage*

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Marriage, a fundamental aspect of human life throughout history, has been studied by various scientific fields in addition to religion, including sociology, law, economics, psychology, and philosophy. This emphasis on family, a cornerstone of society, suggests that changes in family structures occur alongside societal transformations. The trend of later marriage and the rise of lifelong singlehood, particularly among women, are some developments impacting the societal level (Wasserman, 2020). This trend of later marriage isn't unique to Iran; it's observed even in developed post-industrial countries like the United States, with studies showing an increase in marriage age since the mid-1960s. (Loughran & Zissimopoulos, 2004).

Modernization, with its rapid social and economic transformations, has significantly impacted when people choose to marry and start families. This trend is driven by several factors, including the decline of extended families, the shift from agricultural to commercial and industrial economies, a more complex job market, increased access to education, and greater participation of women in the workforce (Fasihullisan, 2019). The collapse of extended family systems, the replacement of the traditional agricultural economy with the commercial and industrial economy, the more complicated division of labor, the social expansion of universal education, and the greater participation of women in economic and social activities are the factors that contribute to the delay in the marriage of girls. (Mahmoudian, 2013). While social cognition plays a role in navigating relationships, it's unlikely to be a primary factor delaying girls' marriage. Factors like increased educational opportunities and participation in social and economic spheres might be more relevant (Sigelman, 1999). Researchers have considered several constructs of social cognition, including the important concept of theory of mind. Theory of mind refers to the ability to understand that others have their own thoughts, feelings, and motivations that may be different from our own. This ability is crucial for navigating complex social situations, including making decisions about marriage (Hamilton & Slow, 2007). Individuals like to understand others' beliefs because they can predict, explain and adjust their behavior (Pellicano et al., 2006).

Mature girls may differ in some personality components, including early maladaptive schemas (EMS). These are enduring emotional and cognitive patterns formed in early childhood that can negatively impact how they view themselves and interact with the world (Young et al., 2003). Young believes that some of these schemas, especially those that are mainly formed based on unfortunate childhood experiences, may be the core of personality disorders, milder behavioral problems, and many chronic disorders. Young introduces eighteen maladaptive schemas as five schema areas. They are rejection, abandonment, instability, mistrust, misbehavior, emotional deprivation, defect of shame, social isolation, alienation, autonomy and dysfunctional functioning (dependency, incompetence, vulnerability to harm, disease, self-transformation, failure), impaired limitations, magnanimity entitlement, insufficient self-control and self-discipline, orientation to the other (obedience, self-sacrifice, acceptance, seeking attention, extreme watchfulness and inhibitions, negativity / pessimism, emotional inhibition, stubborn standards, and extreme fault-finding.

Punishing schemas exist because of not satisfying the basic emotional needs of childhood. Patients in early life create incompatible responses and coping styles in order to adapt to the schema, so that they don't have to experience intense and desperate emotions. This usually leads to the continuation of schemas (Young et al., 2003). The study of early maladaptive

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schemas and theory of mind can be relevant as a factor in the marriage of girls. Thus, the present research considers the increasing age of marriage and the large number of girls who have reached puberty in our society, as well as the lack of similar researches, and answers the question whether early maladaptive schemas and theory of mind among unmarried girls over 35 years of age and married women of the same age are different.

LITERATURE REVIEW

Theory of Mind (ToM) is a cornerstone concept in cognitive psychology and developmental neuroscience. It refers to an individual's ability to attribute mental states, such as beliefs, intentions, desires, emotions, and knowledge, to both themselves and others (Gweon & Saxe, 2013). The importance of ToM in navigating social situations is manifold. Firstly, it enables individuals to predict and interpret the behavior of others by inferring their mental states. This ability to predict mental states is essential for effective communication. By understanding the perceived thoughts and emotions of conversation partners, individuals can adjust their verbal and non-verbal responses accordingly, fostering smoother interactions (Babu & Panda, 2012). ToM is vital for forming and maintaining relationships. It underpins the ability to build trust and cooperation. Interpreting and responding appropriately to others' mental states is key to developing strong relational bonds. People with a well-developed ToM are often better equipped to navigate the complexities of social hierarchies and networks. They can understand social cues, adhere to group norms, all of which are important for social acceptance and inclusion (Rotila, 2016). The link between ToM and successful relationships, including marriage, has been extensively explored in psychological research. This research emphasizes how cognitive empathy, facilitated by ToM, contributes to positive interpersonal dynamics. ToM, especially the ability to understand a partner's perspective, is crucial for effective communication and empathy within relationships. This allows couples to navigate disagreements more constructively, build stronger emotional bonds, and ultimately contribute to a more fulfilling marriage (Dodell-Feder et al., 2016). Higher levels of empathic accuracy, where one partner can accurately infer the feelings and thoughts of the other, correlate with better conflict resolution and greater overall relationship satisfaction. This is because accurate empathy allows couples to address the root causes of conflict and build stronger emotional connections (Sened et al., 2017).

Effective communication is fundamentally tied to ToM, as it relies on the ability to understand the partner's thoughts and intentions and to convey one's own thoughts and intentions clearly. This was particularly evident in how partners with strong ToM skills would predict and interpret each other's responses during discussions. For instance, imagine a couple discussing finances. One partner might express frustration about overspending (Honan et al., 2015). With strong ToM, the other partner can understand that the frustration likely stems from a desire for financial security, not personal blame. This understanding allows for a more empathetic and productive conversation focused on solutions (Laurent et al., 2016). ToM enriches romantic relationships by enhancing the understanding of a partner's desires, fostering empathic connections, and improving communication. These aspects are not isolated but work in synergy, each reinforcing the other to build a stronger, more resilient partnership (Cristofaro et al., 2022). EMS are pervasive and enduring patterns in thinking and feeling that typically develop during childhood and are elaborated throughout an individual's life. These schemas are dysfunctional to a significant degree and are generally associated with maladaptive outcomes, influencing the way individuals perceive themselves, others, and the world. The concept was first introduced by psychologist Jeffrey Young, who identified EMS as central to understanding various chronic

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psychological disorders, particularly within the framework of Schema Therapy (Renner et al., 2012). EMS arise from unmet emotional needs in childhood. These needs can go unmet due to experiences such as neglect, abuse, excessive criticism, or lack of proper nurturing from parents or caregivers. These negative experiences can lead children to develop distorted beliefs and patterns of thinking about their self-worth, capabilities, and what to expect from others (Bach et al., 2018). These schemas are self-sustaining and can lead to a cyclical pattern of maladaptive behavior and thinking. For example, someone with a 'Mistrust/Abuse' schema, which arises from experiences of betrayal or abuse, might approach relationships with suspicion and hostility, which in turn may provoke reactions from others that seemingly confirm the person's fears, thus reinforcing the schema (Faustino & Fonseca, 2023).

Understanding EMS and their impact on social cognition is critical for effective therapeutic interventions. Through this process, psychologists can help individuals identify and address these schemas, ultimately aiming to reframe their perceptions, develop healthier patterns of thinking and relating to others, and enhance their overall psychological resilience and interpersonal effectiveness (Javed & Charles, 2018). These schemas influence the way individuals interpret and react to social cues, for instance, someone with a "Defectiveness/Shame" schema might become overly sensitive to criticism, perceiving even constructive feedback as a personal attack. This can lead them to withdraw from social interactions or become defensive, hindering communication and fostering feelings of isolation (Bishop et al., 2021). Early Maladaptive Schemas (EMS) can distort the perception of social interactions. Individuals with EMS, such as those with a "Defectiveness/Shame" schema, may misinterpret friendly overtures as patronizing or insincere. These misinterpretations can lead individuals to withdraw from social interactions, ultimately limiting their social network and exacerbating feelings of loneliness and isolation (Kim et al., 2014). Early Maladaptive Schemas (EMS) can lead to poor decision-making in relationships by causing individuals to misinterpret their partners' actions and intentions. For instance, someone with an "Abandonment/Instability" schema might misinterpret a partner's need for space as a sign of withdrawal or impending rejection. This misinterpretation can lead them to cling to the partner or act out in controlling ways, ultimately damaging trust and stability in the relationship (Nicol et al., 2021). Studies underscore how EMS can create a vicious cycle within relationships. Individuals with EMS may misinterpret their partner's actions, and partners may misinterpret the behaviors caused by these misinterpretations. This can erode trust and attachment, which are crucial for a healthy marriage (Pilkington et al., 2021). Through targeted therapeutic interventions like Schema Therapy, therapists can help individuals recognize and modify these maladaptive patterns, potentially improving their interpersonal relationships and decision-making processes. By working through these schemas, individuals can develop more adaptive coping mechanisms and healthier ways of relating to others, which is particularly beneficial for sustaining marital relationships (Bamelis et al., 2014). Research on the relationship between age and aspects of social cognition, particularly Theory of Mind (ToM) and Early Maladaptive Schemas (EMS), highlights how these elements undergo distinct changes and expressions throughout the lifespan. This has profound implications for how individuals interact with and perceive their social environment as they age (Gourlay et al., 2021). Theory of Mind (ToM) refers to the cognitive ability to attribute mental states to oneself and others, understanding that others have beliefs, desires, intentions, and perspectives different from our own. Research indicates that while basic ToM abilities are developed during early childhood, the sophistication and

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application of these skills continue to evolve throughout adolescence and well into adulthood (Peterson & Wellman, 2019).

EMS are enduring patterns of thought, emotion, and physical sensations developed in childhood. These dysfunctional themes can negatively impact how individuals perceive themselves and the world around them. Research suggests that EMS tend to be stable over time, but their expression and impact can vary across different age groups (Shorey et al., 2013). The interaction between age and EMS in terms of coping styles and schema compensation also offers a rich area of study. Older adults might employ more adaptive coping mechanisms as they acquire life experience and perspective, potentially mitigating some of the negative impacts of EMS (Vasilopoulou et al., 2019).

Both ToM and EMS are influenced by age, but the patterns and implications of these changes can be quite complex. Continued research in these areas is vital for developing age-appropriate psychological interventions and support systems that can enhance social cognition and mitigate the negative impacts of EMS throughout the lifespan (Henry et al., 2013). The interplay between age and EMS, particularly in terms of coping styles and schema compensation, presents a fascinating area for further exploration. Older adults, armed with accumulated life experience and perspective, may develop more adaptive coping mechanisms. For example, someone struggling with an "Abandonment/Instability" schema might learn to reframe negative thoughts or practice mindfulness to manage anxieties about rejection. These strategies can help mitigate the negative impacts of EMS as we age (Shi et al., 2023).

MATERIALS AND METHODS

Research method

The present research is a comparative causal study. Its statistical population was all unmarried girls and married girls over 35 years old in Tabriz. The statistical sample and sampling method in comparative causal studies are at least 15 people for each group. However, 100 people were considered for each group (200 people) because of the high number of variables, and finally, 181 people were included ultimately with the invalidation of 19 questionnaires. 93 people from them were married women and 88 were unmarried girls over 35 years old. Research's method was non-random sampling at convenience and selected it from among unmarried girls over 35 years old. Then, it selected the married group and the unmarried group in terms of age, education, employment status, and economic status.

Research tool

The Young Schema Questionnaire-Short Form (YSQ-SF)

The Young Schema Questionnaire-Short Form (YSQ) was developed by Young (1994) to measure early maladaptive schemas. The short form of schemas questionnaire for measuring 15 early maladaptive schemas of Young (1994, cited by Young et al., 2008) was prepared based on the original form. The long form has 205 questions and the short form has 75 questions. Each question is scored on a 6-point scale, completely false, almost false (2), more true than false (3), slightly true, almost true, completely true (1). Each schema in the short form is measured by five questions in this questionnaire. A high score reveals early maladaptive schemas. This research used the short form of the 75-question Young Schema Questionnaire in order to measure early maladaptive schemas, which measures 15 early maladaptive schemas in 5 domains. Various researches have confirmed the factorial

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structure and construct validity. Cronbach's alpha has been favorable in 15 scales. The results of retesting with an interval of 15 days for 15 schemas have been between 0.67 and 0.84. This questionnaire has desirable formal validity. The reliability coefficient of the questionnaire in the current study was 0.96 through Cronbach's alpha.

Eyes test to evaluate general theory of mind

The eyes test is a tool for evaluating facial expression. Baron Cohen et al. invented this test (cited by Wang et al. (2007)) and it comprises 36 photographs of facial expressions that only show the range of the eyes. The subject is asked to choose the most suitable word among four words, the one which can better describe the thoughts and feelings of the person who owns the photo. Subjects should look at the eyes and then infer the beliefs and feelings of the photo owner. If the subject chooses the correct answer, he will receive a score of one, otherwise, a score of zero. Therefore, the maximum score a person can get in this test will be 36, and the more a person's score in this test goes from 36 to zero, the more he will have a defect in the general theory of mind. The eyes test has acceptable psychometric properties, so that its reliability on theory of mind defects is 0.72, and its formal validity has been carried out under the supervision of several psychologists, as reported above. The present research got the reliability coefficient of the questionnaire by 0.71 through Cronbach's alpha. The data were described using the central and dispersion indices, then the research hypotheses were examined using the independent groups test.

RESULTS

As the results showed, 46.6% of the participants were single, 49.2% were married, and 4.2% did not specify their marital status.

Question one: Is there a difference between the early maladaptive schemas among single girls over 35-year-old and married women of the same age? The normality of the distribution of the variables was not investigated because of the high sample size. The multivariate analysis of variance was replaced by t-test of the independent groups because of the heterogeneity of the matrix of variances and co-variances of the early maladaptive schemas between the two groups.

Table 1 shows the results of the t-test of the early maladaptive schemas between two groups of unmarried girls and their married women of the same age. As you can see, the difference in the average of the two groups in the schemas of emotional deprivation, social isolation, defect of shame, dependence, incompetence, and involvement schemas is significant. The average of unmarried girls in all these schemas is higher according to Table 2. The difference in averages is not significant in other schemes.

Is there a difference between theory of mind among single girls over 35 and married women of the same age?

Independent t-test was also used for the mentioned hypothesis; the Table 3 shows its results. As you can see, there is no significant difference in the average of the two groups. Therefore, the second research question is not confirmable.

DISCUSSION

The result for the first question showed that two groups are significant in schemas of emotional deprivation, social isolation, shame defect, dependence/incompetence, and

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entrapment schema. The average of single girls in all these schemas was higher. However, there is no significant difference in the schemas of rejection, abandonment, mistrust, misbehavior, failure, vulnerability to harm or disease, obedience, sacrifice, emotional inhibition, inflexible standards, and self-restraint entitlement. Most of the researches have investigated the relationship between early maladaptive schemas and marital satisfaction. The prime age of marriage was investigated from a socio-economic point of view, such as the researches of Kazemipour (2013). Therefore, the researcher could not find a research that can compare and examine his results with similar researches.

Marriage is a most important event in human life. It is not only effective in a person's physical and mental health, but it also plays an important role in entering adulthood. Marriage is a process of interaction between two individuals, a woman and a man, who have fulfilled certain legal conditions. Various factors cause its failure. One of these factors is the early maladaptive schemas. Early maladaptive schemas are emotional and cognitive patterns of self-harm that are formed in the mind at the beginning of growth and development, are repeated throughout life and affect the interpretation of experiences and relationships with others. The origin of these schemas is because of di satisfying the basic emotional needs of the childhood, early experiences, life, failure to satisfy the basic needs, excessive satisfaction, simulation with the incorrect behavior of the parents and the emotional temperament (of the child), the set of temperamental characteristics of the child that are inherent and distinguish the child's primary personality (Young et al., 2003).

The schema of dependency/incompetence is one of these early maladaptive schemas. These schemas make the person convinced he cannot perform acceptably daily responsibilities, such as taking care of others, solving daily problems, making correct judgments and making correct decisions, etc. without significant help of others. This manifests itself as involvement. Self-management is a person's ability to separate from the family according to the person's age and age. Individuals with a dependence schema have expectations from themselves and the surrounding environment that hinder their ability to separate themselves from their parents' symbol and achieve independent functioning. Individuals with dependence schema feel that they cannot earn money, solving problems, taking on new tasks, and making correct decisions. This schema often shows itself as passivity and extreme involvement. Going to extremes in child support leads to problems in the self-management and these factors ultimately cause girls to delay marriage.

The early maladaptive schema of involvement, intense emotional relation and excessive closeness with one of the most important individuals in the life, especially parents, ends up at the cost of losing individuality with the natural social development of the person. A person may feel that he does not have an independent identity. This schema often manifests itself as a sense of emptiness and confusion because of aimlessness, or in severe cases, as a doubt in the existence and existential structure of a person. Thus, since a person defines his emotional and identity aspect through this person, he cannot agree to marriage, because he considers himself captive and trapped by a person and cannot imagine himself independent from him.

Individuals, because of the schema of emotional deprivation, do not expect that their desire to establish an emotional relationship with others will be sufficiently satisfied Young et al. (2008). Therefore, these individuals choose in this situation a spouse who is emotionally deprived, cold and heartless (Young et al., 2008), or does not marry in order to prevent the

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formation of intimate relationships with others. As for the schema of shame defect, a person feels that in the most important aspects of his personality, he is an undesirable, bad, inferior and worthless person, or that the important people in his life consider him a hated and undesirable person. This schema includes excessive sensitivity to criticism, rejection, blame, shyness, inappropriate comparisons, feelings of insecurity in the presence of others, and feeling of shame by internal flaws and defects (Qara Daghi, 2008). These individuals prefer to avoid intimate relationships such as marriage in order not to be aware of their defects and feel ashamed of their existence.

As the result of the second question showed, there is no significant difference in the theory of mind between unmarried girls who have reached puberty and married girls of the same age.

Most of the researches have investigated theories of the mind in psychological disorders; Such as the researches of Wang et al. (2007). Therefore, the researcher could not find a research that can compare and examine the results with similar researches.

The theory of the mind is a continuous representation of the mental state of oneself and others. The theory of the mind predicts behavior according to mental states. this ability allows us to represent, like a chess player, the thoughts, tendencies and goals of others in our minds and respond appropriately in social scenes and in interaction with others (Brown et al., 1995). Individuals are of different degrees of theory of mind ability on the continuum. Advanced theory of mind makes up one end of the continuum and the defect in theory of mind at the other end.

Understanding that people have mental states, such as beliefs, desires, and intentions that often guide their behavior. Astington, citing Senman (2002), also considers the theory of mind to understand social interaction by attributing beliefs, desires, intentions, and emotions to oneself and others in order to explaining and predicting behavior. As we mentioned earlier, the ability of the theory of mind allows us to represent the thoughts, tendencies and goals of others in our minds, interact in social scenes with others and show the reaction with more skill. We should also know our own and others' desires, beliefs, intentions, and needs and act under them. Married individuals, according to their beliefs and intentions, could decide to marry a person who they feel can understand these factors or they themselves can understand and cope with these factors in another. Thus, unmarried individuals are not ready to accept another person with unique characteristics according to the knowledge they have of themselves, or knowing that they have their own beliefs, intentions and desires, they could not find someone who is suitable for these individual factors, or at least tolerates with them. Therefore, theory of mind among unmarried girls of the same age and married girls of the same age cannot make a difference in the marriage or celibacy, or both groups may not have the ability of theory of mind at all and other reasons cause them not to marry.

Gender is a limitation of this research, because only women were under study. As the results show, organizations in charge of marriage and youth should hold familiarization courses on the customs and responsibilities of marriage for individuals of marriage age and for unmarried individuals of old age in order to familiarize them with the responsibilities of a joint life and eliminate the simplistic and negative view of marriage.

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Conflict of Interest

The author(s) declared no conflict of interest.

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APPENDIX

Table 1 Descriptive indices of early maladaptive schemas

Schema	Group	Number	Mean	Standard deviation
emotional deprivation	Single	88	13.24	7.48
	Married	93	10.24	5.34
Rejection/ Abandonment	Single	88	14.03	6.61
	Married	93	12.51	4.58
Mistrust/ misbehavior	Single	88	11.69	5.97
	Married	93	11.51	5.32
social isolation	Single	88	10.67	5.93
	Married	93	8.41	3.19
Defect of shame	Single	88	9.57	5.71
	Married	93	7.93	2.49
Failure	Single	88	11.07	5.78
	Married	93	10.20	4.47
Dependency/incompetence	Single	88	9.78	4.90
	Married	93	8.41	3.21
vulnerability to harm, disease	Single	88	11.43	6.25
	Married	93	10.84	4.92
Involvement	Single	88	12.35	5.88
	Married	93	10.20	4.47
Obedience	Single	88	13.08	5.41
	Married	93	12.62	4.32
self-sacrifice	Single	88	18.31	6.12

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Emotional inhibition	Married	93	19.16	5.49
	Single	88	13.24	6.31
Inflexible criteria	Married	93	13.21	4.99
	Single	88	16.70	6.17
Entitlement	Married	93	17.24	5.94
	Single	88	15.91	6.177
self-control	Married	93	14.77	5.26
	Single	88	12.91	5.72
	Married	93	12.88	4.83

Table 2 Test of early maladaptive schemas

Schema	Equality of variances or inequality of variances	Degrees of freedom	t	Sig.
emotional deprivation	inequality of variances	156.728	3.094	0.002
Rejection/ Abandonment	inequality of variances	154.088	1.799	0.074
Mistrust/ misbehavior	Equality of variances	179	0.224	0.823
social isolation	inequality of variances	131.781	3.169	0.002
Defect of shame	inequality of variances	117.619	2.470	0.015
Failure	inequality of variances	163.822	1.120	0.264
Dependency/incompetence	inequality of variances	149.009	2.221	0.028
vulnerability to harm, disease	inequality of variances	165.309	0.707	0.481
Involvement	inequality of variances	162.260	2.757	0.006
Obedience	inequality of variances	166.397	0.624	0.533
self-sacrifice	Equality of variances	179	0.990	0.324
Emotional inhibition	inequality of variances	165.728	0.028	0.978
Inflexible criteria	Equality of variances	179	0.591	0.555
Entitlement	inequality of variances	171.191	1.327	0.186
Self-control	Equality of variances	179	0.035	0.972

Table 3 Theory of Mind t-test (eyes test)

Groups	Mean	Standard deviation	Equality of variances or not	Degrees of freedom	t	Sig.
Single	10.26	4.49	Equality of	168.348	0.269	0.788
Married	10.10	3.68	Variances			