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Examining the Fit of the Psychological Well-Being Model of Adolescents Based on Early Maladaptive Schemas with the Mediation of Emotion Regulation

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A B S T R A C T

Objective: Adolescence brings about new changes in the psychological system, including thinking and planning for the future, evaluating alternatives, introspection, reasoning, abstract thinking, new levels of autonomy and assertiveness, and generally new cognitive abilities.

Methods and Materials: This study aimed to examine the fit of the psychological well-being model of adolescents based on early maladaptive schemas with the mediation of emotion regulation. The research design was applied in nature, using a descriptive-correlational method with a structural modeling approach. The statistical population of this study included all adolescents studying in the second period of secondary schools in Tehran during the academic year 2020-2021. The sample consisted of 400 individuals selected from the research population using cluster sampling. The tools used in this study included the Psychological Well-Being Questionnaire (Ryff, 1989), the Young Schema Questionnaire-Short Form (Young, 1994), and the Difficulties in Emotion Regulation Scale (Gratz & Roemer, 2004). For data analysis in descriptive statistics, SPSS-24 software was used, and for inferential statistical analysis to test hypotheses and confirm or reject them, the structural equation modeling (SEM) method with AMOS-22 software was employed.

Findings: The findings indicated that, according to the chi-square and RMSEA criteria, the model provided a good fit for the data regarding the psychological well-being of adolescents based on early maladaptive schemas with the mediation of emotion regulation.

Conclusion: Emotion regulation serves as a mediator between psychological well-being and early maladaptive schemas, meaning that early maladaptive schemas can indirectly enhance psychological well-being by reducing emotional dysregulation.

Keywords: *psychological well-being, early maladaptive schemas, emotion regulation, adolescence*

1. Introduction

Psychology has traditionally conceptualized individuals in terms of psychopathology, dysfunction, and failure. It has focused on the remediation of damage following the disease model of human functioning and has paid little attention to fostering positive qualities (Darbani & Parsakia, 2023). In this respect, adolescence has not been an exception. Since its establishment as an empirical field of study at the beginning of the 20th century, it has often been regarded as a period of life characterized by problems and difficulties, collecting a large body of research data related to risk factors, problematic behavior, and prevention formulas (Nicolson & Ayers, 2004; Nurulsani & Endah, 2019; Páez-Gallego et al., 2020; Park et al., 2014). Consequently, knowledge about aspects related to optimal functioning and positive development during these years is significantly less, contributing to the notion that a healthy adolescent is one without problems (Carneiro et al., 2019; Verzeletti et al., 2016). However, different perspectives have emerged, advocating for a broader and more balanced understanding, recognizing that optimal functioning during adolescence is more than just the absence of problems, difficulties, or pathology. These perspectives include positive psychology, which considers adolescents' potential for achieving healthy and successful development, adopting a well-being-centered approach (Gratz & Roemer, 2004).

The emergence and growth of positive psychology have led to an increase in well-being research, giving rise to two theoretical approaches: hedonic and eudaimonic (Ryff & Singer, 2010). The hedonic view reflects the concept of well-being as an outcome composed of an inner state of pleasure or happiness, focusing on subjective well-being (Nourialeagha et al., 2020; Ryff & Singer, 2010). From this perspective, well-being is defined in terms of experiencing high levels of positive affect, low levels of negative affect, and a high degree of life satisfaction (Karreman & Vingerhoets, 2012; Latipun et al., 2019; Marrero-Quevedo et al., 2019; Molero et al., 2017; Nourialeagha et al., 2020; Páez-Gallego et al., 2020; Ryff, 2018). On the other hand, the eudaimonic view posits that well-being is more than just happiness. Eudaimonic theories assert that not all desires—outcomes that a person may value—lead to well-being when achieved. From this perspective, well-being is not an end result or a final state but a process of realizing human potentials (Marrero-Quevedo et al., 2019; Molero et al., 2017; Ryff, 2018; Ryff & Singer, 2010; Stevenson et al., 2019; Verzeletti et al., 2016). It relates to positive functioning and the development of capacities and virtues. In this context, Ryff's multidimensional model of psychological well-being has received the most empirical support (Ryff, 2018; Ryff & Singer, 2010). According to this approach, well-being consists of six dimensions: (1) autonomy, or the ability to regulate one's behavior, resist social pressures, and follow one's beliefs, even if they oppose public opinion; (2) environmental mastery, or the ability to manage one's context and daily activities; (3) personal growth, which includes the continuous process of developing one's potential, openness to new experiences, and a sense of improvement over time; (4) positive relations with others, defined as forming close, trusting, and meaningful bonds with others, showing concern for others' well-being, and expressing empathy, affection, and intimacy; (5) purpose in life, or setting goals and objectives that give life meaning and direction; and (6) self-acceptance, or the ability to have a positive attitude and feel satisfaction and acceptance towards oneself, including one's good and bad characteristics. Each of these dimensions represents the meaning of being healthy, well, and fully functioning, and addresses the various challenges individuals face in their pursuit of positive functioning (Ryff, 2018). In other words, individuals strive to view themselves positively while being aware of their limitations (self-acceptance), seek to maintain satisfying interpersonal relationships (positive relations with others), establish a sense of autonomy and personal authority in their interactions with their environment (autonomy), make the most of their talents and abilities to achieve their goals (personal growth), manage their environment to meet their needs (environmental mastery), and find meaning in their efforts and challenges (Ryff, 2018; Ryff & Singer, 2010).

Previous studies, primarily focusing on adult populations, have shown that psychological well-being is a reliable predictor of long-term health and positive adaptation (Carneiro et al., 2019; Freire et al., 2017; Ivcevic & Eggers, 2021; Karreman & Vingerhoets, 2012; Latipun et al., 2019; Marrero-Quevedo et al., 2019; Molero et al., 2017; Nourialeagha et al., 2020; Páez-Gallego et al., 2020; Ryff, 2018; Ryff & Singer, 2010; Sarafraz et al., 2019; Simpson & Campbell, 2013; Stevenson et al., 2019; Verzeletti et al., 2016). Individuals with higher levels of well-being suffer from fewer illnesses, have increased life expectancy, and exhibit healthier behaviors. However, longitudinal studies have also shown that dimensions such as personal growth and purpose in life decline with age (Páez-Gallego et al., 2020; Ryff, 2018). Although research focused on

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adolescence is limited, several longitudinal studies have provided evidence on the evolution of well-being during this period. The World Health Organization, through the Health Behavior in School-Aged Children study, collects data every 4 years from children aged 11, 13, and 15 in over 40 North American and European countries to understand well-being in terms of life satisfaction. In terms of gender, the results of this research indicated that well-being in adolescents decreases with age in both sexes, with boys generally showing better levels of life satisfaction compared to girls (Ivcevic & Eggers, 2021). One of the results of the study highlights the importance of interpersonal relationships in adolescent well-being, stating that peers and parents play key roles as protective assets in young people's lives. In this regard, research by Patalay and Fitzsimons (2018) showed that well-being is highly unstable, indicating that girls are more likely to experience a decline in well-being over time. Well-being was measured in terms of satisfaction with various life domains, including school, family, friends, schoolwork, appearance, and life as a whole (Patalay & Fitzsimons, 2018). Important predictors of these outcomes included lower family income, weaker relationships with parents, lower school engagement, and higher cognitive ability. Booker et al. (2018) also found a decline in well-being over time, particularly among girls. To measure well-being, the authors used happiness with six life domains (i.e., friends, family, appearance, school, schoolwork, and life as a whole) as a key variable and included a measure of emotional and behavioral problems. According to this study, as girls grow older, they increasingly tend to compare themselves socially with others and perceive that others are better than they are, which may lead to lower levels of well-being compared to boys (Booker et al., 2018). Meade and Dowswell (2016) also reported that adolescents' general well-being, in terms of health-related quality of life, generally remains relatively stable over time, although, again, gender differences with worse predictions for girls were observed. According to the authors, changes in personal standards used for self-assessment of quality of life account for these differences. The structure of health-related quality of life reflects the overall well-being of participants, measured through five dimensions: physical well-being, psychological well-being, autonomy and parent relationships, social support and peers, and school environment (Meade & Dowswell, 2016). Focusing on psychological well-being, it was assessed using hedonic elements such as positive emotions, life satisfaction, and the absence of loneliness and sadness. Finally, from a socio-demographic perspective, by analyzing data from the Health Behavior in School-Aged Children study, different trends were found depending on the country (Ottová-Jordan et al., 2015). For example, in countries like Spain, Croatia, or Greece, groups showed a continuous decline in well-being (life satisfaction). In Denmark, Finland, or Norway, there was a linear increase, while in Austria, Canada, or Scotland, a clear U-shaped trend was observed.

Another factor significantly impacting adolescents' psychological well-being is maladaptive schemas. Schemas form early in life and influence individuals throughout their lives; however, early maladaptive schemas are beliefs individuals hold about themselves, others, and the environment, typically originating from unmet primary needs, particularly emotional needs, during childhood (Young et al., 2006). In fact, early maladaptive schemas remain stable throughout life and form the basis of individuals' cognitive structures. These schemas help individuals organize their experiences regarding the surrounding world and process received information (Pugh, 2015). Since schemas form the core of individuals' self-concept, if they have maladaptive content, they make individuals vulnerable to a range of deficiencies and problems. Young refers to those schemas that lead to psychological problems as early maladaptive schemas, which are self-defeating cognitive and emotional patterns originating from early life and persisting throughout life (Young et al., 2006). Researchers believe that early maladaptive schemas act as filters to confirm or validate childhood experiences and lead to clinical symptoms such as anxiety, depression, personality disorders, loneliness due to destructive interpersonal relationships, substance abuse, bulimia, or ulcers (Barazandeh et al., 2016; Bishop et al., 2022; Dadomo et al., 2016; Fassbinder et al., 2016; Maher et al., 2022; Masley et al., 2012; Peeters et al., 2022; Pugh, 2015; Taylor et al., 2017). In his theory, Young introduced fifteen schemas resulting from the failure to meet five important emotional needs: secure attachment and acceptance, autonomy, competence and identity, freedom to express needs and healthy emotions, self-expression, spontaneity and play, and direction from within. These schemas include emotional deprivation (the belief that one's emotional needs will not be adequately met by significant others, manifested as deprivation of nurturance, empathy, and protection), abandonment/instability (an unstable and unrealistic perception of support and connection with others, feeling that close ones do not provide emotional support or protection), mistrust/abuse (the belief that others will harm,

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lie to, or take advantage of us), social isolation/alienation (the belief that one is different from others and does not belong to any group, resulting in a sense of alienation), defectiveness/shame (the belief that one is inferior, worthless, or bad, and that others do not like them), failure (the belief that one is a failure and cannot achieve competence comparable to their peers), dependence/incompetence (the belief that one is unable to handle daily responsibilities without help from others, often manifesting as helplessness or passivity), vulnerability to harm (an excessive fear of disease or harm in a situation that one cannot prevent), enmeshment/undeveloped self (excessive emotional dependence on one or more close people, particularly parents), subjugation (excessive suppression of emotions, particularly anger, to avoid loneliness), self-sacrifice (neglecting oneself and overly focusing on meeting others' needs), emotional inhibition (excessive emphasis on rationality and inhibition of anger and any other emotions, limiting spontaneous feelings, connections, and behaviors), unrelenting standards/hypercriticalness (the belief that one must have extremely high internal standards, a form of extreme perfectionism), entitlement/grandiosity (the belief that one is superior to others and that whatever one does or claims is correct), and insufficient self-control/self-discipline (inability to restrain desires and an excessive tendency to seek pleasure and avoid uncomfortable situations, resulting in inefficiency and lack of self-control) (Young et al., 2006).

Schemas also negatively affect how individuals interpret and react to interpersonal experiences, thereby being associated with the development and maintenance of psychological disorders (Barazandeh et al., 2016; Bishop et al., 2022; Maher et al., 2022). Schema therapy aims to treat chronic and pervasive psychological disorders by modifying schemas and has been found effective in treating personality, emotional, and eating disorders (Masley et al., 2012; Peeters et al., 2022; Pugh, 2015; Taylor et al., 2017). Given the central role of schemas in the etiology and maintenance of psychopathology (Bishop et al., 2022; Pugh, 2015; Taylor et al., 2017), identifying early experiences related to schema formation is important.

Despite extensive research highlighting the role of early maladaptive schemas in psychological well-being, there is still no certainty to determine whether adolescents suffering from numerous early maladaptive schemas have appropriate psychological well-being. This highlights the importance of mediator variables. These variables act as mediating factors that facilitate the impact of early maladaptive schemas on adolescents' psychological well-being. One such mediating variable is emotion regulation. Emotion regulation refers to a set of activities that influence the type, timing, and way of experiencing and expressing our emotions. Behaviors such as cognitive reappraisal, distraction, avoidance, suppression, problem-focused and emotion-focused coping are various emotion regulation strategies. Each of these strategies has multiple functions, used in both negative and positive emotional states, but most are characterized by actions aimed at altering the form, frequency, duration, or situational aspect of events before and after the emotional response (Dadomo et al., 2016). In other words, emotion regulation is a heterogeneous process through which emotions are regulated. These emotion regulation processes may be automatic or controlled, conscious or unconscious, and involve conscious and unconscious aspects of physiology and cognitive-behavioral functioning (Fassbinder et al., 2016). Emotion regulation strategies are considered as activities used to reduce, increase, suppress, or maintain emotions and are believed to be inherent and innate characteristics of humans (Gross, 2002; Ivcevic & Eggers, 2021). Emotion regulation is often examined within two major frameworks: (1) emotion regulation strategies before an event occurs (activated before the emergence of emotion or at its onset, preventing intense emotional reactions) and (2) strategies activated after an event or after the emergence of emotion (these strategies cannot prevent intense emotional reactions) (Gross, 1998, 2002). The role of emotion regulation in psychological disorders is now confirmed (Fassbinder et al., 2016).

In summary, as mentioned, predictors of psychological well-being can be categorized into cognitive-emotional models, including cognitive factors such as early maladaptive schemas and intrapersonal factors such as emotion regulation. Considering the characteristics of each category of the above factors and how they relate to individuals' psychological well-being, it can be predicted that examining these factors, which have not yet been extensively considered in foreign and domestic research, could be beneficial in clarifying ambiguities regarding adolescents' psychological well-being in the Iranian society and in preventing this harmful disorder. Therefore, the present study aims to answer the question of whether the variable of early maladaptive schemas, with the mediation of emotion regulation, can predict psychological well-being in adolescents.

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2. Methods and Materials

2.1. Study Design and Participants

The present study falls within the scope of applied research using a descriptive-correlational method with a structural modeling approach. The research population comprised all adolescents studying in the second period of secondary schools in Tehran during the academic year 2020-2021. The research sample consisted of 400 individuals selected through cluster sampling. Initially, one district was randomly chosen from Tehran's 22 districts, and then 5 high schools were randomly selected from that district. Subsequently, 2 classes were randomly selected from each chosen high school. After explaining the research objectives and obtaining consent from the sample members to participate in the study, individuals were assessed using the relevant questionnaires.

2.2. Measures

2.2.1. Psychological Well-Being

This scale was developed by Carol Ryff in 1989. The test consists of 84 items and encompasses six factors. Participants respond to the questions on a 6-point scale (from strongly disagree to strongly agree). Forty-seven questions are scored directly, while thirty-seven questions are scored inversely. Ryff used measures such as the Bradburn Affect Balance Scale (1969), the Neugarten Life Satisfaction Scale (1965), and the Rosenberg Self-Esteem Scale (1965) to assess the validity of the tool and its relationship with scales measuring personality traits and psychological well-being. The correlation results of the Ryff test with each of the above scales were acceptable, thus indicating the construct validity of the tool (Ryff, 1989). The Cronbach's alpha obtained in Ryff's study (1989) was reported as 0.93 for self-acceptance, 0.91 for positive relations with others, 0.86 for autonomy, 0.90 for environmental mastery, and 0.87 for personal growth. In Iran, a study conducted with a student sample measured internal consistency using Cronbach's alpha. The results were 0.77 for environmental mastery, 0.78 for personal growth, 0.77 for positive relations with others, 0.70 for purpose in life, 0.71 for self-acceptance, 0.78 for autonomy, and 0.82 for the overall score. The validity of this scale was also deemed appropriate (Sarhang et al., 2022).

2.2.2. Early Maladaptive Schema

This questionnaire, designed by Young and Brown, consists of 75 items and assesses 15 primary maladaptive cognitive schemas, including emotional deprivation, abandonment/instability, mistrust/abuse, social isolation/alienation, defectiveness/shame, failure, dependence/incompetence, vulnerability to harm, enmeshment/undeveloped self, subjugation, self-sacrifice, emotional inhibition, unrelenting standards/hypercriticalness, entitlement/grandiosity, and insufficient self-control/self-discipline. Each of the 75 items is scored on a 6-point Likert scale. An individual's score for each schema is the sum of the scores for the relevant items, with a high score indicating a more prominent maladaptive schema (Young & Brown, 2003). In the study by Welburn et al. (2004), all fifteen subscales of the short form of the schema questionnaire demonstrated adequate to very good internal consistency. Cronbach's alpha for all schemas ranged from 0.76 to 0.93. In the study by Fatehi Zadeh and Abbasian (2003), conducted to validate the schema questionnaire among students in Isfahan, the reliability of the questionnaire was found to be 0.94 using Cronbach's alpha method for internal consistency (Barazandeh et al., 2016).

2.2.3. Difficulties in Emotion Regulation

This 36-item scale, designed by Gratz and Roemer (2004), has a total score and six specific subscale scores related to various aspects of emotion regulation difficulties. These subscales include non-acceptance of emotional responses, difficulties engaging in goal-directed behavior, impulse control difficulties, lack of emotional awareness, limited access to emotion regulation strategies, and lack of emotional clarity. Responses to this scale are given on a 5-point Likert scale (1 = almost never to 5 = almost always). The researchers examined the reliability and validity of this scale in a sample of 479 undergraduate students. The scale demonstrated good internal consistency in the total score (Cronbach's alpha of 0.93) and all subscales (alpha coefficients greater than 0.80). Heidari et al. (2009) examined the reliability and validity of this scale in Iran. The reliability of the scale, calculated using Cronbach's alpha and split-half methods, was 0.84 and 0.76, respectively, indicating its appropriate reliability. Furthermore, the reliability and validity of this questionnaire were also calculated by Aminian (2009, as cited in Heidari et al., 2009). The reliability, calculated using Cronbach's alpha and

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split-half methods, was 0.86 and 0.80, respectively, demonstrating acceptable coefficients for the emotion regulation scale (Akhavan Kharazi & Ramezani, 2022).

2.3. Data analysis

The collected data were entered into SPSS software version 24 and analyzed using structural equation modeling with AMOS software version 22.

3. Findings and Results

The subjects of the present study included 400 students, comprising 224 girls and 176 boys. The results of the means, standard deviations, skewness, and kurtosis of the research variables are presented in Table 1.

Table 1

Results of Means, Standard Deviations, Skewness, and Kurtosis of Research Variables in Adolescents

Variable	Component	Mean	Standard Deviation	Skewness	Kurtosis
Psychological Well-Being	Environmental Mastery	47.59	11.73	0.16	-0.12
	Personal Growth	44.50	11.55	0.16	-0.40
	Positive Relations with Others	46.90	11.57	0.47	0.52
	Purpose in Life	46.31	11.09	0.15	0.27
	Self-Acceptance	45.28	10.84	-0.16	0.40
	Autonomy	44.89	11.87	0.40	0.83
Schema	Emotional Deprivation	15.30	4.74	0.40	0.43
	Abandonment/Instability	16.99	5.12	0.48	0.60
	Mistrust/Abuse	17.04	4.35	0.25	0.53
	Social Isolation/Alienation	16.98	3.83	-0.40	0.56
	Defectiveness/Shame	17.36	3.61	-0.41	0.57
	Failure	17.15	3.50	-0.27	0.27
	Dependence/Incompetence	17.22	3.98	-0.16	-0.14
	Vulnerability to Harm	15.56	4.28	0.04	-0.31
	Enmeshment/Undeveloped Self	17.53	4.45	0.11	0.07
	Subjugation	16.92	5.59	0.58	-0.05
	Self-Sacrifice	16.04	5.26	0.72	0.32
	Emotional Inhibition	16.49	4.10	-0.05	-0.03
	Unrelenting Standards/Hypercriticalness	16.41	3.87	-0.05	0.01
	Entitlement/Grandiosity	16.17	3.80	0.06	0.18
	Insufficient Self-Control/Self-Discipline	15.90	3.97	-0.07	0.21
Difficulty in Emotion Regulation	Non-Acceptance of Emotions	18.90	5.05	-0.06	-0.13
	Difficulty Engaging in Goal-Directed Behavior	20.30	4.60	-0.31	-0.48
	Impulse Control Difficulties	19.97	4.61	-0.29	-0.37
	Lack of Emotional Awareness	20.29	4.29	-0.30	-0.73
	Limited Access to Emotion Regulation Strategies	21.18	3.98	-0.23	-0.37
	Lack of Emotional Clarity	19.64	5.03	-0.15	-0.20

Before analyzing the data using structural equation modeling, the normality assumption of the data was tested using the Kolmogorov-Smirnov test, as shown in Table 2.

The results of the model fit indices for the final research model are presented in Table 3.

Table 2

Kolmogorov-Smirnov Test

Variable	Test Statistic	Significance Level
Psychological Well-Being	0.532	0.703
Schema	0.539	0.705
Difficulty in Emotion Regulation	0.199	0.579

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Table 3

Fit Indices

Index	Index Name	Abbreviation	Value	Acceptable Fit
Absolute Fit Indices	Chi-Square	-	735.09	-
	Goodness of Fit Index	GFI	0.88	> 0.8
Comparative Fit Indices	Adjusted Goodness of Fit Index	AGFI	0.90	> 0.8
	Comparative Fit Index	CFI	0.97	> 0.9
Parsimony Fit Indices	Root Mean Square Error of Approximation	RMSEA	0.057	< 0.1

Based on the results in Table 3, all fit indices for the final research model indicate that the model has a good fit. The results of the fitted model predicting adolescents' psychological well-being based on early maladaptive schemas with the mediating role of emotion regulation, along with the standardized path coefficients, are presented in Figure 1.

Figure 1

Model with T-Values

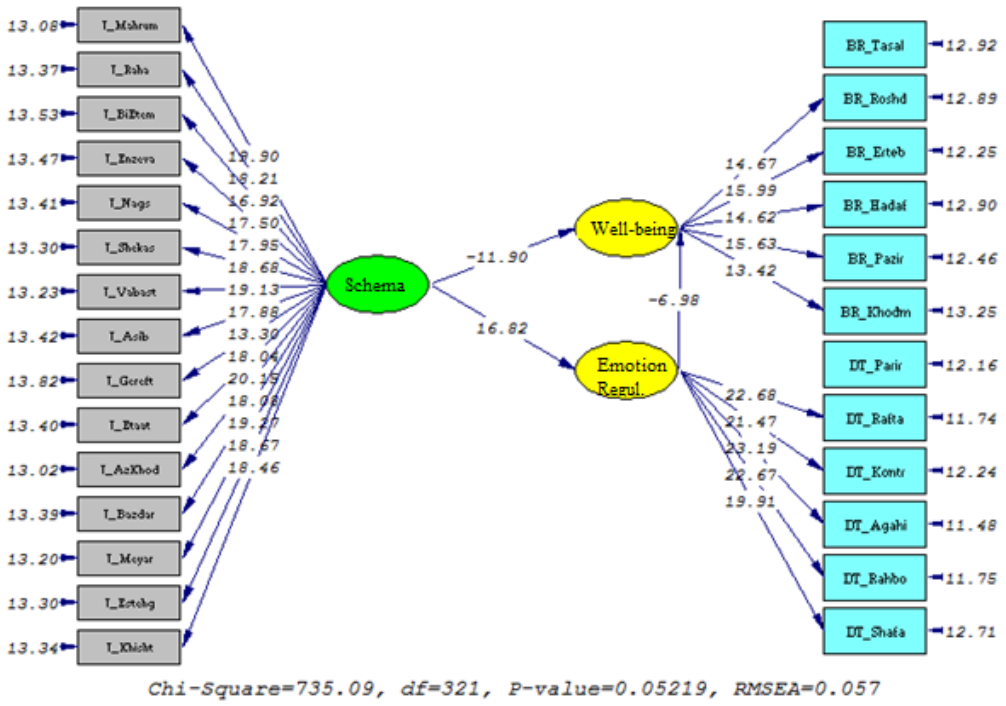

Table 4

Path Coefficients and t-Values

Predictor	Criterion	Path Coefficient	t-Value	Status
Early Maladaptive Schema	--> Emotion Regulation	0.53	16.82	Accepted
Emotion Regulation	--> Psychological Well-Being	-0.31	-6.98	Accepted
Early Maladaptive Schema	--> Psychological Well-Being	-0.55	-11.90	Accepted

Based on the standardized path coefficients in Figure 1, all paths are significant. Therefore, the results of the indirect effects of the model predicting psychological well-being based on early maladaptive schemas with the mediating role of emotion regulation are presented in Table 4.

4. Discussion and Conclusion

Emotion regulation serves as a mediator between psychological well-being and early maladaptive schemas,

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meaning that early maladaptive schemas can indirectly enhance psychological well-being by reducing emotional dysregulation. This finding is consistent with the prior results (Dadomo et al., 2016; Mc Donnell et al., 2018; Nicol et al., 2021; Şenkal Ertürk et al., 2020; Sepehri & Kiani, 2020; Zabihollahzadeh et al., 2019).

In explaining this finding, it can be stated that maladaptive schemas are a significant psychological and social issue during adolescence, potentially leading to personality, psychological, and social disorders. Maladaptive schemas include negative beliefs about oneself, others, and the world, feelings of worthlessness, intolerance of failure and frustration, anxiety, and fear of social relationships, among others. According to schema theory, early maladaptive schemas are fundamental building blocks for individuals' personalities. These schemas develop in childhood, expand throughout an individual's life, and are significantly dysfunctional (Dadomo et al., 2016). To prevent maladaptive schemas in adolescents, it is essential to create a supportive environment and provide comprehensive support. This includes providing a safe and welcoming space, encouraging participation in group activities, enhancing communication and problem-solving skills, fostering self-awareness and stress management, and offering family support and psychological counseling.

One effective strategy to prevent maladaptive schemas in adolescents is to provide a safe and welcoming space where they feel secure and comfortable and believe they can approach others with their problems. Encouraging participation in group activities can also help boost self-confidence and social connections. Enhancing communication and problem-solving skills is another effective strategy for preventing maladaptive schemas, as these skills help adolescents communicate effectively with others and handle problems and issues efficiently. Enhancing self-awareness and stress management can also prevent maladaptive schemas, as adolescents who develop self-awareness can better understand themselves and their issues, and stress management helps them cope with daily challenges and stressors more effectively.

Furthermore, changing negative thought patterns and acquiring problem-solving skills can improve psychological well-being. Adolescents need to learn how to change their negative thought patterns and replace them with positive ones. According to the primary focus of schema therapy, issues with regulating negative emotions, as opposed to positive ones, are closely related to psychological pathologies and lower life satisfaction and well-being (Young et al., 2006). Therefore, according to Werner and Gross, emotion regulation is the first step in planning an effective therapeutic strategy. Based on the four essential steps toward adaptive emotion regulation (Dadomo et al., 2016), a schema therapy model identified emotion regulation and proposed relational and experiential techniques for adaptive emotion regulation. Although schema therapy does not directly address emotion regulation, schema therapy techniques (indirectly) focus on regulating negative emotions through systematic interventions (Fassbinder et al., 2016). Additionally, problem-solving skills help adolescents cope better with life's problems and reduce feelings of loneliness.

5. Limitations & Suggestions

Ultimately, preventing maladaptive schemas in adolescents requires a broad and systematic approach. It is essential to create a supportive environment and provide comprehensive support, including a safe and welcoming space, enhancing communication and problem-solving skills, fostering self-awareness and stress management, offering family support, and psychological counseling. Furthermore, factors affecting adolescents should be considered, and appropriate strategies should be provided to improve their psychological well-being.

The limitations of the present study include the following: this study is correlational and thus has all the limitations associated with this research method. For example, the difficulty in generalizing the results to other groups due to the selection of a specific age group and the lack of examination of contextual and developmental factors in the correlation of research variables. It is recommended that this research be conducted in other cities and with larger samples to ensure that the results can be used effectively by psychologists in schools and other counseling centers. Overall, to ensure the reliability of this study's results, it is suggested that the research be repeated and its results compared with those of the present study.

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Declaration of Interest

The authors of this article declared no conflict of interest.

Ethical Considerations

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The study protocol adhered to the principles outlined in the Helsinki Declaration, which provides guidelines for ethical research involving human participants.

Transparency of Data

In accordance with the principles of transparency and open research, we declare that all data and materials used in this study are available upon request.

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Authors' Contributions

All authors equally contributed in this article.

References

Akhavan Kharazi, M., & Ramezani, M. A. (2022). Investigating the relationship between sexual intimacy, emotion regulation and attachment styles. *Journal of Adolescent and Youth Psychological Studies (JAYPS)*, *3*(2), 41-56. https://doi.org/10.61838/kman.jayps.3.2.4

Barazandeh, H., Kissane, D. W., Saeedi, N., & Gordon, M. (2016). A systematic review of the relationship between early maladaptive schemas and borderline personality disorder/traits. *Personality and individual differences*, *94*, 130-139. https://doi.org/10.1016/j.paid.2016.01.021

Bishop, A., Younan, R., Low, J., & Pilkington, P. D. (2022). Early maladaptive schemas and depression in adulthood: A systematic review and meta-analysis. *Clinical Psychology & Psychotherapy*, *29*(1), 111-130. https://doi.org/10.1002/cpp.2630

Booker, C. L., Kelly, Y. J., & Sacker, A. (2018). Gender differences in the associations between age trends of social media interaction and well-being among 10-15 year olds in the UK. *BMC public health*, *18*, 1-12. https://link.springer.com/article/10.1186/s12889-018-5220-4

Carneiro, L. S., Fernandes, H. M., & Vasconcelos-Raposo, J. (2019). Psychological well-being in adolescence. *Motricidade*, *15*, 66-66. https://search.proquest.com/openview/cb633f90661c6c8b938f691f2020bfa2/1?pq-origsite=gscholar&cbl=616555

Dadomo, H., Grecucci, A., Giardini, I., Ugolini, E., Carmelita, A., & Panzeri, M. (2016). Schema Therapy for Emotional Dysregulation: Theoretical Implication and Clinical Applications [Hypothesis and Theory]. *Frontiers in psychology*, *7*. https://doi.org/10.3389/fpsyg.2016.01987

Darbani, S. A., & Parsakia, K. (2023). Investigating the effectiveness of strength-based counseling on adolescent resilience. *Journal of Adolescent and Youth Psychological Studies (JAYPS)*, *4*(5), 169-175. https://doi.org/10.61838/kman.jayps.4.5.16

Fassbinder, E., Schweiger, U., Martius, D., Brand-de Wilde, O., & Arntz, A. (2016). Emotion regulation in schema therapy and dialectical behavior therapy. *Frontiers in psychology*, *7*, 1373. https://www.frontiersin.org/articles/10.3389/fpsyg.2016.01373/full

Freire, C., Ferradás, M. d. M., Núñez, J. C., & Valle, A. (2017). Estructura factorial de las Escalas de Bienestar Psicológico de Ryff en estudiantes universitarios. *European journal of education and psychology*, *10*(1), 1-8. https://doi.org/10.1016/j.ejeps.2016.10.001

Gratz, K. L., & Roemer, L. (2004). Multidimensional assessment of emotion regulation and dysregulation: Development, factor structure, and initial validation of the difficulties in emotion regulation scale. *Journal of psychopathology and behavioral assessment*, *26*, 41-54. https://link.springer.com/article/10.1023/b:joba.0000007455.08539.94

Gross, J. J. (1998). Antecedent- and response-focused emotion regulation: Divergent consequences for experience, expression, and physiology. *Journal of personality and social psychology*, *74*(1), 224-237. https://doi.org/10.1037/0022-3514.74.1.224

Gross, J. J. (2002). Emotion regulation: Affective, cognitive, and social consequences. *Psychophysiology*, *39*(3), 281-291. https://doi.org/10.1017/S0048577201393198

Ivcevic, Z., & Eggers, C. (2021). Emotion Regulation Ability: Test Performance and Observer Reports in Predicting Relationship, Achievement and Well-Being Outcomes in Adolescents. *International journal of environmental research and public health*, *18*(6).

Karreman, A., & Vingerhoets, A. J. J. M. (2012). Attachment and well-being: The mediating role of emotion regulation and resilience. *Personality and individual differences*, *53*(7), 821-826. https://doi.org/10.1016/j.paid.2012.06.014

Latipun, L., Diny Rezki, A., & Nida, H. (2019, 2019/03). Relation Social Support and Psychological Well-Being among Schizophrenic Patients: Self-Care as Mediation variable? Proceedings of the 4th ASEAN Conference on Psychology, Counselling, and Humanities (ACPCH 2018),

Maher, A., Cason, L., Huckstepp, T., Stallman, H., Kannis-Dymand, L., Millear, P., Mason, J., Wood, A., & Allen, A. (2022). Early maladaptive schemas in eating disorders: A systematic review. *European Eating Disorders Review*, *30*(1), 3-22. https://doi.org/10.1002/erv.2866

Marrero-Quevedo, R. J., Blanco-Hernández, P. J., & Hernández-Cabrera, J. A. (2019). Adult attachment and psychological well-being: The mediating role of personality. *Journal of Adult Development*, *26*, 41-56. https://link.springer.com/article/10.1007/s10804-018-9297-x

Masley, S. A., Gillanders, D. T., Simpson, S. G., & Taylor, M. A. (2012). A Systematic Review of the Evidence Base for Schema Therapy. *Cognitive behaviour therapy*, *41*(3), 185-202. https://doi.org/10.1080/16506073.2011.614274

Mc Donnell, E., Hevey, D., McCauley, M., & Ducray, K. N. (2018). Exploration of Associations Between Early Maladaptive Schemas, Impaired Emotional Regulation, Coping Strategies and Resilience in Opioid Dependent Poly-Drug Users. *Substance Use & Misuse*, *53*(14), 2320-2329. https://doi.org/10.1080/10826084.2018.1473438

Meade, T., & Dowswell, E. (2016). Adolescents' health-related quality of life (HRQoL) changes over time: a three year longitudinal study. *Health and Quality of Life Outcomes*, *14*, 1-8. https://link.springer.com/article/10.1186/s12955-016-0415-9

Molero, F., Shaver, P. R., Fernández, I., & Recio, P. (2017). Attachment insecurities, life satisfaction, and relationship satisfaction from a dyadic perspective: The role of positive and negative affect. *European Journal of Social Psychology*, *47*(3), 337-347. https://doi.org/10.1002/ejsp.2276

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E-ISSN: 3041-8518

Nicol, A., Mak, A. S., Murray, K., & Kavanagh, P. S. (2021). Early maladaptive schemas in young people who self-injure. *Journal of Clinical Psychology*, *77*(7), 1745-1762. https://doi.org/10.1002/jclp.23172

Nicolson, D., & Ayers, H. (2004). *Adolescent Problems*. https://doi.org/10.4324/9780203963364

Nourialeagha, B., Ajilchi, B., & Kisely, S. (2020). The mediating role of gratitude in the relationship between attachment styles and psychological well-being. *Australasian Psychiatry*, *28*(4), 426-430. https://doi.org/10.1177/1039856220930672

Nurulsani, S. A. L., & Endah, R. (2019, 2019/06). Loneliness and Self Esteem as Predictor of Internet Addiction In Adolescents. Proceedings of the 3rd International Conference on Current Issues in Education (ICCIE 2018),

Ottová-Jordan, V., Smith, O. R. F., Gobina, I., Mazur, J., Augustine, L., Cavallo, F., Välimaa, R., Moor, I., Torsheim, T., Katreniakova, Z., Vollebergh, W., Ravens-Sieberer, U., & the Positive Health Focus, G. (2015). Trends in multiple recurrent health complaints in 15-year-olds in 35 countries in Europe, North America and Israel from 1994 to 2010. *European journal of public health*, *25*(suppl_2), 24-27. https://doi.org/10.1093/eurpub/ckv015

Páez-Gallego, J., Gallardo-López, J. A., López-Noguero, F., & Rodrigo-Moriche, M. P. (2020). Analysis of the Relationship Between Psychological Well-Being and Decision Making in Adolescent Students [Original Research]. *Frontiers in psychology*, *11*. https://doi.org/10.3389/fpsyg.2020.01195

Park, M. J., Scott, J. T., Adams, S. H., Brindis, C. D., & Irwin, C. E., Jr. (2014). Adolescent and Young Adult Health in the United States in the Past Decade: Little Improvement and Young Adults Remain Worse Off Than Adolescents. *Journal of Adolescent Health*, *55*(1), 3-16. https://doi.org/10.1016/j.jadohealth.2014.04.003

Patalay, P., & Fitzsimons, E. (2018). Development and predictors of mental ill-health and wellbeing from childhood to adolescence. *Social Psychiatry and Psychiatric Epidemiology*, *53*, 1311-1323. https://link.springer.com/article/10.1007/s00127-018-1604-0

Peeters, N., van Passel, B., & Krans, J. (2022). The effectiveness of schema therapy for patients with anxiety disorders, OCD, or PTSD: A systematic review and research agenda. *British Journal of Clinical Psychology*, *61*(3), 579-597. https://doi.org/10.1111/bjc.12324

Pugh, M. (2015). A narrative review of schemas and schema therapy outcomes in the eating disorders. *Clinical psychology review*, *39*, 30-41. https://doi.org/10.1016/j.cpr.2015.04.003

Ryff, C. D. (2018). Well-Being With Soul: Science in Pursuit of Human Potential. *Perspectives on Psychological Science*, *13*(2), 242-248. https://doi.org/10.1177/1745691617699836

Ryff, C. D., & Singer, B. (2010). Psychological Well-Being: Meaning, Measurement, and Implications for Psychotherapy Research. *Psychotherapy and psychosomatics*, *65*(1), 14-23. https://doi.org/10.1159/000289026

Sarafraz, M. R., Chavoshi, H., & Alinaghi, M. (2019). Social networks and students: educational performance, psychological well-being, and mental health. *International Journal of School Health*, *6*(3), 1-6. https://intjsh.sums.ac.ir/article_45587.html

Sarhang, M., Hosseini Nasab, S. D., & Panah Ali, A. (2022). The Effectiveness of Logo Therapy on the Psychological Well-being, Communication Skill and Maternal Parenting Stress of Mothers of Children with Intellectual Disability. *Applied Family Therapy Journal (AFTJ)*, *3*(3), 388-417. https://doi.org/10.61838/kman.aftj.3.3.23

Şenkal Ertürk, İ., Kahya, Y., & Gör, N. (2020). Childhood Emotional Maltreatment and Aggression: The Mediator Role of the Early Maladaptive Schema Domains and Difficulties in Emotion Regulation. *Journal of Aggression, Maltreatment & Trauma*, *29*(1), 92-110. https://doi.org/10.1080/10926771.2018.1541493

Sepehri, M., & Kiani, Q. (2020). The Relationship between Cognitive Emotion Regulation and Addiction Tendency: The Mediating Roles of Social and Emotional Loneliness and Early Maladaptive Schemas [Research]. *Research on Addiction*, *14*(56), 313-338. https://doi.org/10.29252/etiadpajohi.14.56.313

Simpson, A., & Campbell, L. (2013). *The Oxford Handbook of Close Relationships*. Oxford University Press. https://doi.org/10.1093/oxfordhb/9780195398694.001.0001

Stevenson, J. C., Millings, A., & Emerson, L.-M. (2019). Psychological Well-being and Coping: the Predictive Value of Adult Attachment, Dispositional Mindfulness, and Emotion Regulation. *Mindfulness*, *10*(2), 256-271. https://doi.org/10.1007/s12671-018-0970-8

Taylor, C. D. J., Bee, P., & Haddock, G. (2017). Does schema therapy change schemas and symptoms? A systematic review across mental health disorders. *Psychology and Psychotherapy: Theory, Research and Practice*, *90*(3), 456-479. https://doi.org/10.1111/papt.12112

Verzeletti, C., Zammuner, V. L., Galli, C., & Agnoli, S. (2016). Emotion regulation strategies and psychosocial well-being in adolescence. *Cogent Psychology*, *3*(1), 1199294. https://doi.org/10.1080/23311908.2016.1199294

Young, J. E., Klosko, J. S., & Weishaar, M. E. (2006). *Schema therapy: A practitioner's guide*. guilford press. https://books.google.com/books?hl=en&lr=lang_en&id=1x7TDwAAQBAJ&oi=fnd&pg=PP1&dq=Schema+therapy:+A+practitioner%27s+guide.&ots=P0qUbVDIIR&sig=HKWE9cHkopG36jw2H-DLRgq0DLQ

Zabihollahzadeh, F., Rashvand, P., & Nemattavousi, M. (2019). Comparing early maladaptive schemas, emotional regulation and coping strategies in patients with multiple sclerosis and healthy people [Analysis]. *Rooyesh-e-Ravanshenasi Journal(RRJ)*, *8*(4), 93-100. http://frooyesh.ir/article-1-1204-en.html

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