University Students’ Early Maladaptive Schemas’ Prediction of Their Mindfulness Levels

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Abstract

Objective: The aim of this study is to determine whether university students’ early maladaptive schemas predict their mindfulness levels or not. Method: The study was carried out in the relational screening model. The study group consisted of 293 university students; 237 (80.9%) females and 56 (19.1%) males. “Mindful Attention Awareness Scale (MAAS)”, developed by Brown and Ryan (2003) and adapted into Turkish by Özyeşil, Arslan, Kesici and Deniz (2011), and “Young Schema Scale-Short Form 3” developed by Young et al. (2003) and adapted into Turkish by Soygüt, Karaosmanoğlu and Çakır (2009) were used to gather the data for the study. Results: According to the results obtained from the study, it was found out that there is a significantly negative relation between the mindfulness and the schemas, except for the punitiveness and unrelenting standards. However, defectiveness and pessimism schemas were found to be the predictors of university students’ mindfulness levels. Conclusion: Preventing early maladaptive schemas from being triggered off is necessary in order to increase the mindfulness levels of the students. Parents need to avoid negative parent attitudes that trigger off the existence of early maladaptive schemas for the sake of this preventive study. The parents need to meet their children’s needs within realistic limits. Especially psychological needs need to be met moderately. The needs need to be met within realistic limits regularly and in a balanced way.

Key words: Mindfulness, Early maladaptive schemas, Awareness and Schema

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1. Introduction

Mindfulness skills of the young individuals need to be improved in order to raise a mentally healthy youth with high healthy adult qualifications. When the carried studies have been examined, it has been found out that mindfulness is negatively related to many negative variables like depression, anxiety, stress and dependence (Ülev, 2014; Demir, 2014; Arslan, 2017). Due to this, identifying the variables that may prevent the mindfulness levels of the individuals is highly important. It may be stated that university students’ early maladaptive schemas are an obstacle to their mindfulness (Thimm, 2017).

Young et al. (2009) stated that some emotional needs of the individuals cannot be met exactly in their early years and the same individuals may experience a kind of traumatic and compelling vital incidents. The cognitive patterns that may affect the individual himself/herself, the relations he/she established, and his/her whole life in short are called early maladaptive schemas and these schemas are a result of not being able to meet individual’s core needs and the negative experiences he/she had. Early maladaptive schemas begin to exist in childhood and puberty. It may be stated that early maladaptive schemas occur as a result of negative experiences with the parents, traumatic life experiences and the unmet core needs. Early maladaptive schemas the individual had may be triggered off in any period of his/her adolescence, as well. Negative emotions like anger, guilt, anxiety, and stress occur when the schemas are triggered off (Young et al., 2009).

When the origins of the early maladaptive schemas are investigated, core emotional needs (Kesici, 2008) early childhood experiences, prevention of the needs, traumas, and exaggerated care are found there (Young et al., 2009). Early maladaptive schemas were divided into five dimensions by Young et al. (2009). There is a total of eighteen early maladaptive schemas in these five dimensions. Isolation and rejection dimension consists of defectiveness, emotional deprivation, abandonment, social isolation, and mistrust schemas. While impaired autonomy and performance dimension consists of vulnerability, dependence, enmeshment, and failure schemas, impaired limits dimension consists of entitlement and insufficient self-control schemas. Other directedness dimension consists of subjugation, self-sacrifice, and approval-seeking schemas. Overvigilance and inhibition dimension consists of pessimism, emotional inhibition, unrelenting standards and punitiveness schemas. It may
be stated that individual’s early maladaptive schemas usually affect his/her daily vital incidents. Some of the schemas make the individual take the right decision quickly and not reconsider the details of the events he/she is confronted with. On the contrary, early maladaptive schemas may prevent the individual from rational thinking, evaluation and decision making and they may cause inaccurate processing in some cases the individual encounters (Lapsekili and Ak, 2012; Ak et al., 2012; Kesici, 2014; Kesici, 2015). Therefore, individuals need to improve their mindfulness skills in order to be able to make effective decisions, improve their problem-solving skills, acquire conflict solving and stress coping skills and apply those skills in life (Özyeşil, Deniz, and Kesici, 2013).

The term, mindfulness, may be expressed as a way of directing attention which takes its source from Eastern tradition and Buddhism (Özyeşil, Arslan, Kesici, and Deniz, 2011). Brown and Ryan (2003) defined mindfulness as individual’s attentiveness and a state of awareness of the present time and situations. Mindfulness is focusing attention on the present time and events without judgment. The individual needs to evaluate and focus on the present time and events with acceptance, as well (Brown and Ryan, 2003; Kabat-Zinn, 2003). Although mindfulness is an eastern originated term, it also has been used in western in recent years (Kabat-Zinn, 2003). When the literature was examined, it was found out that the number of studies on mindfulness has been rising day by day. Individuals rarely experience mindfulness and they may experience the process called indifference or absentmindedness more frequently. However, the individual completely focuses on the present time and is aware of the present experiences with acceptance in the state of mindfulness (Özyeşil et al., 2011).

Many positive effects of high mindfulness levels may be mentioned. Ülev (2014) stated in her study that there is a significantly negative relation between mindfulness and depression, anxiety, and stress. Demir (2014) pointed out in his study which was carried out to investigate the effect of the mindfulness based education program on depression and stress that there is a considerable decrease in the university students’ depression and stress scores at the end of the program. There are also other studies available in literature showing that there is a highly negative relation between mindfulness and the variables like depression, anxiety, and stress (Anderson, Lau, Segal, and Bishop, 2007; LePera, 2011; Desrosiers, Vine, Klemansk, and Nolen-Hoeksema, 2013).

Bowen and Enkema (2014) stated in their study that there is a considerably negative relation between mindfulness and dependence. Arslan (2017) pointed out in her study that university students’ mindfulness levels are negatively related to internet addiction. Likewise, it is stated in a study that there is a close negative relation between teenagers’ problematic internet uses and their mindfulness levels (Şehidoğlu, 2014). The other studies carried out seem to support the negative relation between internet addiction and mindfulness (Yao, Chen, Chiang-shan, Hare, and Zhang, 2017; Calvete, Gamez-Guadix, and Cortazar 2017).

When the results of the mindfulness studies mentioned above are evaluated together, it is considered that individuals with high mindfulness levels have lower depression, anxiety and stress levels and they may have less problems with addictions. When the reverse of this case is considered; that is, it may be stated that individuals with low mindfulness levels may have higher psychiatric symptom levels (Ramel, Goldin, Carmona, and McQuaid, 2004; Kuyken et al., 2008). In order to be healthy adults, individuals’ mindfulness skills need to be improved. Therefore, it is thought that determining the variables affecting mindfulness is crucial. It may be mentioned that there are multi-dimensional variables available affecting individuals’ mindfulness. Early maladaptive schemas were discussed as variables affecting mindfulness in this study. Early maladaptive schemas may be triggered off, and with these schemas, maladaptive childhood modes, maladaptive coping modes and internalized parent modes occur as a result of exaggerated care or no care, nonfunctional parent attitudes, unmet or exaggeratedly met needs, and experienced traumas (Genderen, Jacob, and Seebauer, 2014). Individuals may not activate healthy adult mode unless those modes are healed. Hence, mindfulness skill which is thought to be a significant component of healthy adult mode may be considered as a way of meeting individuals’ core needs moderately, functioning parent attitudes and improving maladaptive coping modes. Mindfulness skills need to be improved in order to make the adults focus on the present, improve the feelings of understanding, mercy and affection towards themselves, and evaluate the events happening around them accurately. When the related literature was examined, it was found out that mindfulness studies have been used as a treatment method for some psychiatric disorders (Shapiro, Schwartz, and Bonner, 1998; Nykliček, Irrmischer, 2017; Helmes, Ward, 2017).

When the literature was scanned, it was found out that there have been few studies available investigating early maladaptive schemas and mindfulness together. Shorey, Brasfield, Anderson, and Stuart (2015b) stated in their study that there is a significantly negative relation between early maladaptive schemas and mindfulness. Thimm (2017) stated the same relation in his research, as well.

In this study, it is aimed to determine the relation between the university students’ early maladaptive schemas and their mindfulness levels and to find out whether early maladaptive schemas predict mindfulness or not.
2. Method

2.1 Research Model
Relational Screening which is one of types of General Screening Model was used in this study. Relational Screening Model is a research approach which aims to identify whether there exists a variation together between more than a variable or not; and identify the level of the variation if it exists.

2.2 Study Group
The study group of this research is comprised of the students studying at Konya Necmettin Erbakan University, Ahmet Keleşoğlu Faculty of Education. The participants consisted of a total of 293 students; 237 females (80.9%) and 56 males (19.1%). 15 person with psychiatric diagnosis and continued treatment were excluded from the study group. The participants consisted of a total of 278 students; 230 females (82.7%) and 48 males (17.3%). The average age of study group is 22.19. The students participated in the study voluntarily.

2.3 Data Collection Tools
Mindful Attention Awareness Scale (MAAS): The scale was developed by Brown and Ryan (2003) and its Turkish validity and reliability study was carried out by Özyeşil, Arslan, Kesici, and Deniz (2011). Mindful Attention Awareness Scale (MAAS), developed by Brown and Ryan (2003), consists of a total of 15 items. MAAS has a single factor structure and it offers a single total score. High scores obtained from the scale indicate high mindfulness levels. MAAS is a 6 leveled likert type scale. Both exploratory and confirmatory factor analyses were applied to measure the construct validity of the scale. MAAS showed a single factor structure in its exploratory factor analysis. The factor loading values vary between .27 and .78. Consistency indexes confirmed that MAAS showed a single factor structure according to the confirmatory factor analysis results. Internal consistency coefficient of the scale is .82. Total item correlations obtained from the scale vary between .25 and .72. Test-retest reliability of the MAAS was administered twice with an interval of 4 weeks between the two stages of administration and there found to be .81 relation between the two tests. The Big Five Personality Test, Permanent Mood Scale, Mindful Attention Awareness-Unawareness Scale, and Self-consciousness Scale were administered to measure the criterion-related validity of the MAAS and significant relations were determined among them.

According to the total item correlation result carried out for the MAAS by Özyeşil, Arslan, Kesici and Deniz (2011), there existed a relation over .40 for all the items of the scale. Item factor loadings vary between .48 and .81 for each item of the MAAS. Cronbach Alpha internal consistency coefficient of the scale was calculated as .80 and its test-retest correlation was calculated as .86. Cronbach Alpha internal consistency coefficient which was calculated for the reliability of the scale based on item analysis is .80 and its test-retest correlation is .86.

Young Schema Scale-Short Form 3: Young Schema Scale-Short Form 3, developed by Young et al., (2009), was conducted with the purpose of determining early maladaptive schemas. Turkish validity and reliability study of the scale was carried out by Soygüt, Karaosmanoğlu and Çakır (2009). The Scale consists of 18 sub dimensions belonging to 5 basic schemas. There are 90 expressions available covering 18 dimensions. Each item of the scale is rated on 6 likert scale. Each subscale consists of 5 items in the original form of the scale and based on these scores obtained from the subscales may vary between 5 and 30. Principal Component Analysis and Descriptive Factor Analysis were carried out to determine the construct validity of the scale. Based on the findings, a 15-factored structure existed at the beginning; however, a 14- factored structure was observed to be interpreted. Internal consistency coefficient of the scale was determined to vary between α =.63-.80 for schema domains and α =.53-.81 for schema dimensions. Test-retest reliability of the scale varies between r = .66-.83 (p<.01) for schema domains while it varies between r =.66-.82 (p<.01) for schema dimensions.

2.4 Data Analysis
Pearson Product-Moment Correlation Coefficient Technique was applied in the study with the aim of determining the relation between university students’ early maladaptive schemas and their mindfulness levels. Stepwise Technique of Multiple Regression Analysis was used to determine how much of the variation related to mindfulness levels of the university students is predicted by their early maladaptive schemas.

3. Findings
In this part, there are findings obtained from the result of statistical analyzes of the gathered data.
Table 1. The Relation Between Early Maladaptive Schemas and Mindfulness

<table>
<thead>
<tr>
<th>Mindfulness</th>
<th>Vulnerability</th>
<th>Pessimism</th>
<th>Emotional deprivation</th>
<th>Failure</th>
<th>Social isolation/mistrust</th>
<th>Emotional inhibition</th>
<th>Approval-seeking</th>
<th>Enmeshment/dependence</th>
<th>Insufficient self-control</th>
<th>Self-sacrifice</th>
<th>Abandonment</th>
<th>Defectiveness</th>
<th>Unrelenting standards</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>-.271**</td>
<td>-.331**</td>
<td>-.248**</td>
<td>-.269**</td>
<td>-.291**</td>
<td>-.197**</td>
<td>-.132**</td>
<td>-.309**</td>
<td>-.248**</td>
<td>-.241**</td>
<td>-.342**</td>
<td>-.337**</td>
<td>-.119</td>
</tr>
<tr>
<td>p &lt; .01</td>
<td>** p &lt; .01</td>
<td>** p &lt; .01</td>
<td>** p &lt; .01</td>
<td>** p &lt; .01</td>
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<td>** p &lt; .01</td>
<td>** p &lt; .01</td>
<td>** p &lt; .01</td>
<td>** p &lt; .01</td>
</tr>
</tbody>
</table>

When Table 1 was examined, it was found out that there is a weak negative relation between mindfulness and the vulnerability against threat sub dimension of early maladaptive schemas (r = -.271, p < .01).

It was found out that there is a medium negative relation between mindfulness and the pessimism sub dimension of early maladaptive schemas (r = -.331, p < .01).

It was found out that there is a weak negative relation between mindfulness and the emotional deprivation sub dimension of early maladaptive schemas (r = -.248, p < .01).

It was found out that there is a weak negative relation between mindfulness and the failure sub dimension of early maladaptive schemas (r = -.269, p < .01).

It was found out that there is a weak negative relation between mindfulness and the social isolation/mistrust sub dimension of early maladaptive schemas (r = -.291, p < .01).

It was found out that there is a weak negative relation between mindfulness and the emotional inhibition sub dimension of early maladaptive schemas (r = -.197, p < .01).

It was found out that there is a weak negative relation between mindfulness and the approval-seeking sub dimension of early maladaptive schemas (r = -.132, p < .05).

It was found out that there is a medium negative relation between mindfulness and the enmeshment/dependence sub dimension of early maladaptive schemas (r = -.309, p < .01).

It was found out that there is a weak negative relation between mindfulness and the exceptionalism/insufficient self-control sub dimension of early maladaptive schemas (r = -.167, p < .01).

It was found out that there is a weak negative relation between mindfulness and the self-sacrifice sub dimension of early maladaptive schemas (r = -.241, p < .01).

It was found out that there is a medium negative relation between mindfulness and the abandonment sub dimension of early maladaptive schemas (r = -.342, p < .01).

It was found out that there is a medium negative relation between mindfulness and the defectiveness sub dimension of early maladaptive schemas (r = -.337, p < .01).

Table 2. Variables Predicting Mindfulness

<table>
<thead>
<tr>
<th>Model</th>
<th>B</th>
<th>B.S.E.</th>
<th>β</th>
<th>t</th>
<th>p</th>
</tr>
</thead>
<tbody>
<tr>
<td>Constant</td>
<td>67,646</td>
<td>1,797</td>
<td>-.322</td>
<td>37,640</td>
<td>.001</td>
</tr>
<tr>
<td>Defectiveness</td>
<td>-900</td>
<td>.167</td>
<td></td>
<td>-5,384</td>
<td>.001</td>
</tr>
<tr>
<td>R² = .332</td>
<td>R²(Adj) = .104</td>
<td>F=28,988</td>
<td>p=.001</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Constant</td>
<td>71,617</td>
<td>2,091</td>
<td>-.322</td>
<td>34,258</td>
<td>.001</td>
</tr>
<tr>
<td>Defectiveness</td>
<td>-662</td>
<td>.177</td>
<td></td>
<td>-3,740</td>
<td>.001</td>
</tr>
<tr>
<td>Pessimism</td>
<td>-493</td>
<td>.140</td>
<td>-.222</td>
<td>-3,509</td>
<td>.001</td>
</tr>
<tr>
<td>R² = .382</td>
<td>R²(Adj) = .139</td>
<td>F=21,306</td>
<td>p=.001</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

A: Defectiveness

B: Defectiveness Pessimism

When Table 2 was analyzed it was seen that defectiveness and pessimism sub dimensions of early maladaptive schemas predict mindfulness. Defectiveness schema explains 10 % of the total variation related to mindfulness (p<.001). Defectiveness and pessimism schemas together explain 13.9 % of the total variation related to mindfulness.
4. Discussion
When the related literature was scanned, it was found out that there are few studies examining early maladaptive schemas and mindfulness (Shorey, Anderson, and Stuart, 2015a; Shorey et al., 2015b; Thimm, 2017; Gojani, Masjedi, Khaleghipour, and Behzadi, 2017; Martin et al. 2017). Therefore, this study is thought to contribute to the related literature. There are many studies available indicating that there is a negative relation between mindfulness and negative variables like depression, anxiety, stress, and addiction (Ülev, 2014; Demir, 2014; Bowen and Enkema, 2014; Arslan, 2017). It may be noted that mindfulness has a significant effect on individuals to become healthy adults. In this study, the results obtained about the relation between university students’ early maladaptive schemas’ and their mindfulness levels and how much of the variation related to mindfulness is predicted by early maladaptive schemas were discussed.

Based on the study result, it was determined that there is a considerably negative relation between mindfulness and the schemas of vulnerability against threats, pessimism, emotional deprivation, failure, social isolation, emotional inhibition, approval-seeking, enmeshment/dependence, insufficient self-control, self-sacrifice, abandonment, and defectiveness. Shorey et al. (2015b) stated in their study that there is a strong negative relation between males’ mindfulness levels and their early maladaptive schemas, except for emotional deprivation, entitlement, and unrelenting standards schemas. In another study carried out related to females’ mindfulness levels and their early maladaptive schemas, it was stated that there is a significantly negative relation between females’ mindfulness levels and their early maladaptive schemas, except for the abandonment, emotional deprivation, enmeshment, entitlement, emotional inhibition, and pessimism schemas (Shorey et al., 2015a). It is obvious that the mentioned studies support the findings of this study.

The fact that there is a significantly negative relation between individuals’ mindfulness levels and their early maladaptive schemas leads to the idea that increasing mindfulness level may be an extremely complicated process. The early maladaptive schemas of the individual may be triggered of very frequently in his/her living process. Healthy adult mode is one of the most significant features the individuals need to have in order to solve those triggered schemas. However, it is seen that mindfulness level decreases as early maladaptive schemas increase based on the result analysis of this study. It can be concluded the needs of parent attitudes, trust and justice, love and respect, and setting realistic limits which affect those schemas are required to be met moderately in order to decrease early maladaptive schemas. It can be stated that this is because when the needs aren’t met moderately, the possibility of schemas’ trigger may increase (Young et al., 2009). Mindfulness may help individuals turn negative feelings and perceptions stemming from triggered early maladaptive schemas into positive and focus on the present time.

It may be stated early maladaptive schemas is one of the important obstacles preventing individual from focusing the present time and events. It may be expressed that when the early maladaptive schemas are treated, one of the obstacles to mindfulness can be eliminated and the individual can focus on the present time more and approach the healthy adult mode a little more due to the increasing mindfulness skill.

Early maladaptive schemas and the mode term are the concepts that are in one within the other and it is highly difficult to separate early maladaptive schemas from the mode therapy (Jacob, Genderen, and Seebauer, 2014). This is because individuals may develop maladaptive modes to be able to cope with early maladaptive schemas. It may be stated that individuals with low mindfulness levels cannot enact healthy adult mode together with those maladaptive coping modes they developed. It is thought that maladaptive childhood, parent and coping modes are need to be decreased to enable individuals to enact healthy adult mode. It may be stated that focusing on the mindfulness may decrease these modes. Early maladaptive schemas may be triggered when the individuals cannot enact the healthy adult mode and it may be stated that these triggered schemas may decrease their mindfulness levels (Thimm, 2017). It may be thought that individuals’ vulnerability against threats needs to be increased, mistrust needs to be decreased, positive properties need to be emphasized instead of negative ones, feeling of abandonment needs to be eliminated and the fact that every mistake has not hot a pay needs to be emphasized in order not to trigger off early maladaptive schemas of the individuals and to increase their mindfulness levels. Meanwhile, individuals need to be made feel that they are not isolated, the fact that feelings are also important besides mind needs to emphasized, they need to be shown empathy and understanding, they need not to be criticized harshly, they need to be given advice to make up their deficiency, their self needs to be improved, and their unrelenting standards need to be decreased. All these may contribute to improve mindfulness (Young et al., 2009).

Based on the study result, the deficiency and pessimism early maladaptive schemas were determined to predict mindfulness. It may be stated that individuals with early maladaptive schema focus on the negative invalidating the positive. Individuals may think and feel that they are deficient with excessive criticism which is available in deficiency schema and it is thought that deficiency schema’s predicting mindfulness may be explained with this fact. As the greatest deficiency is individual’s belief that he/she is deficient, university students may think that they cannot carry out some competencies and skills. This belief may contain the mistake of validating the negative by invalidating the positive. Due to this, university students may not show their
competencies and skills exactly. Individuals may not know how to react and what to do in case of excessive criticism which may stem from deficiency schemas. Herein, deficiency schema may prevent individuals from realizing their competencies and skills by affecting their mindfulness levels negatively. Hence, it is thought that it is important to provide students with the chance of recognizing themselves by realizing their positive and negative properties in order to be able to increase their mindfulness levels.

It may be stated that individuals who recognized themselves and increased their mindfulness levels may be aware of their real deficiencies and have the tendency of making up these deficiencies. It may be thought that individuals with deficiency schema may have nonresistance, detached protector and overcompensation modes of the maladaptive coping modes and the individual may show anyone of these modes. It may be thought that improving individual’s awareness about the damages of maladaptive coping modes to the individual may be beneficial and this awareness may be raised by means of win-lose technique. It may be noted that individuals’ mindfulness levels may increase automatically in this way and individuals may improve their coping skills owing to this increase (Büyükkaragöz and Kesici, 1998; Izgar, Gürsel, Kesici and Negiş, 2004; Yalçın, Kavaklı and Kesici, 2017)

In this study, it may be thought that individuals with detached protector mode may be unaware of their potentials, avoid, and prefer to behave in a passive way instead of taking responsibility when the deficiency schema, which is a predictor of mindfulness, is examined in terms of modes that can trigger off it. The individual with dominant overcompensation mode may suppress himself/herself putting effort into unrelenting standards and reaching them and the individual may switch to avoidance mode again by postponing when he/she understands that he/she cannot realize these unrelenting standards. However, individual may show depressive behaviors in surrender mode as he/she believes he/she is always deficient, submits the current situation and accepts the criticisms. The individual may feel prevented since his/her psychological needs cannot be met. Therefore it may be thought that if the individuals in surrender mode increase their mindfulness levels, they may have control over their depressive situation. Individuals’ mindfulness skills and the possibility of switching to healthy adult mode may increase as the overcompensation, surrender and avoidance modes increase.

It may be stated that individuals with pessimism early maladaptive schema have the mistakes of subjective evaluations they bring from their past and always thinking negatively. It can be estimated that carrying these mistakes of subjective evaluations and thinking negatively to the future and worrying about the future may decrease individuals’ mindfulness levels. The fact that pessimism schema predicts individuals’ mindfulness levels may thought to be explained in this way. It can be stated that individuals who cannot leave their negative experiences behind and have a pessimistic point of view towards future may have low mindfulness levels.

It may be thought that the effect of childhood and maladaptive parent modes may be decreased and perceptions of the individuals may be changed by administering Empathic Confrontation and Reality Test (Young et al., 2009; Arntz and Jacob, 2016) to the individuals with high levels of defectiveness and pessimism schemas. Thus, individuals’ level of pessimism and defectiveness schemas may be decreased and their feelings may change positively. This may contribute to the increase in their mindfulness levels.

5. Conclusion and Recommendations
Based on the results, it was concluded that the schemas of vulnerability against threats, pessimism, emotional deprivation, failure, social isolation, emotional inhibition, approval-seeking, enmeshment/dependence, insufficient self-control, self-sacrifice, abandonment, and deficiency are significantly related to mindfulness in a negative way. Deficiency and pessimism schemas were determined to be the predictors of mindfulness.

Preventing early maladaptive schemas from being triggered off is necessary in order to increase the mindfulness levels of the students. Parents need to avoid negative parent attitudes that trigger off the existence of early maladaptive schemas for the sake of this preventive study. The parents need to meet their children’s needs within realistic limits. Especially psychological needs need to be met moderately. The needs need to be met within realistic limits regularly and in a balanced way.

The parents need to avoid excessive criticism in order to decrease students’ schema of deficiency. They need to appreciate their children with regard to the potentials they show. Especially parents need to support their children in finding out their strengths and potentials.

The parents need to mention positive incidents as well as negative ones and prevent the mistake of thinking negatively by always pointing out both positive and negative sides of an incident in order to prevent the emergence of pessimism schema.

Some problems the individuals experience may stem from childhood modes, maladaptive adult modes, and maladaptive coping modes rather than an objective incident. Individual’s awareness of these modes and his/her change is an important point for the solution. It can be mentioned that the increase in individual’s awareness may contribute to the increase in his/her mindfulness level, as well.
Limits of the Study

Limits of the study are: the study group was limited with university students, the number of female participants was high, and the study was carried out with healthy university students without any psychiatric diagnosis.

References


