

Maladaptive Schema Scale Version 1.4 (MSS-v1.4)

Schema Descriptions

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A comprehensive questionnaire for schemas related to psychopathology: The Maladaptive Schema Scale - Version 1.4

The Maladaptive Schema Scale Version 1.4 (MSS-v1.4) is designed to meet the needs of mental health practitioners, building upon the foundational principles of the Young Schema Questionnaire (YSQ) while integrating cutting-edge psychometric advancements to enhance reliability and validity. This document provides a description of each of the 27 schemas to help to guide clinicians in their interpretation.

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Abandonment / Anxious Attachment: “People will leave me”

This schema involves a fear of being abandoned or rejected, and in the context of romantic relationships, often manifests as insecurity about a partner’s love and commitment. People with this schema anticipate that their meaningful relationships will not last. As such, they tend to be hypersensitive to perceived cues of abandonment and can misinterpret others’ intentions in close relationships. They may excessively seek reassurance and validation from others, worry excessively about their relationships, and display clingy or dependent behaviours. They often perceive the availability of others to provide support to be unreliable and unpredictable. The schema also involves excessive worry about the absence of a significant relationship and heightened sensitivity to issues of reciprocity, commitment and care.

Examples of what maintains the schema:

- As this schema involves pervasive expectations that others will become unavailable, abandon or reject them, people with this schema might engage in behaviours aimed at keeping others close, such as being clingy or reassurance-seeking. The behaviours can lead to others feeling smothered, thereby pushing them away, leading to the very abandonment or rejection they sought to avoid.
- People with this schema may have relationships with partners who are unreliable or avoidant, thereby reinforcing the schema.

Examples of beliefs, assumptions or reactions related to the schema:

- I fear that my important relationships will end unexpectedly.
- I worry that people I love can't be there for me in a committed way.
- I feel confident that other people will be there for me when I need them. (Reversed)
- I worry about losing people that I rely on.

Possible origins of schema:

- This schema and attachment style may develop from early experiences with caregivers who were inconsistently available or unpredictably responsive.
- Caregivers were unstable or frequently withdrawn from the child, as may occur if a caregiver experienced depression, substance abuse, or anger, for example.
- The loss of a caregiver at an early age. For example, with the illness or death of a parent, or separation of parents.



Excessive Self-Reliance / Avoidant Attachment: “I can only rely on myself”

This schema is characterised by a wariness of intimacy and a reluctance to depend on others, often stemming from a desire to avoid vulnerability. People with this schema are reluctant to seek support or closeness from others and tend to keep personal issues to themselves, fearing being perceived as needy or becoming too dependent. They may minimise the importance of relationships, or rationalise that others have their own problems and should not be burdened further. There may be an emphasis on personal interests over cultivating relationships, an autonomous approach to handling life's challenges and a general avoidance of deep emotional connections, which they may find uncomfortable. People with this schema may fear being smothered or others becoming over-involved in their private matters.

Examples of what maintains the schema:

- People with this schema may distance themselves or withdraw from relationships to cope with their discomfort with interpersonal intimacy. When a partner responds to this by drawing closer, the discomfort with intimacy and need to maintain distance are perpetuated.
- Some people with this schema cope with this discomfort by avoiding intimate relationships altogether, and therefore do not have the opportunity to have corrective experiences to challenge the validity of the schema.
- The excessive need for self-reliance characteristic of the schema can be reinforced when the person successfully manages challenges alone and encounters difficulties when working with others.

Examples of beliefs, assumptions or reactions related to the schema:

- I always depend on myself and never on other people.
- I feel uneasy when people get too close.
- I feel extremely uncomfortable depending on other people.
- The last thing I want to do is bother people with my problems.

Possible origins of schema:

- This schema and attachment style may develop from early experiences with caregivers who were inconsistently responsive, or were rejecting or neglectful in response to the child's expression of a need for closeness or support.
- Caregivers who were dominating, overinvolved or smothering, as the child learns that interpersonal closeness is uncomfortable;
- Caregivers who actively discouraged dependence, either through overt messages about the importance of independence or through behaviours that penalised seeking connection;
- Caregivers who were emotionally distant, unavailable, or dismissive of the child's emotional needs, as this teaches the child to rely on themselves for comfort and support;
- Caregivers who are interpersonally dependent, as this can lead the child to overcorrect and only rely on themselves.

Emotional Deprivation: “People aren't there for me”

This schema involves the expectation that one's practical or emotional needs will not be adequately met within personal relationships. People with this schema often believe that others are generally inattentive to their emotional requirements and are not reliably present when support or advice is needed. This often coincides with feelings of discomfort about expressing emotions or discussing personal matters with others due to the expectation that others won't be supportive, reinforcing a sense of isolation. This expectation can drive a heightened sensitivity to possible evidence of neglect. Though this schema tends not to be associated with emotions of high intensity, feelings of emptiness or loneliness may be described. Relationships may be experienced as lacking depth and genuine connection, leading to pervasive feelings of being neglected and disconnected from others. People with this schema often describe having a 'normal' childhood, making the emotional deprivation schema one of the more challenging to detect.

Examples of what maintains the schema:

- People with this schema may reenact the experience of deprivation, often having relationships with partners who are emotionally unavailable and thereby reinforcing the schema.
- Even in relationships with an emotionally available partner, people with this schema tend not to communicate their needs or emotions and subsequently feel hurt or disappointed as their needs go unmet, reinforcing the schema.

Examples of beliefs, assumptions or reactions related to the schema:

- I have others I can depend on for advice and emotional support. (Reversed)
- If I was in trouble, I wouldn't know who to call.
- Other people don't care about my emotional needs.
- I feel unsupported by others, so I wouldn't share my emotions.

Possible origins of schema:

- Emotional neglect during childhood is one of the most significant contributors to this schema. If caregivers fail to respond adequately to a child's emotional needs, the child may grow up feeling that emotional support and understanding from others are not available or forthcoming.
- Emotional neglect during childhood can present in different ways, such as a caregiver who was inconsistently available, or a caregiver who was physically or emotionally absent due to separation, divorce, death, health issues or chronic preoccupation with other issues.
- Experiences of rejection or abandonment by caregivers or important peers during childhood can contribute to the development of the belief that others will not meet one's needs.



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- Children who feel overshadowed by siblings or other family members, perhaps due to the other's needs, illnesses, or characteristics being prioritised, can develop a sense of deprivation.

Mistrust of Others: “I cannot trust people”

This schema involves the expectation that people are deceitful, unreliable and likely to hide their true motives. People with this schema typically believe that dishonesty and betrayal are common in interactions, fostering a general suspicion and wariness towards others. Feelings of anxiety and threat are frequently associated with this schema, alongside a heightened sensitivity to any signs of deception in others, even without objective evidence of such. This schema can impair even casual and friendly relationships, as their suspicion, guardedness, and defensiveness can be abrasive. Consequently, people with this schema may experience interpersonal difficulties or low levels of social support.

Examples of what maintains the schema:

- Heightened suspiciousness can lead to an abrasiveness in interpersonal interactions, which others may respond to by distancing themselves or hiding their intentions, thereby reinforcing the schema.
- Some people avoid self-disclosures or relationships altogether to protect themselves from the anticipated hurt caused by the expected betrayal. Therefore, they do not have the opportunity to have corrective experiences that challenge the validity of the schema.

Examples of beliefs, assumptions or reactions related to the schema:

- People usually conceal their real intentions.
- I don't trust people.
- I don't believe what people say at face value.
- People usually tell the truth. (Reversed)

Possible origins of schema:

- This schema typically emerges from experiences in childhood or adolescence where the individual directly experienced or repeatedly witnessed lying, cheating, manipulation or deception, usually by someone close to them such as a caregiver.
- Caregivers were distrusting of others and either modelled this to the child or explicitly warned the child not to trust others.



Others are Dangerous / Malevolent: “Other people seek to harm”

A belief in the inherent danger of others, reflecting an expectation that people are generally self-serving and malicious, and it is necessary to anticipate harm and exploitation from them. People with this schema often find themselves on guard or suspicious of others, expecting harm even in situations where it might not be justified. They commonly feel anxious or threatened in social situations and hypervigilant of signs of danger in others. People with this schema often experience significant interpersonal difficulties, as they may misinterpret benign intentions as malicious, or could engage in preemptive defensive behaviours without provocation to protect themselves from anticipated harm.

Examples of what maintains the schema:

- Defensive behaviour in interpersonal interactions can elicit reactions from others that seem to confirm their beliefs that others are malicious, thus reinforcing the schema. For example, by attacking to protect oneself from anticipated harm, the other person may retaliate by attacking in return.
- People with this schema may resonate with and be attracted to abusive partners, thereby experiencing relationships that perpetuate the schema.

Examples of beliefs, assumptions or reactions related to the schema:

- Many people are selfish and unkind.
- People rarely care about the wellbeing of others.
- Violence is a major part of human nature.
- At their core, many people are bad.

Possible origins of schema:

- This schema may develop due to childhood experiences of mistreatment, especially by caregivers or other significant figures.
- Repeated experiences of humiliation or other forms of verbal abuse by caregivers or peers.
- Childhood abuse, particularly when perpetrated within the family.



Social Isolation / Outsider: “I am different and don’t belong”

This schema involves feeling fundamentally different from other people, leading to a sense of not fitting in and rarely connecting with others. People with this schema feel excluded, not just on the level of individual relationships, but also believe that they are outsiders across broader social contexts. Even occasional connections with others do not typically alleviate the overarching experience of alienation and the distinct impression of not belonging with anyone. This perceived difference is typically not celebrated but rather is seen as a barrier to social connection. Individuals may feel that their interests, values, experiences, or characteristics are so different, undesirable or odd that others cannot understand, relate to or like them. As a result, they often feel isolated and lonely and may have low levels of social support.

Examples of what maintains the schema:

- This schema might lead people to misinterpret neutral or ambiguous social cues as alienating, confirming their belief that they are outsiders.
- Surrendering to this schema (behaving, thinking, and feeling as though one truly is different or isolated) can lead to further avoidance, withdrawal, and isolation in order to avoid the pain of anticipated rejection. This limits the opportunity to have corrective experiences in social interactions to challenge the validity of the schema, and limits opportunities for social skills to be practised and improved.
- Some people with the social isolation schema overcompensate for their perceived differences (for example, by making excessive efforts to gain popularity), leading to feelings of inauthenticity, reinforcing the idea that they only fit in because they conceal important parts of themselves.
- The schema can be reinforced by a heightened sensitivity to differences between themselves and others, making them reluctant to interact and connect socially.

Examples of beliefs, assumptions or reactions related to the schema:

- I'm inherently different from everyone else.
- I haven't met anyone that thinks like me.
- I am typically accepted by people. (Reversed)
- I am an outsider.

Possible origins of schema:

- Various experiences during childhood and adolescence, including parental rejection, criticism, or over-protection, can contribute to the development of the social isolation schema.
- Experiences whereby the child's family was observably different from others, for example, due to race, language, religion, or social status, led them to feel different.
- An observable difference between the child and their peers was evident and led them to feel different. For example, if there was a difference in the child's appearance or behaviour, as may be the case for a child experiencing developmental differences such as autism.



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- Bullying or social rejection experienced during childhood.
- Frequent relocation in childhood, preventing the formation of a sense of belonging.
- Cultural or societal factors that perpetuate a feeling of difference.

Defectiveness / Shame: “I am unacceptable”

Central to the defectiveness schema is the belief that one is inherently flawed and inferior, along with the emotion of shame. People with this schema may fear that self-disclosure or revealing themselves to others would lead to rejection as they believe themselves to be unlovable and unworthy of acceptance. The schema is often associated with a hypersensitivity to real or imagined signs of rejection or criticism. Similarly, it can cause one's flaws to be in hyper-focus, overshadowing any recognition of personal strengths or positive qualities. The nature of the perceived flaws may be internally experienced (relating to experiences such as thoughts, urges or emotions) or externally observable (such as concern about social skills or appearance). People with this schema often feel unwanted, self-conscious and insecure around others and have a deep sense of shame about their perceived defects.

Examples of what maintains the schema:

- To protect from the feeling of shame associated with the exposure of one's defectiveness, people with this schema may avoid intimacy, thereby limiting opportunities for disconfirming the schema.
- Because they feel undeserving of love, acceptance or respect, people with this schema may inadvertently “click” with and become involved with critical people who reinforce their feeling of defectiveness.
- Some people may attempt to conceal or overcome their perceived defects by overcompensating with perfectionism, people-pleasing, or arrogant behaviour, which can reinforce the belief that their true self is flawed and unacceptable.
- Cognitive bias can maintain the defectiveness schema by overemphasising factors and experiences that confirm one's perceived defectiveness and dismissing those that are inconsistent, such as personal strengths or positive feedback.

Examples of beliefs, assumptions or reactions related to the schema:

- If people knew the real me, they wouldn't like me.
- I am inherently defective.
- My flaws make me unlovable.
- I have reasons to be ashamed of myself and my character.

Possible origins of schema:

- Critical, shaming, punishing or rejecting caregiving experiences in early life.
- Unfavourable comparisons to others or preferential treatment towards a sibling.
- Being blamed or made to feel like a disappointment by a caregiver.
- Ostracism by peers.
- Childhood abuse.



Vulnerability to Dangerous World: “I should be wary of the unsafe world”

This schema involves an exaggerated fear that catastrophe could occur at any time. This fear may be accompanied by the belief that the catastrophe cannot be prevented and that the consequences will be devastating. Furthermore, people with this schema typically expect that they will be unable to cope with it. The nature of feared catastrophic events can range widely, including illness, natural disasters, financial collapse, climate change or pandemics. This schema is characterised by feelings of anxiety and excessive worrying, related to the belief that the world is unsafe and unstable and serious hazards are inevitable.

Examples of what maintains the schema:

- Hypervigilance and selective attention to disasters through online media can reinforce this schema.
- Avoidance of situations perceived to involve risk, which limits opportunities for disconfirming the schema.

Examples of beliefs, assumptions or reactions related to the schema:

- I'm afraid of venturing too far because there are so many bad things happening.
- The world is safe for me. (Reversed)
- The world is a dangerous and unforgiving place, and I worry it will spiral into catastrophe.
- The world is a bad place and will harm me.

Possible origins of schema:

- Experiences in childhood that involved the excessive presence of danger.
- A significant adult projected intense anxieties onto the child, leading them to believe in a world that is excessively threatening.
- The child was repeatedly warned of the world's dangers or overprotected.
- The home environment was not physically, emotionally, or financially safe, and the child was not protected sufficiently.
- In adulthood or childhood, experiencing or witnessing a serious traumatic event (e.g., a car accident, severe illness, assault).

Dependence: "I can't manage alone"

This schema involves a pervasive and excessive need to be taken care of by others, alongside behaviours and beliefs centred around a lack of self-sufficiency. Individuals with this schema often feel unable to handle daily life on their own, believing that they are not capable of coping. They may have difficulty trusting their own judgements and are indecisive. Typically, there is a heavy reliance on others for support, decision-making, reassurance and validation. People with this schema often feel anxious, helpless or inadequate when faced with the prospect of acting independently, which reinforces the dependence on others for most needs.

Examples of what maintains the schema:

- Being in relationships that reward or reinforce dependent behaviour, including partners who prefer to take a caretaking role, may perpetuate this schema.
- The avoidance of independent coping, which is characteristic of the schema, can lead to a real skills deficit, reinforcing the schema's accuracy. This also limits opportunities for acquiring and practising skills for independent coping.

Examples of beliefs, assumptions or reactions related to the schema:

- I cannot take care of myself, so I need others to take care of me.
- I feel incapable of managing daily tasks without help from others.
- I often worry about making decisions on my own and prefer someone else to make them for me.
- I feel confident making decisions on my own. (Reversed)

Possible origins of schema:

- This schema may be shaped by overprotective caregivers who did too much for the child, preventing them from learning necessary life skills and fostering a sense of dependency rather than encouraging independence.
- Caregivers who frequently criticised the child or undermined their ability to succeed independently.
- Observing and modelling behaviour from caregivers who themselves displayed dependent traits or were in highly dependent relationships.
- Through underprotective parenting or the inadequate provision of guidance, a child may need to become independent prematurely, making decisions and taking on age-inappropriate responsibilities without first establishing a sense of security and confidence in their abilities. This can lead to a lifelong echo, where they feel chronically out of their depth.
- Some family dynamics explicitly encourage dependency for cultural, emotional, or psychological reasons, where independence is viewed negatively or as a threat to family cohesion.



Failure / Achievement Inferiority: “I am not a successful person”

The belief that one is inferior in achievement or status or fundamentally inadequate compared to others. Whether accurate or exaggerated, this belief underpins an expectation that one will inevitably fail in areas of achievement (education, career, relationships, financial status, etc.). There is often intense social comparison and a focus on extrinsic motivators for achievement. People with this schema may be hypersensitive to feedback and focus on their failings while discounting or dismissing areas of strength or accomplishments. Some individuals with this schema may believe their perceived lack of success is due to their own ineptitude, while others may believe it is due to external factors not within their control. External attribution may be protective of self-esteem but can also lead to a sense of helplessness or unfairness.

Examples of what maintains the schema:

- This schema can lead to avoidance of challenges due to the fear of further failure. This avoidance can become a self-fulfilling prophecy, as refusing to engage in challenging activities can limit skills and successes.
- Selective exposure to highly successful individuals on social media may promote unfavourable comparisons.
- Cognitive bias can maintain the failure schema by overemphasising factors and experiences confirming their perceived failure and dismissing those that disconfirm the schema, such as personal strengths or successes.

Examples of beliefs, assumptions or reactions related to the schema:

- Most other people have achieved more than me.
- I feel proud of my accomplishments. (Reversed)
- I feel inferior when I think of the accomplishments of others.
- I compare my achievements with others and feel that I am not as successful.

Possible origins of schema:

- Caregivers who were overly critical or set unrealistically high expectations.
- Frequent unfavourable comparisons with siblings or peers.
- Growing up in environments where achievements were not recognised or praised or where caregivers themselves were highly successful.
- Experiencing significant failures or setbacks during formative years, such as educational or social struggles, can lead children to believe that they are a failure.
- Caregivers who ridiculed failure.
- Excessive exposure to success-focussed social media without adequate contextual framing.
- Comparative lack of skill or achievement compared to peers, especially in an achievement focussed culture or family.



Low Self-Efficacy / Weakness: “I am weak and inept”

Central to this schema is a pervasive doubt in one's ability to successfully handle challenges or solve problems. This schema is characterised by feelings of inadequacy and helplessness, hesitation to engage with challenges, and the sense that tasks are insurmountable and unlikely to be completed. This perception affects the confidence and willingness to take on new challenges, often leading to avoidance behaviours and a self-perception of helplessness or incompetence. People with this schema may view themselves as fragile, easily overwhelmed or incapacitated by stress or difficulties.

Examples of what maintains the schema:

- Individuals with low self-efficacy may avoid challenging tasks, thereby missing opportunities to gain skills and experience, which could otherwise improve their self-efficacy.
- People may procrastinate or delay engaging with challenging tasks, leading to stress and under-performance. This aversive outcome reinforces the accuracy of the low self-efficacy schema.

Examples of beliefs, assumptions or reactions related to the schema:

- If a task is difficult, I'm unlikely to be able to accomplish it.
- I can rarely come up with solutions to my own problems.
- I can handle anything that comes my way. (Reversed)
- Most problems are too hard for me to deal with.

Possible origins of schema:

- Overprotective parenting that prevents a child from facing challenges and learning from failures can inadvertently send the message that the child is not capable of handling difficulties on their own.
- Growing up with caregivers who are overly critical or who frequently dismiss the child's abilities can lead to internalised feelings of inadequacy and incompetence.
- Not receiving positive reinforcement or encouragement when trying new things.
- Repeated experiences of failures or setbacks in earlier life can contribute to a feeling of incompetence.
- Experiences of bullying, especially if frequent and unaddressed, can damage self-esteem and foster feelings of weakness and ineptitude.
- Being unfavourably compared to siblings or peers, particularly in visible and valued domains like academics or sports, can also lead to a persistent sense of inadequacy.



Fatalistic / External Locus of Control: “Fate is in charge, so why bother”

The belief that life's outcomes are primarily governed by external forces and chance rather than personal effort or decisions characterises this schema. People with this schema may have a sense of apathy and resignation towards attempting to shape one's future due to the conviction that personal control is largely an illusion. They often believe that they have minimal influence over events, and that their efforts will not significantly impact their life's trajectory. Feelings of helplessness or powerlessness are commonly associated and can result in a lack of proactive behaviour and a passive approach to life's challenges and opportunities. Successes and failures are typically attributed to external factors such as luck, fate, or other people rather than one's own choices, abilities or actions.

Examples of what maintains the schema:

- The schema can be perpetuated through inaction, leading to situations where individuals feel even less control, further reinforcing a belief in the external determination of events.
- Cognitive bias can confirm the schema, as instances in which external factors determine outcomes tend to be selectively attended to, while the contribution of personal factors is minimised.

Examples of beliefs, assumptions or reactions related to the schema:

- The course of our lives are largely determined by chance; we have very little influence.
- No matter what I do, the outcomes of events are outside my control.
- There is no point trying to influence the future, because outside forces have more influence.
- I am in control of my future. (Reversed)

Possible origins of schema:

- This schema may develop through growing up in a home where events were unpredictable or chaotic.
- Frequent relocations or changes in life circumstances, where a child has no say or control, can reinforce the belief that external circumstances dictate life paths.
- Overbearing or controlling caregivers can prevent children from making their own choices, hindering the development of an internal locus of control.
- If efforts were rarely acknowledged or rewarded, children might conclude that their actions do not matter.
- Repeated experiences of failures or setbacks in earlier life without adequate contextual framing can lead to the belief that success or failure is determined by factors beyond personal control.
- Observing significant adults who themselves exhibit a fatalistic attitude or external locus of control.
- In adulthood or childhood, experiencing a significant trauma or event that transformed one's life can contribute to the development of a generalised sense of powerlessness.

Enmeshment / Diffuse Boundaries: "Emotional intimacy means having few boundaries"

This schema involves the belief that close relationships require a high level of contact to the point where individual boundaries are significantly diminished or absent. Sometimes involves the sense that there are blurry distinctions between the individual and significant others, such as parents, children, friends or partners. There is often an over-identification with each other's emotions and needs, which may reflect an excessive desire to care for, control or merge with the other person. As a result, individuals with this schema typically do not have a strong sense of their own independent identity. There is often over-involvement, or the desire for more involvement with other people, whether the other person reciprocates that desire or not. This schema typically leads to relationships where personal space, privacy, and individual autonomy are compromised under the guise of emotional closeness. There is a tendency to feel and absorb the emotions of others excessively and take responsibility for solving the other person's problems. Relationships are often characterised by dependency, where one or both parties feel they cannot function independently without the other (i.e., codependency).

Examples of what maintains the schema:

- This schema can be perpetuated through relationship dynamics where attempts to impose closeness on others leads to rejection or a clear assertion of boundaries, thereby reinforcing the idea that boundaries and a lack of closeness are the same thing.
- People with this schema may reenact the experience of enmeshment from their family of origin, often being attracted to and having relationships with partners who reinforce this sense of codependency.
- Some people avoid situations that require self-sufficiency or separation from an enmeshed other, thereby limiting the opportunities for developing a separate identity, healthy boundaries and independence.

Examples of beliefs, assumptions or reactions related to the schema:

- I am responsible for the emotions of the person I am closest to.
- With those closest to me, I don't know where my needs and emotions end and where theirs begin.
- I am so close to someone it feels like I have merged with them.
- The needs of the person closest to me consume me.

Possible origins of schema:

- Growing up with parents who were overly involved and intrusive in their children's emotional lives, often under the belief that this was a form of love and care.
- In the family of origin, boundaries were not established or respected.
- A parent being the "best friend" to their child, oversharing, or relying on their child for emotional support.
- Within the family, attempts to individuate were met with accusations of disloyalty or other distress.



Subjugation / Submission to Others: "Others know better than me"

A belief in the superiority of the judgement of others central to this schema fosters a deferential attitude where authority is rarely questioned. People with this schema rely on external guidance rather than personal insight or preference and tend to comply with instructions or norms without tuning into one's own needs or values. They often believe that conforming to the expectations and decisions of others is more important than exercising their own autonomy, and have difficulty communicating assertively. There is sometimes a build-up of resentment, anger or sadness that is rarely expressed. People with this schema may find it difficult to maintain boundaries in relationships and can find themselves in situations where others overly control them, further reinforcing the schema.

Examples of what maintains the schema:

- People with this schema may reenact the experience of subjugation, having relationships with domineering, strong partners who reinforce the importance of submission.
- People with this schema tend towards passivity and avoid situations that involve identifying and asserting their needs, opinions, and preferences. This limits the development of self-awareness and skills, as well as limiting opportunities to disconfirm the schema.
- People with this schema may behave in overly compliant ways, prioritising others over themselves, and therefore reinforcing the power imbalance in relationships.

Examples of beliefs, assumptions or reactions related to the schema:

- Other people know better than I do.
- I should always do as I'm told.
- Other people know what is best for me.
- I feel like I have to let others take control in relationships.

Possible origins of schema:

- This schema is sometimes caused by authoritarian parenting.
- Punishment of childhood self-expression or differences of opinion.
- The child was dominated or invalidated whenever they expressed feelings or needs.
- The child was not allowed to make their own decisions.
- A parental tendency towards volatility or unpredictable punishment.
- Caregiving in which approval and love were contingent on submission to authority.
- Observing a caregiver consistently subjugating themselves to others as a survival strategy in relationships.

Self-Sacrifice: "I should put others first"

This schema involves the pervasive sense of obligation to prioritise the needs of others above one's own needs, preferences, or values. This view holds that one must always find time for others and have an unrelenting duty to serve. This can result in a cycle of neglecting one's own needs and well-being, endured in silence. Individuals may sacrifice their own needs in order to maintain a connection with others or as a way of avoiding difficult emotions such as guilt. They may be highly empathic and have increased sensitivity to the pain of others. People with this schema may develop resentment toward those who are taken care of due to the pervasive feeling that their own needs are not being met. However, they are likely to experience feelings of guilt if they do focus on their own needs. People with the self-sacrifice schema are more likely to tolerate needy or exploitative individuals, so may be more likely to find themselves in unsatisfying relationships.

Examples of what maintains the schema:

- The schema can be perpetuated when the individual inadvertently reinforces others' dependency on the self-sacrificer or through moral justifications around the virtues of selflessness.
- People typically feel guilty in response to the resentment associated with this schema. To alleviate these feelings of guilt, people with this schema return to self-sacrificing behaviours, thereby perpetuating the cycle.
- Individuals who self-sacrifice often receive positive reinforcement from others, confirming the belief that their value lies in meeting the needs of others.
- Some people may avoid relationships or situations requiring the assertion or prioritisation of their own needs, thereby limiting opportunities to have corrective experiences that could disconfirm the necessity for self-sacrifice.

Examples of beliefs, assumptions or reactions related to the schema:

- I always prioritise others no matter what's going on for me.
- I believe it is my duty to listen to other people's problems.
- My needs are as important as other people's needs. (Reversed)
- No matter how much I give to others, I can never give enough.

Possible origins of schema:

- This schema is sometimes developed in response to early family dynamics where the expression of personal needs was discouraged.
- A child was parentified or had a significant caregiving role at a young age.
- There was extreme emphasis on selflessness and kindness as a virtue (e.g., religious or moral beliefs).
- The child was made to feel selfish, guilty, or bad if they prioritised their own interests.



Approval-Seeking / Excessive Need to be Liked: “I need to be liked by everyone”

This schema involves a sense of self-esteem that is excessively reliant on acceptance, approval or reassurance from others. As such, one’s sense of self tends to be shaped by the reactions of others and can lead to both an increased sensitivity to rejection and a tendency to make decisions that are not personally satisfying. People with this schema may not have a strong or authentic sense of their own identity, preferences and opinions, tending instead to modify them for the approval of others. In order to meet the need to be liked, people may have an excessive focus on achievement, status, appearance or other external measures of success.

Examples of what maintains the schema:

- Exposure to social media that glorifies popularity can reinforce the idea that being liked by others is paramount. This can pressure individuals to make choices aimed at enhancing social image rather than fulfilling personal desires, leading to feelings of emptiness and thereby perpetuating the craving for social reinforcement.
- By surrendering to the schema (for example, changing or conforming in order to be liked), the belief that one's own views and desires are not as important or valid as others is perpetuated.
- Some people avoid self-disclosure or disagreements as a strategy for maintaining others' approval. This avoidance reinforces the belief in the importance of others' approval, limits opportunities for corrective experiences, and reinforces the dependence on external validation for self-esteem.

Examples of beliefs, assumptions or reactions related to the schema:

- Gaining the approval of others is often more important to me than following my own desires.
- I want people to like me, so I would tend to agree with people even if I know they are factually wrong.
- Even if I don't like someone, I still strongly desire for them to like me.
- I find it hard to make a decision unless I know what other people think.

Possible origins of schema:

- The origins of this schema can include early experiences in which caregivers' love and attention were conditional on the child conforming to their expectations.
- The schema can be modelled for children in families that are overly concerned about outward appearances, status, or the opinions of others.
- In instances where the child had difficulty fitting in, they may have learned to behave as they believed others wanted/liked.

Pessimism / Negativity: “Disappointment is inevitable”

This schema is characterised by a habitual and overwhelming focus on the negative, often to the exclusion of any positives. There is a tendency to see the worst in situations, anticipate negative outcomes, expect problems and ruminate on the negative details of past experiences. Typically, the likelihood of negative outcomes is exaggerated. People with this schema often believe that the worst outcomes should be anticipated to protect from disappointment and tend to overly focus on the things that could go wrong, even when things appear to be going well. People with this schema may be excessively risk-averse and often struggle with feelings of hopelessness, low mood, and anxiety about the future.

Examples of what maintains the schema:

- The anticipation of a negative outcome can lead to the avoidance of taking risks or positive opportunities. As a result, there is a reduced opportunity to experience positive events that could disconfirm the schema, and a tendency to instead experience disappointing or unfavourable outcomes that reinforce the pessimism.
- Conversely, when negative expectations occasionally lead to vigilant behaviours that prevent negative outcomes, the initial fears can seem justified.
- People with this schema may behave in ways that increase the likelihood of negative outcomes, thereby creating a self-fulfilling prophecy. This is common in relationships, for example, where others can find the pervasive nature of the pessimism to be frustrating and withdraw.

Examples of beliefs, assumptions or reactions related to the schema:

- Things almost always go wrong for me.
- In uncertain times, I usually expect the best. (Reversed)
- Things inevitably don't go my way, so I prefer to expect the worst to avoid disappointment
- I am pessimistic about the future.

Possible origins of schema:

- The schema may develop following experiences of significant hardship or adversity during childhood (e.g., poverty, early loss/grief, trauma).
- This schema can be learned through caregivers who modelled highly depressed, pessimistic, or cynical thinking.
- The child was not sheltered from harsh realities or required to take on adult responsibilities.
- Repeated failures that were not adequately addressed or resolved can contribute to the development of pessimism.

Emotional Inhibition: “I must suppress my emotions”

This schema involves the restraint of emotions to avoid shame, a perceived loss of control or uncomfortable feelings. People with this schema may hold back feelings, avoid emotional engagement, or maintain a narrow emotional range in situations where a broader range of emotions would be typical or healthy. It involves a reluctance to express emotions, whether they are pleasurable or uncomfortable feelings (e.g. anger, joy, affection, or vulnerability). Individuals with this schema perceive emotions as unimportant or more detrimental than beneficial, leading them to ignore or suppress them as a protective measure. This suppression is often justified by an overemphasis on rationality and a devaluation of emotional experiences, leading to a stifled emotional life and difficulty in communicating their feelings and needs effectively. People with this schema may have trouble identifying their emotions, alexithymia or physical manifestations of emotions, such as muscle tightness or gastrointestinal symptoms. This schema can create barriers to intimate relationships and reduce overall emotional resilience.

Examples of what maintains the schema:

- When an individual repeatedly suppresses their emotions and tension accumulates, they may inadvertently release them in an uncontrolled outburst. The intensity of the outburst can reinforce the perceived risk of emotional expression.
- Conversely, the belief that emotions are dangerous can be reinforced when an individual avoids expressing emotions and nothing negative happens (i.e., they don't face rejection or conflict). This absence of negative outcomes can wrongly affirm their belief that suppressing emotions is a safe and effective strategy.

Examples of beliefs, assumptions or reactions related to the schema:

- Tuning into my emotions is helpful. (Reversed)
- My emotions do more harm than good.
- Emotions are not useful, so I need to ignore them.
- It is dangerous to feel emotions too strongly.

Possible origins of schema:

- The child learned to inhibit emotion as a result of experiences where emotional expression was discouraged or punished, or met with ridicule, shaming, or judgement.
- This schema can develop as a coping mechanism for overwhelming feelings associated with trauma.
- The child was expected to suppress spontaneous urges in favour of rigid rules, duty, rationality, ethics, or keeping up appearances.
- Parental emotional needs came first, so there was no space for the child to express themselves or develop emotionally.
- The child was exposed to expressions of emotion in a way that felt overwhelming or threatening.
- Cultural norms, including those related to gender, can shape beliefs about the appropriateness and meaning of emotional expression.

Unrelenting Standards: "I must perform exceptionally"

This schema includes the belief that one must always pursue very high internalised standards of behaviour, performance and achievement. Striving to meet these expectations typically results in feelings of pressure. People with this schema tend to be hypercritical of themselves and may also project their high expectations onto and criticise others. Unrelenting standards typically present as an excessive attention to detail characteristic of perfectionism, or selective attention to mistakes and an underestimation of performance. People with this schema often have rigid rules across different areas of life, including unrealistically high work ambitions or ethical expectations. They may believe their worthiness is based on a high level of accomplishment and, therefore, have fragile self-esteem and find it difficult to slow down, relax or spend time on pleasurable activities. There can be a fear of failure or chronic dissatisfaction about achievements and a tendency to sacrifice personal health, relationships or leisure in the pursuit of productivity. This can lead to stress, burnout, health issues and strained relationships.

Examples of what maintains the schema:

- Cognitive bias often maintains unrelenting standards via selective attention to mistakes and conversely dismissing, minimising or underestimating achievements.
- This schema can also be maintained by having extremely high expectations and goals that leads to a sense of continually falling short.
- Productivity or achievement based media such as books or interviews with high achievers may be consumed excessively, ostensibly to improve skills, but in fact reinforcing the expectation of extremely high standards.
- Unrelenting standards and subsequent achievements are often extrinsically rewarded (admiration, money) and reinforce the schema, even if they come at great personal cost (health, happiness).
- Burnout can perpetuate the belief in the need for high standards, as it might be interpreted as a sign that one needs to work even harder or manage time even more effectively in the future.

Examples of beliefs, assumptions or reactions related to the schema:

- If I make a mistake, I can let it go easily. (Reversed)
- Achieving high standards is more important than my own happiness.
- I should always perform at an extremely high level.
- It is ok for me not to be a high performer. (Reversed)

Possible origins of schema:

- Caregivers affection was conditional on the child meeting high expectations.
- Caregivers shamed or criticised the child when they failed to meet the excessively high standards expected.
- Caregivers modelled unrelenting standards in their own achievements and relationship with self.



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- Early experiences of low levels of achievement or feeling inferior to peers and associated feelings of shame.
- Cultural or wider social influences that perpetuate a culture of achievement.



Punitiveness / Unforgiving of Self: “I should be punished for my mistakes”

This schema involves a belief that one should be punished or held accountable in some way for failing to meet expectations or making mistakes. The schema is characterised by harsh, relentless self-criticism and a difficulty or inability to forgive oneself. They might believe that being hard on themselves is the only way to avoid further mistakes or social rejection. Individuals with this schema find it difficult to be compassionate about their limitations, appreciate the normality of human imperfection and ignore extenuating circumstances related to mistakes. Feelings of guilt, shame or anger are often associated with this schema.

Examples of what maintains the schema:

- This schema can be reinforced if harsh self-criticism is associated with the avoidance of a future mistake, and a causal relationship is inferred.
- Cognitive bias often maintains the unforgiving of self schema via selective attention to instances where mistakes are followed by criticism.
- The persistent, repeated engagement in self-criticism perpetuates the schema as opportunities to have corrective experiences that could challenge the necessity of this behaviour are limited.
- Feelings of guilt or shame associated with this schema can be misinterpreted as evidence that punishment or criticism is deserved.

Examples of beliefs, assumptions or reactions related to the schema:

-If something goes wrong, I shouldn't get away with it.

-I try to be compassionate and understanding to myself when I make a mistake. (Reversed)

-If I fail, I should suffer the consequences.

-It doesn't matter how small a mistake I make is, I deserve to be punished for it.

Possible origins of schema:

- This schema may be caused by caregivers modelling a lack of forgiveness for themselves or others.
- The child may have experienced domination or been forced to apologise when they made mistakes.
- Caregivers who harshly punished the child and claimed this to be a consequence of the child's actions.
- Other early life experiences where making mistakes led to aversive, punishing consequences.
- Childhood abuse.



Punitiveness / Unforgiving of Others: “Others should be punished for their mistakes”

This schema is characterised by the belief that other people should be harshly punished for their mistakes. People with this schema are typically intolerant of and impatient with anyone who fails to meet expected standards. They often struggle with forgiveness as they do not accept human imperfection or the various external factors that can contribute to mistakes. Low levels of empathy can be present, amplifying this difficulty with forgiveness. This schema is often associated with persistent feelings of anger and dissatisfaction in relationships where mistakes are inevitable, leading to interpersonal difficulties that detrimentally impact social support.

Examples of what maintains the schema:

- Cognitive biases such as attribution bias, where individuals tend to attribute others' mistakes to internal factors (e.g., incompetence or malice) rather than external factors (e.g., situational factors or circumstances), can reinforce the belief that punishment is justified.
- This schema can be reinforced when one is harsh towards others, and the other person either modifies their behaviour or leaves, proving either way that their critical attitude was justified.
- It can also be reinforced through a sense of power or superiority gained when criticising others and can create a cycle of seeking out opportunities to criticise others to maintain this sense of control or superiority.

Examples of beliefs, assumptions or reactions related to the schema:

- People should be held to account for their failings.
- I try to be compassionate and understanding to others when they make a mistake. (Reversed)
- If someone fails, they should face the consequences.
- People deserve to be disciplined for their mistakes.

Possible origins of schema:

- This schema may be caused by a caregiver modelling a lack of forgiveness for themselves or others.
- The child witnessed people being dominated or forced to apologise when they made a mistake.
- An excessive emphasis on adherence to rules or procedures during childhood.
- Other early life experiences where making or observing another person making mistakes led to aversive, punishing consequences.



Entitlement / Specialness: “I am special and unique”

People with this schema believe themselves to be superior to others. They feel that they deserve special treatment and believe that they are not bound by the usual rules others follow. Power and control are of high importance. Interpersonally, this can present as an excessive competitiveness toward or domination of others or attempts to control or influence others. The schema can include a sense of contempt for those considered less capable, special, or of lower status. Typically, people with this schema have difficulty tolerating limits or restrictions and believe that they should be free to act as they wish regardless of what is realistic or how it affects others. This schema is often accompanied by low levels of empathy or concern for others' needs or feelings and difficulty with reciprocity.

Examples of what maintains the schema:

- Reinforcement of this schema may occur if individuals act in a demanding or assertive manner and their needs are met as a result. This perpetuates their belief in their right to special treatment and, over time, can lead to more pronounced entitled behaviours as they see the approach as successful.
- People with this schema typically do not present with distress or an awareness of the associated negative consequences of - and harm caused by - their beliefs and behaviour. As such, they are unlikely to be self-motivated to change or seek out situations or relationships that might challenge the schema.

Examples of beliefs, assumptions or reactions related to the schema:

- When I ask someone for something they should agree to it.
- I am above the usual rules that others follow.
- Other people should appreciate how unique I am.
- I deserve special privileges.

Possible origins of schema:

- Growing up without boundaries around personal and social limits can lead to difficulties in recognising and respecting others' needs and rights.
- Children who are excessively pampered or given whatever they want by their caregivers may develop an expectation that similar treatment will continue in other contexts.
- Caregivers who insist that their child is special, and engage in self-sacrificial behaviour.
- If caregivers are inconsistent with consequences, permissive, or lack rules altogether, a child may learn that they can manipulate situations to get what they want.
- Early outstanding achievements, which were the primary source of validation from others.

Unfairness: “I am not treated fairly”

Individuals with this schema often feel that they are the victims of unfairness, leading to persistent feelings of indignation, anger, or powerlessness. The schema includes a sense of injustice and imbalance in the world and society and a perception that societal structures fail to protect from, correct, or address unfair behaviours. People with this schema are typically hypersensitive to perceived injustices. To cope with the perceived unfairness, they may blame others or become overly passive.

Examples of what maintains the schema:

- Individuals may selectively focus on instances where they perceive themselves as being mistreated while disregarding or minimising instances of fair treatment. This confirmation bias reinforces their belief in unfairness.
- Feeling overwhelmed by the perceived unfairness, individuals may withdraw from social interactions or avoid situations where they anticipate further unfair treatment. This avoidance limits opportunities for alternative experiences that would disconfirm their expectation of inevitable unfairness.
- When faced with perceived unfair treatment, individuals may respond with hostility, escalating conflicts and reinforcing their belief in unfairness. The hypersensitivity to perceived injustices can lead individuals to misinterpret neutral interactions or events as unfair.

Examples of beliefs, assumptions or reactions related to the schema:

- There is no justice in society.
- I am often treated unfairly.
- I commonly receive bad outcomes that I don't deserve.
- Good things happen to other people but not to me.

Possible origins of schema:

- This schema may be caused by growing up in an environment where caregivers were inconsistent with their affection, rules or punishments.
- Children who experience arbitrary punishments or witness siblings or others being treated more favourably may develop beliefs about life being inherently unfair.
- Experiences of bullying, social exclusion or discrimination.
- Trauma or abuse, particularly if the abuse was not adequately acknowledged or addressed.
- Experiences of institutional injustice.
- Caregivers who overprotect their children from unfairness or solve all their problems for them can inadvertently promote this schema when the child enters the ‘real world’ and experiences unfairness.

Full Control: “Nothing is beyond my control”

This schema involves an exaggerated belief in one’s ability to control events, outcomes, and other people’s actions and feelings. This schema is characterised by the conviction that with enough effort, intelligence, or willpower, one can manage and influence virtually every aspect of life. While on the surface, this might seem like a positive trait, it often leads to significant stress, frustration, and interpersonal conflict when the inevitable limits of control are encountered. Due to the over-amplified sense of control, people typically take excessive responsibility for things that happen and have increased stress. This schema is associated with philosophies like ‘manifesting’, ‘the law of attraction’ and ‘the power of positive thinking’, that suggest that one can bring about any desired outcome simply by visualising success. This schema might lead to people ignoring real and serious constraints and risks, avoiding practical action and creating unrealistic expectations. This schema may also lead people to unfairly blame themselves or others for misfortune or unwanted outcomes.

Examples of what maintains the schema:

- This schema can be reinforced through the positive feelings experienced through believing one has a high degree of control.
- The schema’s accuracy can be positively reinforced when efforts to control outcomes are paired with positive outcomes, even when the behaviour objectively may have had little or no relationship to the outcome.
- As a pervasive effort is made to control events, people with this schema have limited opportunities to learn the realistic limits of control.
- Cognitive bias often maintains the full control schema as there is a lack of awareness of or attention given to the various external factors that affect outcomes.

Examples of beliefs, assumptions or reactions related to the schema:

- I am in complete control of my future.
- There are limits to what I can do. (Reversed)
- If I exert enough willpower, I can change anything.
- I always maintain control so nothing is left up to chance.

Possible origins of schema:

- Experiencing a lack of stability or predictability during childhood might lead individuals to develop a strong need for control as a way to ensure safety and predictability.
- Traumatic experiences can lead to the desire to find a mechanism (such as the belief in full control) whereby one can exert control over an environment that was once unpredictable or dangerous.
- As an overcompensatory way of coping with a real or perceived powerlessness or lack of control experienced in earlier life.
- Consumption of unrealistic social media promoting philosophies related to manifesting or the power of positive thinking.

Meaningless World: “My life is meaningless”

Central to this schema are feelings of existential void and purposelessness, reflecting a belief that personal actions and human life, in general, are fundamentally devoid of meaning. People with this schema may have nihilistic attitudes towards life's activities and aspirations, leading to a disconnection from broader societal goals and personal ambitions. It can lead to pervasive cynicism, chronic boredom, emptiness and emotional detachment. People with this schema typically feel detached from the world.

Examples of what maintains the schema:

- Social withdrawal reinforces the schema as social isolation experiences and relationships that could potentially provide meaning.
- Similarly, the passive behaviour characteristic of the schema can also reinforce the feeling that life is meaningless, as people remain in unfulfilling circumstances rather than pursue changes that might bring a greater sense of meaning or purpose.
- Frequent exposure to media promoting nihilistic themes and negative events can further reinforce the belief that life is meaningless.

Examples of beliefs, assumptions or reactions related to the schema:

- I have no purpose in the world.
- It is pointless to search for life's meaning or purpose.
- Everything I do will always be fundamentally meaningless.
- Humans lead pointless lives.

Possible origins of schema:

- The schema may develop from growing up in an environment where emotional needs were consistently unmet and meaningful emotional connections with caregivers were lacking.
- Experiencing trauma or living in a chronically unstable environment can lead to disillusionment and a sense that the world is inherently unpredictable and meaningless.
- Early exposure to significant suffering, either personally or through observing others (such as sick family members), without adequate support or explanation can lead to a nihilistic outlook.
- Observation of caregivers modelling cynicism or hopelessness.

Lack of Coherent Identity: “I don’t know who I am”

This schema relates to an individual's internal experience of uncertainty, confusion, or inconsistency in their sense of self. People with this schema may have inconsistency in self-perception and frequently change views about themselves. They are often unsure of their preferences and beliefs and have difficulty knowing what they truly like, believe in, or value, leading to confusion or a sense of emptiness. Given this unclear sense of identity, they may experience challenges in making decisions about future goals. Some people may experience dissociative symptoms such as a sense of alienation from one's thoughts, feelings, or actions or a sense of self which is non-coherent and diffuse.

Examples of what maintains the schema:

- Individuals may actively avoid reflecting on their values, preferences and beliefs, which can perpetuate the sense of not knowing who they are. By avoiding introspection, they may remain in a state of uncertainty and confusion about their identity.
- Some individuals may engage in self-destructive behaviours as a way to cope. This can include substance use or risky behaviours, which serve as temporary distractions from feelings of emptiness or confusion but a subsequent sense of incoherence when they are in a different emotional state.
- Conversely, others may engage in identity exploration without limits or guidance, which can exacerbate feelings of confusion.

Examples of beliefs, assumptions or reactions related to the schema:

- I struggle to maintain a consistent sense of who I am.
- I don't know what my personal interests and beliefs truly are.
- I feel detached from myself.
- My view of myself changes frequently.

Possible origins of schema:

- Experiences of childhood trauma, abuse or pain may lead a child to dissociate as a form of psychological escape from reality.
- In the absence of nurturing and attention, children may struggle to develop a stable, coherent sense of self.
- The unexpected loss of a close family member or significant disruption to family circumstances can impact identity formation.
- A lack of reliable attachment can cause difficulties in the development of a coherent sense of self, as the child may continually adjust their behaviours and perceptions to align with their caregivers' unpredictable responses.
- Gaslighting, where an influential person uses manipulation to distort the person's perception of reality.
- Opposing cultural expectations.
- Lack of external scaffolding such as role models.

Over-Reliance on Emotions: “If I feel it, it must be true”

This schema is characterised by the tendency to place excessive importance on one's emotional state as a primary guide for decision-making and evaluating reality. Individuals with this schema often believe that their feelings are the most accurate indicators of truth, leading them to make decisions based on how they feel rather than on objective evidence or rational analysis, even when evidence exists to the contrary. A key assumption of this schema is that "if I feel it, it must be true." For example, if a person feels anxious, they might assume that something bad is definitely going to happen. This schema can impair decision-making, as there is a tendency to dismiss objective evidence when it contradicts emotional experiences, and impulsivity, characterised by a propensity to act on emotions without considering long-term consequences.

Individuals with this schema may be unable to distinguish between circumstances where emotional intuition can be helpful and circumstances where other sorts of information are more reliable. Consistent with the “wise mind” model in Dialectical Behaviour Therapy, using both emotional and rational minds together is most adaptive, whereas people with this schema may consistently use their emotional mind.

Examples of what maintains the schema:

- An attentional bias facilitated by this schema amplifies the awareness of successful instances of emotions guiding an individual to desirable outcomes.
- Over-reliance on emotions for decision-making may be due to or result in a skills deficit in logical reasoning and problem solving.
- Experiential avoidance may reinforce the tendency to rely on emotions in decision making.
- Solely relying on emotional information rather than facts can reduce conflicting information thereby avoiding cognitive dissonance. Integrating rational information into a point of view may increase cognitive dissonance, providing an unconscious incentive to rely only on intuition.
- Engagement in online platforms where emotional content is likely to receive high levels of engagement without considered or corrective feedback.

Examples of beliefs, assumptions or reactions related to the schema:

- When my head says one thing and my heart says another, I listen to my heart.
- My feelings are a reliable way to make decisions.
- My emotional reactions are accurate reflections of reality.
- When I face a problem I prefer to use my intuition rather than thinking.

Possible origins of the schema:

- Childhood experiences of a chaotic environment may lead a child to learn that emotional experiences are the most reliable form of guidance.



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- Early experiences where emotional responses were overly validated in the absence of sufficient and reasonable limits.
- Over-reliance on emotions was modelled to a child by a caregiver.
- It could also arise in environments where emotions were the primary focus of interaction, leading to an internalised belief that emotions are the most important factor in understanding and navigating the world.



Organisation of Schemas According to Unmet Needs

The MSS-v1.4 categorises the 27 maladaptive schemas to a cluster relating to an early unmet need during childhood. By categorising schemas according to these fundamental emotional needs, the MSS-v1.4 provides a structure to assist clinicians in identifying possible childhood origins of the schema.

Early Needs and Respective Schemas

Safety & Attachment

Abandonment / Anxious Attachment
Excessive Self-Reliance / Avoidant Attachment
Emotional Deprivation
Mistrust of Others
Others are Dangerous / Malevolent
Social Isolation / Outsider
Defectiveness / Shame
Vulnerability to Dangerous World

Autonomy & Competence

Dependence
Failure / Achievement Inferiority
Low Self-Efficacy / Weakness
Fatalistic / External Locus of Control
Enmeshment / Diffuse Boundaries

Freedom to Express Needs, Opinions & Emotions

Subjugation / Submission to Others
Self-Sacrifice
Approval-Seeking / Excessive Need to be Liked
Emotional Inhibition

Spontaneity & Play

Pessimism / Negativity
Unrelenting Standards
Punitiveness / Unforgiving of Self
Punitiveness / Unforgiving of Others

Realistic and Consistent Limits

Entitlement / Specialness
Full Control
Over-Reliance on Emotions

Coherence & Fairness

Unfairness
Meaningless World
Lack of Coherent Identity



Organisation of Schemas by Focus Category

An alternative schema structure to the early unmet needs table can also be considered. In this model, schemas are organised into five distinct categories that reflect primary relational patterns of responding: World, Inadequate Self, Inflated Self, Other People, and Relationships. These categories help clinicians discern the focus of schemas and identify patterns of internalising and externalising.

Five Relational Domains

World

Vulnerability to Dangerous World
Meaningless World
Pessimism / Negativity
Unfairness

Inadequate Self

Defectiveness / Shame
Low Self-Efficacy / Weakness
Fatalistic / External Locus of Control
Emotional Inhibition
Unrelenting Standards
Punitiveness / Unforgiving of Self
Lack of Coherent Identity
Failure / Achievement Inferiority

Inflated Self

Entitlement / Specialness
Full Control
Over-Reliance on Emotions

Other People

Others are Dangerous / Malevolent
Mistrust of Others
Punitiveness / Unforgiving of Others

Relationship

Social Isolation / Outsider
Abandonment / Anxious Attachment
Excessive Self-Reliance / Avoidant Attachment
Dependence
Enmeshment / Diffuse Boundaries
Subjugation / Submission to Others
Self-Sacrifice
Approval-Seeking / Excessive Need to be Liked