MEDIATING EFFECT OF HUMOUR IN RELATION TO EARLY MALADAPTIVE SCHEMAS AND PSYCHOLOGICAL WELLBEING

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MEDIATING EFFECT OF HUMOUR IN RELATION TO EARLY MALADAPTIVE SCHEMAS AND PSYCHOLOGICAL WELLBEING

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ABSTRACT

MEDIATING EFFECT OF HUMOUR IN RELATION TO EARLY MALADAPTIVE SCHEMAS AND PSYCHOLOGICAL WELLBEING

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Early maladaptive schemas affect many aspects of human life. Some schemas may have a direct effect on human psychological wellbeing while other schemas may indirectly affect psychological wellbeing. Present study examines the relationships among early maladaptive schemas, humour styles and psychological wellbeing. For this purpose, 212 adults (141 female, 71 male) between the ages of 17 and 55 (M = 26.84, SD = 6.51) participated in the current study. Results of the study indicated that self-enhancing humour style partially mediates the relationship between impaired autonomy and performance schema domain and psychological wellbeing and

aggressive humour style mediates the relationship between disconnection/rejection schema domain and psychological wellbeing.

In the light of these findings, results of the study discussed and alternative explanations were presented. Implications, limitations and further research suggestions were stated.

Keywords: Early maladaptive schemas, humour styles, psychological wellbeing.



ÖZ

MİZAH KULLANIMININ ERKEN DÖNEM UYUMSUZ ŞEMALAR VE PSİKOLOJİK İYİ OLUŞ İLİŞKİSİNDEKİ ARACI ROLÜ

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Erken dönem kişilik şemaları insan hayatının pek çok alanına etki etmektedir. Bazı şemalar doğrudan psikolojik iyi oluşu etkilerken bazı şemalar psikolojik iyi oluşu etkileyen faktörler üzerinden etkili olabilmektedir. Bu araştırmada erken dönem uyumsuz şemalar, mizah tarzları ve psikolojik iyi oluşun birbirleri arasındaki ilişkilerine bakılmıştır. Araştırmaya yaşları 17 ile 55 arasında değişen (M= 26,84 SD = 6.51), 212 kişi (141 kadın, 71 erkek) katılmıştır. Araştırmanın sonuçları, kendini güçlendirici mizahın zedelenmiş otonomi şema alanı ve psikolojik iyi oluş ilişkisinde kısmi bir aracı etkisinin olduğunu ve saldırgan mizah kullanımının kopukluk şema alanı ile psikolojik iyi oluş arasındaki ilişkide aracı bir rolü olduğunu göstermektedir.

Araştırmanın sonuçları tartışılmış ve ilgili literatür yardımıyla olası açıklamalar yapılmıştır. Sonuçlar, kısıtlılıklar ve gelecek araştırmalar için öneriler verilmiştir.

Anahtar Kelimeler: Erken dönem uyumsuz şemalar, mizah tarzları, psikolojik iyi oluş.



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CHAPTER 1

INTRODUCTION

Humour is a unique interaction mode (Martin, 2007). There are a lot of benefits of humour usage in daily life. Humour can be used in order create bonds, ease the tensions between people, to increase resilience in stressful environments, or manipulate others; humour is not solely positive or negative (Martin, 2007). Humour also helps us at maintaining higher psychological wellbeing; higher usage of coping type humour was shown to be in line with increased psychological wellbeing (Maiolino & Kuiper, 2016). On human mental wellbeing, the negative effect of early maladaptive schemas is also known; early maladaptive schemas negatively correlate with emotional wellbeing (Miklósi, Máté, Somogyi & Szabó, 2016). When both humour and early maladaptive schemas taken into account, it is shown that type humour usage mediates the effect of early maladaptive schemas on depression (Dozois, Martin & Bieling, 2009) and aggression/hostility (Dozois, Martin & Faulkner, 2013) and studies suggest that humour acts like a schema coping style in this mechanism.

Present study explores the relationships among early maladaptive schemas, humour types and psychological wellbeing. Current study considers humour type as a coping style like previous studies (Dozois et al., 2009; Dozois et al., 2013) and examines their mediational effect on the relationship between early maladaptive schemas and psychological wellbeing. The early maladaptive schema concept, the role of humour in psychology, humour types and psychological wellbeing were explained in the following sections.

1.1. Early Maladaptive Schemas

Young (1990, 2003) hypothesized that chronic psychological disorders, characterological problems and personality disorders may be rooted in schemas with toxic childhood experiences. According to Young (1990, 2003) schemas are broad and pervasive; consist of memories, cognitions, emotions, bodily feelings; they relate to oneself and one's relationships with others; develop during childhood/adolescence and improve through ages and dysfunctional to some degree. Young (2003) suggested that schema driven behaviours are not the parts of the schemas; instead they are responses to schemas and considered as schema coping styles. There are several ways to obtain a schema; early life experiences, emotional temperament and unsatisfied core emotions may be the sources of schema adoption.

Early negative life experiences, such as traumas may lead to adoption of early negative schemas. However, having trauma in childhood is not the only way to adopt a negative schema. Young, Klosko and Weishaar (2003) claimed that one does not have to experience something negative to obtain a schema; one may experience repeated displeasing experiences or total protection from frustrations in childhood. Therefore, experiencing regular negativity, trauma or overprotection may lead to schemas. Young (1990) also stated that individuals sometimes behave in a way that senses right and that behaviour may create the sense of truth for negative schema, at the end of consecutive incidents like this, one can come to the conclusion that his/her negative schema is right. For the emotional part, Young (2003) stated that memories and inferences of behaviours of peripheral figures (parents, siblings etc.) can be distorted however children can correctly remember the emotional tone of the time, they can accurately recall the emotions they felt in past.

Another important factor for acquiring early maladaptive schemas is emotional temperament. Emotional temperament is a unique characteristic of the infant and recognized during the following days of the birth of the baby. Temperament may vary children to children; they may be shy, aggressive, silent, cheerful, etc. Their reactions to parents also shape the relationship between caregiver and the children. The type of this relationship may affect early experiences of the child and may lead to formation of schemas. Furthermore, even without a reaction from parents, children's temperament may alter the perception of world and make children vulnerable to some scenarios that other children consider as neutral incidents (Young, 1990). Young (2003) suggests that this factor is the most biologically driven way to obtain a schema and at work from the birth.

Young et al. (2003) suggest that children have to satisfy five core needs during childhood in order to pass on to the other parts of life in a healthy way; these needs are secure attachment, sense of autonomy/competence/identity, freedom of expressing emotions, spontaneity/playfulness and sense of realistic limits (in other words, self-control). If these needs fail to be satisfied; some maladaptive beliefs about self and world may develop. In a broader sense, communication between one's self, world and future may be filtered, distorted through the usage of this beliefs/patters/schemas of the person and one's behaviours/emotions may also be affected in the end of this transaction. Therefore, these unmet core emotions may constitute another way to acquire maladaptive schemas.

Young et al. (2003) suggests five schema domains that are driven from five needs of children and eighteen schemas that have distinct schema coping behaviours and styles. The schema domains are disconnection and rejection (schemas: abandonment/instability, mistrust/abuse, emotional deprivation, defectiveness/shame, social isolation/alienation), impaired autonomy and performance (schemas: failure dependence/incompetence, enmeshment/undeveloped self, vulnerability to harm or illness), impaired limits (schemas: entitlement/grandiosity, insufficient selfcontrol/self-discipline), other-directedness (schemas: approval seeking/recognition seeking, subjugation, self-sacrifice), overvigilance and inhibition (schemas: unrelenting standards/hypercriticalness, negativity/pessimism, emotional inhibition, punitiveness).

1.1.1 Schema Domains and Schemas 1.1.1.1 Disconnection and Rejection

Disconnection and Rejection schema domain mainly focuses on emotional needs and their absence or oversaturation. This domain is fed from unstable, abusive,

cold, rejecting or isolated/detached family origins; people with schemas in this domain often considered as the most damaged proportion of schema bearers, they often go through a traumatic environment in their childhood and in terms of interpersonal relationships, they tend to act in a self-destructive way to avoid or terminate close relationships (Young et al, 2003). Bearers of this domain related schemas often think they are unlovable, unwanted or inferior (Young, Rygh, Weinberger & Beck, 2008; Lobbestael & Arntz, 2012).

Abandonment/Instability schema refers to one's relationship with the significant other (Young et al, 2003). People with this schema have a sense of discontinuation at one's relationship with the other; they tend to think the other may not be present when needed or they can leave unexpectedly. This schema was found be positively correlated with emotional and physical abuse, neglect, negative beliefs about emotion, rigid emotional schemas and experimental avoidance and depression (Rezaei, Ghazanfari & Rezaee, 2016). Abandonment schema was also shown to be present in borderline personality disorder, too (Barazandeh, Kissane, Saeedi & Gordon, 2016).

Mistrust/Abuse schema includes the tendency to believe if the schema bearer gives a chance to others, s/he will be harmed, abused, humiliated, hurt, fooled or manipulated (Young et al, 2003). People with this schema may show lesser openness, receptiveness and reactiveness in interpersonal relationships (Yoo, Park & Jun, 2014).

Emotional deprivation schema consists of one's beliefs on satisfaction of one's needs; this deprivation of needs can be seen in nurturance (one may think or feel s/he will not get adequate caring and support from others), empathy (one may think s/he will not be listened, understood enough) and protection (one can think s/he will not get guidance, direction from others) (Young et al, 2003). Lumley and Harkness (2007) stated that childhood neglect may create a loss or insignificance, unimportance theme in child's personal history and cause emotional deprivation scheme; which was also stated by Young (2003).

Defectiveness/Shame schema refers to one's feelings of being flawed, unlovable, unwanted, inferior or worthless about him/her; the schema is often formed via embarrassing memories and shameful experiences of the person (Young et al, 2003). Harris and Curtin (2002) claimed that defectiveness schema mediated the relationship between parental bonding and depression severity; also Wright, Crawford and Del Castillo (2009) stated that defectiveness/shame schema had a mediating effect symptoms of depression; on the more elaborated defectiveness/shame schema worsened depression symptoms. Schmidt, Joiner, Young and Telch (1995) suggested that defectiveness mainly related to depression rather than anxiety.

Social Isolation/Alienation schema creates a sense of being fundamentally unfit to larger social contexts; schema bearers do not feel any connection or relatedness to any groups, communities, cliques and so on (Young et al, 2003). Social isolation/alienation schema bearers insist on staying at the periphery of groups and prefer solitary activities; since being a part of a group is the first perquisite of being agreeable to others, social isolation schema negatively predicts agreeableness personality trait (Ehsan & Bahramizadeh, 2011).

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1.1.1.2 Impaired Autonomy and Performance

Young et al (2003) explain autonomy as the ability to differentiate oneself from his/her family and live his/her daily life independently. Schema bearers experience problems related with presumptions of their capabilities. This schema may originate from overprotective or neglecting/hardly watched over families. The parents failed to make children have a sense of confidence about themselves and lack positive reinforcement for children's attempts to go out and experience the world. This view is also concurrent with Bowlby (1977); he stated that in order to increase children's autonomy responsive caregiver (parent) should encourage children to explore the environment.

People with Dependence/Incompetence schema suffer from the feeling of inability at handling daily responsibilities; they do not believe that they can maintain a healthy way of living alone (Young, 2003). A research showed that dependence/incompetence schema predicted lesser parental bonding in which adults experienced less protection during their childhood (Hoffart Lunding & Hoffart, 2016).

Vulnerability to harm/illness schema refers to one's heightened focus on a medical, emotional and external catastrophe; one thinks that s/he cannot be able to cope with the situation and direly harmed as a consequence or die. This schema was found to be highly correlated with anxiety disorders (Young et al, 2003) however it also affects other areas such as sexual disorders (Oliveira & Nobre, 2013).

Enmeshment/Undeveloped Self schema is very similar to dependence/incompetence schema in terms of over-involvement of significant others (such as family members, especially parents) and sense of performing poorly at daily

issues and basic life decisions (Young et al, 2003). Schema bearers often cannot be able to terminate their emotional transition with their parents even in their adulthood and they may not be able to act as adults when they feel the presence of their parents in the situation (Langroudi, Bahramizadeh & Mehri, 2011).

Failure schema consists of the cognitions about one's ineptness, being low on dexterity, generally unsuccessful; these beliefs lead the person to the belief of constant failures on areas such as life, work, education, intimacy and so on (Young et al, 2003). This schema often found high on eating disorders such as restrictive type bulimia (Pauwels, Dierckx, Schoevaerts & Claes, 2016); and this schema bearers were found to be high on neuroticism (Daffern, Gilbert, Lee & Chu, 2016).

1.1.1.3 Impaired Limits

Impaired limits domain schemas related to one's self-control, adequately autonomous behaviour and principles of one's in regard to others' rights. Individuals with these schemas are often criticized by other people and seen as selfish, careless, entitled or grandiose. They may feel difficulties on respecting others' needs or rights, cooperating with them or making commitments (Young et al, 2003). These schemas are rooted in overly permissive, over-caring families; children who reinforced to stretch rules can have difficulties at respecting others.

Entitlement/Grandiosity schema is based on the pre-occupation of the sense of superiority among other people; one can believe that s/he is far better, skilled, high status among other people (Young, 2003). Grandiosity schema is predominant in bipolar disorder (Nilsson, Nielsen Straarup & Halvorsen, 2015). This finding is not surprising since grandiosity is one of the most common symptoms of mania; researchers also found that in high risk groups, grandiosity schema highly predicts development of bipolar disorder (Hawke & Provencher, 2012). People with this schema often found as more strategic and manipulative (Láng, 2015).

Insufficient Self-Control/Self-Discipline schema refers to one's lack of frustration tolerance or maintaining motivation on achieving goals (Young, 2003). Chakhssi, Bernstein and de Ruiter (2012) stated that this schema was highly common in people who have anti-social tendencies and lifestyle however this does not mean that group of people may have a tendency to break laws and get into criminal actions. Substance dependence disordered people with this schema can have difficulties in therapies for substance dependence, in their study Hacıömeroğlu, Ak, Garip, Çınar and Congoloğlu (2014) found that people with that schema had difficulties at alcohol-drug disengagement.

1.1.1.4 Other-Directedness

Young et al. (2003) states that other-directedness domain consists of one's pre-occupation with satisfying others' even when the one is in need of help or care. During childhood people with that schema have problems at experiencing natural explorations of needs and in their adulthood, they almost explicitly feel the need of following others' guidance and seek satisfaction to their needs. Young (2003) discusses that in their childhood, people with that schema gain acceptance or care not in an unconditional way and the way to satisfy their needs passed from the satisfaction of others' needs. It was also stated that in most of the ways, the families of these people gave more importance to social appearances rather than the children's sole needs (Young et al, 2003).

Subjugation schema refers to giving up to others' needs or emotions and suppressing one's needs and emotions in order to avoid conflicts, gain acceptance and not lose the significant person (Young, 2003). Subjugation schema plays high role on avoidant personality traits; people with that schema may show more intense symptoms (Carr & Francis, 2010). The unique characteristics of the schema shows itself at bipolar disorder, in order to behave cooperatively, people with bipolar disorder activate their subjugation schema more than people with major depressive disorder; however this kind of coping create vulnerabilities in these people and can cause other psychological disorders or episodes of mania/depression (Nilsson et al., 2015).

Self-sacrifice schema refers to submitting one's own needs when faced with other people's needs like it is in the subjugation schema; however in this time, people with this schema behave like that not to gain acceptance, but to save other people from pain and avoid feelings of self-guilt and selfishness (Young, 2003). Selfsacrifice schema was found to be highly trans-generational; a research showed that fathers with that schema transfer their schema to their daughters (Mącik, Chodkiewicz & Bielicka, 2016). Since the self-sacrifice schema's motivations seem as mandatory actions for being guilt-free for schema bearers, it creates a resilience factor for psychological distress. As an example Shapour, Ma, Akbari and Darvishi (2013) worked on a criminal sample and they found that self-sacrifice schema predicted higher resilience in rapist and murderer groups.

Approval-Seeking/Recognition-Seeking schema is related to one's own sense of self; schema bearers tend to create their genuine sense of self from others' comments/views about them, they are often preoccupied with their social status or looks (Young, 2003). Unoka, Tölgyes and Czobor (2007) found that higher approval seeking schema decreased depression severity of eating disorder patients. This can be explained by the assumption that approval seeking individuals has a powerful inner motive which can make them resilient to negative situations as long as they can gain approvals of others.

1.1.1.5 Overvigilance and Inhibition

Over-vigilance and Inhibition domain refers to suppression of spontaneous feelings and impulses. People with these domain related schemas often try to strictly meet internalized rules about their performance and in order to do that they give away their happiness, self-voice, comfort, close relationships and health. In their childhood, we may see no encouragement to play and being spontaneous; repressing and grim families may be encountered (Young et al., 2003).

Negativity/Pessimism schema is based on the principle of lifelong focus on negativity in life and minimizing positive sides of life. Schema bearers often cannot free themselves from the thought of unknown, sudden catastrophes which can appear in their lives even when everything is going right and they are considered as frightened, hypervigilant, complaining and confused (Young, 2003). Negativity schema generally presents with long-term sadness and feelings of worthlessness (Roberta, Cristina, Alessandro, Katia, Grazia, & Francesco, 2014). Negativity schema does not only harm the one with the schema, Sigre-Leiros, Carvalho and Nobre (2013) state that schema found dominant in aggressive sexual behaviour offenders, they explained that the negative sense of self and feelings of worthlessness rooted from the schema may played a role on their behaviour.

Emotional Inhibition schema refers to suppression of certain emotions or forms of reflecting emotions (Young et al., 2003). People with this schema suppress anger, positive emotions, their anxious thoughts or all emotional expressions whereas considering rationality as the sole thing in the issue. The schema plays a role at eating disorders; the symptom severity increases by higher/severe activation of this schema (Damiano, Reece, Reid, Atkins & Patton, 2015); another study found that chronic pain patients bear that schema more than healthy controls (Saariaho, Saariaho, Karila & Joukamaa, 2011).

Unrelenting Standards/Hypercriticalness schema consists of actions and rules that help the person to avoid from rejection and shame. Schema bearers often pursue their high standards onto other people and are seen as cruel by others. This schema often shows itself in the form of perfectionism, rigidity at flexing/breaking rules or regulations and a preoccupation with time and efficiency. The trace of perfectionism in this schema can be found in early adolescence (Borzoo & Alireza, 2014). Rather than only in areas of competition, this schema often shows itself in interpersonal relationships. In addition, Dumitrescu and Rusu (2012) studied the mate selection's relationship with schemas and found that people with unrelenting standards schema tend to select romantic partners on the principle of chance of maximizing survival of the offspring rather than chance to create large number of offspring, in other words these people tend to act more efficient.

Lastly, Punitiveness schema refers to one's beliefs and motivations on the role of punishment when dealing with mistakes. These people tend to be aggressive and harsh on people who do not act appropriately and themselves; they have hardship at forgiving the other and themselves cannot consider human imperfection's role and natural causes of failures (Young et al., 2003). Nia, Sovani and Forooshani (2014) stated that punitiveness schema mediates the relationship between father parenting behaviours and depression; they found that depression severity that predicted by father behaviours in childhood can elevated via the foundation of punitiveness in adulthood. In terms of self-harm, punitiveness schema is also found very high in opioid users (Shorey, Stuart & Anderson, 2013); and in terms of harming-other we see that punitiveness schema strongly predicted self-reported proclivity to rape (Kang, Ndukwe & Fassnacht, 2016).

1.1.2 Schema Domains and Schemas in Turkish Context

To evaluate the structure of early maladaptive schemas in Turkish culture, Young Schema Questionnaire Short Form's (YSQ-SF) (Young, 2003) adaptation study was made by Soygüt, Karaosmanoğlu and Çakır (2009). The original form has 5 schema domains with 18 schemas. In Turkish version, there are 5 schema domains however there were 14 schemas. Alterations in the schema domains and schemas were made in Turkish standardization by Soygüt et al. (2009).

The study showed that impaired autonomy and performance domain consisted vulnerability to harm or illness, failure, dependence and enmeshment, abandonment and negativity schemas in Turkish version. Therefore, researchers combined dependence/incompetence with enmeshment/underdeveloped self. Also, other-directedness domain's subjugation schema's items were spread to dependence/enmeshment and abandonment schemas. Lastly, negativity/pessimism schema of overvigilance and inhibition domain was moved to impaired autonomy and performance domain. In the end the domain consisted of 5 schemas.

Moreover, disconnection/rejection schema domain consisted of emotional deprivation, defectiveness, social isolation/mistrust and emotional inhibition schemas. In Turkish context, researchers found that social isolation schema was seen with mistrust/abuse schema and researchers grouped these two schemas into one schema (Soygüt et al., 2009). Also, emotional inhibition schema of overvigilance and inhibition schema domain was moved to disconnection rejection domain. The schema domain consisted of 4 schemas.

Other directedness schema domain in Turkish context consisted of selfsacrifice and punitiveness schemas. Overvigilance and inhibition schema domain's punitiveness schema moved to other directedness schema domain in Turkish form. The domain consisted of 2 schemas.

Overvigilance and inhibition schema domain renamed as unrelenting standards in Turkish form. Unrelenting standards schema domain consisted of unrelenting standards/hypercriticalness and approval-seeking/recognition-seeking. In original form (Young, 2003) approval-seeking/recognition-seeking was a schema of other directedness schema domain however in Turkish context approvalseeking/recognition-seeking schema was found more representative for unrelenting standards domain. The domain consisted of 2 schemas.

Lastly, impaired limits schema domain has one schema in Turkish form. Entitlement/grandiosity and insufficient self-control/self-discipline schemas found migrated in Turkish context (Soygüt et al., 2009).

Soygüt et al. (2009) state that the Turkish form has similar qualities with different cultures' forms. They state that Turkish form's schemas show similar distributions for pathological groups when compared to the other cultures' pathologic

groups. Soygüt et al. (2009) suggested that the form is valid and reliable in evaluation of schema context.

1.1.3 Maladaptive Coping Styles

Young (1990) stated that when a schema is activated; it creates an intense emotional response. This intense emotional response is considered as a threat to the organism according to Young (2003). It was claimed that similar to our basic fightflight-freeze response, we show one of these three responses when a schema is activated, respectively these are named as compensation (fight), avoidance (flight) and maintenance (freeze) (Young, 1990). Later, these terms renamed and converted to overcompensation (fight), avoidance (flight) and surrender (freeze) (Young, 2003). Young et al. (2003) stated that children often specialize on one of these responses (maladaptive coping styles) and through time they develop different coping styles for different schemas. In their roots, these coping styles are considered as adaptive for the needs of the time that they invoked, however in time they lose their worth and either they harm the adult or takes the chance of the person's selfliberation from the problems which they may face in different areas of life. In the end these coping styles may cause schemas to bind the person until the end of his/her life.

Young et al. (2003) also considered the effect of temperament in these coping styles similar to schemas. They stated that the selection of a coping style may not solely acquired by learning; it may be predetermined by the temperament of the child just like it was in the acquisition of the schema.

Schema surrender refers to yielding and accepting the negative schema. When a person use this coping style, s/he does not run or fight the schema, feel negative emotions at full rate, in the end they reinforce the belief on their schema's reality since they do not act differently than they did before and often act in the same way for future occasions since it would feel right in that way (Young et al., 2003). Leppanen, Vuorenmaa, Lindeman, Tuulari and Hakko (2015) found that borderline personality disorder patients who use surrender coping style tend to act more parasuicidal. Young (2003) also explains that when individuals surrender to a schema, they may recreate the scene of offending parent/caregiver and helpless child and this unresolved, schema adopter scenes can distort future relationships of the person via living the same situation again and again in adulthood. Schema bearer can distribute these past roles to other people in his/her life.

Avoidance schema coping style helps schema bearers achieve lesser or no activation of the schemas (Young et al., 2003). These people often specialize on supressing thoughts or images that can trigger schemas, they tend to avoid thinking about schema, block or avoid feelings related to schema and when feelings reach the surface they repulsively try to push the feeling down. The suppression can be in form of excessive activities, seeking stimulation or leaving the place.

Overcompensation schema coping directly includes reverse actions of related schema. Overcompensators try to split from the child that acquired the schema; they try to eliminate the schema and compensate the needs in order to not to feel the emotions related to schema. Young (1990) suggested that to some extent the schema is healthy; one can fight against the schema and challenge it to change it however, if the person misuses this mechanism and it becomes problematic for the person or the others, this style should be considered as maladaptive. Overcompensators can be seen as very decent and live without any problem in their life, they may be considered as overachievers and successful however, these particular behaviours can end as being counterproductive, time consuming and excessive which in turn bringing more distress and depressive emotions in time. Young et al. (2003) stated that overcompensation style develops when the person chooses an alternative for the pain of the schema. They acquire small internal gains on the part of their less satisfied needs however, often their excessive trials of gaining care may repel the others and in time they may become lonely, ending up with depressive feelings. Overcompensation does not directly mean an increase in certain behaviours in order to fight with the schema. Riso, du Toit, Stein and Young (2007) claimed that restrictive behaviours help schema bearers to move away negative affect states, in various disorders such as eating, compulsive exercising/self-harm, obsessive compulsive disorder, this pattern can be observed when the behaviour is related to the schema.

Since early maladaptive schemas can be in different forms like behaviour, cognition and emotion (Rezaei et al., 2016) schema coping styles appear in other forms, too. Dozois, Martin and Bieling (2009) considered that humour can take replace some behaviours what can be in use as schema coping. They hypothesized that in some schemas (e.g. emotional inhibition), schema bearers often seem as flat, affectless; in other schemas that are related to social disconnection (i.e. emotional deprivation, mistrust/abuse, social isolation/alienation), schema bearers may not be able to find or develop a warm environment in which they can make jokes and have fun with their friends and as a result they may form a cynical, critical or avoidant style of humour. This type of humour use may push the other people away and individuals may experience negative feelings and loneliness. Dozois et al. (2009) discussed that this pattern is very similar to Young's (2003) schema coping styles and they also add that adaptive usage of humour can affect the schema's power on negative feelings. They found that certain types of humour can mediate the relationship between early maladaptive schema domains and depression. In another study they also found some humour types mediated the relationship between early maladaptive schema domains and aggression/anger (Dozois, Martin & Faulkner, 2013). Although the effect of humour in human mind can be seen in the results of these studies, humour were already considered one of the important mechanisms of human psychology (Martin, 2007).

1.2. Humour in Psychology

"Humor is a ubiquitous human activity that occurs in all types of social interaction. Most of us laugh at something funny many times during the course of a typical day. Although it is a form of play, humor serves a number of 'serious' social, cognitive, and emotional functions." (Martin, 2007). Humour is one of the biggest mediums we use when we communicate with each other; it helps us to create relationships and empower them while trying to being a part of a group or maintain them, it is not only a colourful language trick for socialization but also an important manoeuvre for human intra-psychic issues (Martin, 2007). Martin (2007) explained that humour was not very popular in psychology until the rise of positive emotions based therapy, humour gained importance again. Freud (1928) suggested humour as a healthy and mature defence mechanism, he stated that humour is a tool which parental superego uses to soothe the anxious ego; he states that it can be

understood as teasing with the anxiety provoking situation, parental superego ridicules the anxious situation in order to show ego that the situation is not that important to become anxious. In other words, he stated that humour's function is not only creating relaxation in for a certain time, it is also about relaxation of psychic energy via laughter which we lost while growing up. It is related to relaxation via remembrance of imperfect but not anxious childhood.

While the advantages of humour are underlined, it does not only work in a positive way in our relationships. Some people use humour in a way which gives them advantages in a discussion while devaluating others and humiliating their personalities or status (Zelvys, 1990). Although it has been suggested as a positive thing in human life, humour literature is not fully convinced on its sole help. Some theorists suggest that humour can be helpful but also harmful when the case is widely explored. In fact humour is a helpful part of self when individual is able to make fun of himself/herself however, Allport stated that humour should be differentiated than vulgarized jokes and insults, yet these can be tools for humour too (as cited in Martin, 2007).

In recent studies, humour has been theorized as a four factor construct when it is evaluated as a part of personal style. In their study Martin, Puhlik-Doris, Larsen, Gray and Weir (2003) found four factors which define human humour style and they also both worked on the expressed humour and internal usage of humour. They found that humour had four axes that range from adaptive to maladaptive and social to personal use dimension. These humour styles were affiliative, self-enhancing, selfdefeating and aggressive humour. When humour is used to solve or endure internal conflicts of a person, it becomes more adaptive; this kind of humour is named as self-enhancing humour; this humour type is useful at coping with negative feeling and changing perspectives on difficult situations whereas considering others' needs carefully and genuinely (Martin et al., 2003). Most of the dynamic psychology theorists explain humour in that particular style. Higher usage of this style of humour was found to be positively correlated with agreeableness, openness to experience and self-esteem (Saroglou & Scariot, 2002). In married couples, it was found that marital satisfaction increases as self-enhancing type humour usage increases (Saroglou, Lacour & Demeure, 2010). Dozois, Martin and Bieling (2009) found that self-enhancing humour mediated the relationship between four schema domains except other directedness domain and depression scores. It was concluded that severity of depression may mediated via different uses of humour in daily life.

If a person uses humour in a more interpersonal and adaptive manner it is named as affiliative humour; this humour style excludes the one's own needs and often focuses on creating bonds and interactions between other people while making jokes and funny statements about one's self or others within limits of personal respect and genuineness. Affiliative (or also known as social humour, see Martin, 2007) humour was found to be related to agreeableness, openness to experience and self-esteem (Saroglou & Scariot, 2002). Affiliative humour was found as a mediator between the relationship of disconnection schema domain and depression (Dozois, Martin & Bieling, 2009); this finding is not very surprising since disconnection schema domain often refers to connective and social sides of people (Young, 2003) and affiliative humour is based on social usage of humour.

Humour does not always function in a positive way for the person. If a person uses the humour in a maladaptive way and the subject of humour is him/her this type of humour is named as self-defeating humour. This humour style refers the one's humour ability as a way to make others laugh whereas bombing him/her down, devaluating him/herself or put him/her in bad situations. This style also includes the behaviour of denying one's feelings and admitting his/her as happy when s/he feels sorry, sad or miserable. Self-defeating humour may help individual to gain approval or acceptance like a clown. This style of humour was found to be negatively correlated with emotional stability, conscientiousness, attachment security and selfesteem (Saroglou & Scariot, 2002). Saroglou et al. (2010) found that self-defeating humour can predict marital satisfaction and divorce; women who use lesser selfdefeating humour had higher marital satisfaction whereas high users had higher divorce rate. Dozois, Martin and Faulkner (2013) found this type of humour usage mediates the relationship between aggression/hostility and impaired limits, disconnection/rejection, impaired autonomy domains, they concluded on the usage of humour can help at altering unwanted/dysfunctional behaviours and attitudes at people who have higher level schemas in these domains. Moreover in Dozois, Martin and Bieling's (2009) study a similar result was found, they stated that self-defeating humour can mediate the relationship between impaired limits and depression scores and also it mediates the relationship between exaggerated standards and depression scores.

If person uses a harmful tone in humour when socializing, this kind of maladaptive humour is called aggressive humour. This type of humour primarily helps one's needs of superiority and haze; the one oppresses, criticizes, ridicules and humiliates the other. This style is used to make the other's importance lessen and manipulate the others in order to reach one's own goals. The others often feel cold and detached to the person who uses that kind of humour style. Aggressive humour was found to be negatively correlated with agreeableness and conscientiousness (Saroglou & Scariot, 2002). This type of humour usage was found to be less in religious people (Saroglou, 2004). Dozois, Martin and Faulkner (2013) found that aggressive humour mediates the relationship between impaired limits schema domain and aggression.

Humour does not appear by itself, it bears notions of who we are and how we live. Saroglou and Jaspard (2001) found a relationship between low humour usage and religious fundamentalism. As a primary skill in human relationships; humour helps us to reduce the severity of anxiety and depression (Houston, McKee, Carroll & Marsh, 1998), it helps us to make more positive/adaptive cognitive appraisals when we face with problems and helps us to have a higher quality at psychological wellbeing (Maiolino & Kuiper, 2016). Kuiper, Kirsh and Maiolino (2016) claimed that higher usage of self-enhancing and affiliative humour and lesser usage of selfdefeating humour predicted higher levels of identity development, moreover higher usage of affiliative humour and lesser usage of self-defeating humour predicted higher levels of intimacy development; when taken together, they suggested that positive humour usage and higher levels in both intimacy and identity development can predict higher psychological wellbeing. The role of humour is already a wellaccepted concept in human psychological wellbeing and achieving a better state for human life (Seligman & Csikszentmihalyi, 2000).

1.3. Psychological Wellbeing

Psychological wellbeing is a popular concept in positive psychology; Diener (1984) stated that the ratio between positive and negative emotions in one's life gives the one's quality of psychological wellbeing. It was discussed that higher frequency of positive emotions and seldom experiences of negative emotions can make the person reach a higher psychological wellbeing (Diener, 1984). In Diener, Larsen, Levine and Emmons' (1985) study, they found that frequency of positive and negative emotions were negatively correlated, however intensity of emotion was positively correlated. In this study, it was concluded that frequency of emotion is a better sign for psychological wellbeing. This kind of wellbeing considered as hedonistic type psychological wellbeing (Keldal, 2015).

From another and more sociological perspective, Ryff (1989) suggested that psychological wellbeing rooted from six dimensions; these were Self-Acceptance (positive views of oneself and one's past), Personal Growth (a sense of progressive growth and change as an individual), Purpose in Life (the belief that one is living his/her life meaningfully), Positive Relations With Others (the value of good communication with others), Environmental Mastery (the ability of having a harmony with one's surrounding world) and Autonomy (sense of being an individual, a person by him/herself). Six factor model changed during time, Ryff and Keyes (1995) revisited model and found a one factor model which can explain eudemonic (human flourishing) wellbeing. Eudemonic wellbeing consists of the concepts of acceptance of self and being harmonious with environment in time being autonomous (Keldal, 2015). Other studies approached to the concept from eudemonic or hedonic views of life, for instance Satisfaction with Life Scale (Diener, Emmons, Larsen and Griffin, 1985) or Subjective Happiness Scale (Lyubomirsky and Lepper, 1999).

More recently Tennant, Hiller, Fishwick, Platt, Joseph, Weich, Parkinson, Secker and Stewart-Brown (2007) considered a more comprehensive view on mental wellbeing and they synthesized both eudemonic and hedonic wellbeing types in one concept. The study defined mental wellbeing as in forms of feeling optimistic, useful, relaxed, interested in other people, having energy to spare, dealing with issues well, thinking clearly, feeling good about oneself, feeling connected to other people, being confident about them, feeling loved, giving a chance to new things and feeling cheerful.

Psychological wellbeing is a combination of mood states and evaluations of self in domains of environment, past, future. Although Ryff and Keyes (1995) stated that psychological wellbeing is not solely related with mood, its related features are susceptible for change, the quality is plastic. In Weiss, Westerhof and Bohlmeijer's (2016) meta-analysis they found that psychological wellbeing can be altered via behavioural interventions. They stated that appropriate work on one's mood and evaluations can increase the quality of psychological wellbeing.

1.4. Aim of the Thesis

Psychological wellbeing gained importance via the help of positive psychology, its help on achieving higher physical health and quality of life is known (Keyes, 2002). Having higher levels of psychological wellbeing means having higher capacity for coping with stress, being productive in work life and being able to attribute society in a positive way (World Health Organization, 2004). When the features of psychological wellbeing examined one can see that psychological wellbeing is not only relates with one's interaction with others. It is also relates with one's intra personal qualities. One can consider that interpersonal part may include usage of humour and intra-personal part can bear early maladaptive schemas.

The negative effect of Early Maladaptive Schemas in human emotional wellbeing (Miklósi, Máté, Somogyi & Szabó, 2016) is known. This study accepts the humour style as an adaptive and maladaptive coping method and tests its mediating power on the relationship of early maladaptive schemas and psychological wellbeing. It is expected to find a decrease in influence power of early maladaptive schemas on psychological wellbeing when appropriate humour styles are present. If the mediation can be found, usage of humour can be also addressed when dealing with early maladaptive schemas and corrections in maladaptive usage of humour may promote higher psychological wellbeing for the patients/clients.

Martin et al. (2003) states that humour is neither solely interpersonal nor intrapsychic, it is not only positive or negative. Different types of humour can be expressed in different forms. One important suggestion that Martin et al. (2003) do is the importance of accessibility of self-observation. They state that although many studies conducted via self-report format for humour, untrained or unexperienced raters for self-observation may not easily express the rating to the questionnaire. Martin et al.'s (2003) critique on self-rating and observational raters also important in schema context too. Some schemas can be harder to notice for the person when compared to other people observe the person. Young (2003) states that some schemas (e.g. self-sacrifice, unrelenting standards, approval seeking) are hard to be appeared because of conditional activations of them. When taken together these conditional schemas may have lesser importance and relevance when interact with humour concept which Martin et al. (2003) states.

Moreover when Martin et al. (2003) and Martin's (2007) descriptions taken together it can be seen that schemas of abandonment, abuse, defectiveness, alienation, incompetence, vulnerability, enmeshment and failure schemas mostly fits the Martin et al.'s (2003) interaction mode explanation. These schemas can be subjects of adaptive or maladaptive humour. On the other hand, despite of the previous research (Dozois et al., 2009; Dozois et al., 2013), schemas of insufficient self-control/self-discipline, self-sacrifice, unrelenting standards does not congruent the humour suggested by Martin (2007). Martin (2007) states that humour expressed in forms of jokes, spontaneous conversational humour (verbally or non-verbally) and accidentally or unintentionally; insufficient self-control/self-discipline, self-sacrifice, unrelenting standards does not seem likely to appear in context of humour which Martin (2007) states and Martin et al. (2003) measures, as stated above.

When the changes of the schema domains and schemas in Turkish form of schema questionnaire (Soygüt et al., 2009) and Martin et al.'s (2003) considerations taken together, it can be seen that, the domains of impaired autonomy and disconnection/rejection remain similar with the original form and mostly consists the qualities which can be subjects of humour. Therefore, current study specifically evaluates disconnection/rejection and impaired autonomy schema domains rather than other-directedness, overvigilance and inhibition and impaired limits schema domains.

Therefore, the current study aims:

(1) To find correlations between schema domains, humour styles and psychological wellbeing

(2) To see if there is a mediating effect of humour style on the relationship between early maladaptive schemas and psychological wellbeing

The hypotheses are:

(1) Impaired autonomy and disconnection/rejection schema domains will be negatively correlated with psychological wellbeing.

(2) Impaired autonomy and disconnection/rejection schema domains will be negatively correlated with affiliative and self-enhancing humour styles.

(3) Impaired autonomy and disconnection/rejection schema domains will be positively correlated with aggressive and self-defeating humour styles.

(4) Affiliative and self-enhancing humour styles will be positively correlated with psychological wellbeing.

(5) Aggressive and self-defeating humour will be negatively correlated with psychological wellbeing.

(6) Negative effects of impaired autonomy, disconnection/rejection schemas on psychological wellbeing will be mediated by lower levels of affiliative and self-enhancing humour styles.

(7) Negative effects of impaired autonomy, disconnection/rejection schemas on psychological wellbeing will be mediated by higher levels of aggressive and self-defeating humour styles.

CHAPTER 2

METHOD

2.1 Participants

Participants were recruited from general population by using convenience sampling method. The number of participants was 212 (33.5% male); mean age of participants was 26.84 (SD 6.51) (ranged from 17 to 55). In terms of educational background; 2 participants had primary education (.9% of total), 13 participants had high school education (6.1% of total), 30 participants had associate degree (14.2% of total), 111 participants had bachelor's degree (52.4% of total), 48 participants had master's degree (22.6%), 8 participants had PhD degree (3.8%).

2.2 Measures

Young Schema Questionnaire Short Form (YSQ-SF) (Young, 2003): The Turkish form was standardized by Soygüt, Karaosmanoğlu and Çakır (2009). The form contains 90 items (6 point Likert type, higher points means higher schema appropriateness) which spread in 5 schema domains; the factors were Impaired Autonomy, Disconnection and Rejection, Unrelenting Standards, Impaired Limits and Other-Directedness. Turkish form's reliability is medium; the subscale reliability coefficients of Cronbach alpha ranges from .53 to .81 and test re-test reliability ranges from .66-.83.

The Humor Styles Questionnaire (HSQ) includes 32 items and it is a 7 point-Likert scale. The higher values in the scale represent higher usage of the humour style (Martin, Puhlik-Doris, Larsen, Gray & Weir, 2003). The Turkish form standardized by Yerlikaya (2003), Turkish form has four factors which represent four Humour Styles which are affiliative (Cronbach Alpha is .74), self-enhancing (Cronbach Alpha is .78), self-defeating (Cronbach Alpha is .67) and aggressive humour (Cronbach Alpha is .69), respectively. The test-retest reliability of the Turkish form ranged from .83-.91 Cronbach alphas.

The Warwick-Edinburgh Mental Well-Being Scale (WEMWBS) includes 14 items and 5 point-Likert scale. Higher values indicate higher levels of psychological wellbeing (Tennant et al., 2007). The scale standardized to Turkish by Keldal (2015), in Turkish form only one factor was found and it had very high internal reliability (Cronbach alpha was .92) but no information about test-retest reliability was given. Original form's test-retest reliability's Cronbach alpha was .83.

2.3 Procedure

The data were collected online via a form supported by Google Forms service (https://docs.google.com/forms), internet connection required to attend the study. After participants read and accepted the informed consent, demographic form and

questionnaires were presented. Participants who did not want to give consent were not authorized to see the questionnaires. The study's completion took around twenty minutes.



CHAPTER 3

RESULTS

3.1 Data Analysis Plan

Before conducting main analysis, data was checked for possible outliers. The total number of participants was 220, however after univariate and multivariate analyses, 8 multivariate outliers excluded and the main analysis was conducted with 212 participants. Standard deviation, means, minimum and maximum ranges were calculated for scales and sub-scales (see in Table 1). Pearson Correlation were calculated for all variables (see in Table 2); Young Schema Questionnaire Short Form with subscales of Impaired Autonomy Domain and Disconnection/Rejection Domain; Humour Styles Questionnaire with subscales of Affiliative humour, Aggressive humour, Self-Enhancing Humour and Self-Defeating Humour; Warwick-Edinburgh Mental Well-Being Scale.

In order to test the hypotheses, the mediation analysis was conducted by using bootstrapped multivariate extension of the MEDIATE test of mediation for this procedure (Preacher & Hayes, 2008), which evaluates the total, direct and indirect effects of independent variable (i.e., Early Maladaptive Schemas) on dependent variable (Psychological Wellbeing) through a stated mediator (i.e., Humour Styles). The bootstrapping sample was 10.000 and 95% confidence interval is examined. For confidence intervals, a range does not include zero were accepted as a mediation as Preacher and Hayes (2008) stated.

	Ν	Mean	SD	Range		
Early Maladaptive Schema Domains						
Impaired Autonomy Domain	212	2,18	,74	1 - 4.22		
Disconnection and Rejection Domain	212	2,18	,87	1 - 4.97		
Humour Styles						
Affiliative Humour	212	5,6	,95	2.75 - 7		
Aggressive Humour	212	2,79	,98	1 - 5.88		
Self-Enhancing Humour	212	4,32	1,2	1.63 - 7		
Self-Defeating Humour	212	3,48	1	1.13 - 6.13		
Psychological Wellbeing	212	3,84	,67	1.93 - 5		

Table 1. Descriptive Information for Measures.

3.2 Correlation Analysis between Groups of Variables

In order to investigate the relationship between variables, bivariate correlations using the Pearson's r were conducted. Below, the results of the correlation are reported (see in Table 2).

Autonomy schema domain was positively correlated with both aggressive (r = .141, p < .05) and self-defeating (r = .272, p < .001) humour styles and disconnection/rejection (r = .727, p < .001) schema domain whereas it was

negatively correlated with affiliative (r = -.26, p < .001) and self-enhancing (r = -.233, p < .01) humour styles and psychological wellbeing (r = -.517, p < .001).

In disconnection/rejection schema domain, the domain was negatively correlated with affiliative humour (r = -.33, p < .001) and self-enhancing (r = -.151, p < .05) humour; positively correlated with both aggressive (r = .201, p < .01) and self-defeating (r = .31, p < .001) humour styles. It was also negatively correlated with psychological wellbeing (r = -.426, p < .001).

Affiliative humour style was found positively correlated with self-enhancing (r = .51, p < .001) humour and psychological wellbeing (r = .277, p < .001). Affiliative humour did not significantly correlate with aggressive and self-defeating humour. Aggressive humour style was found positively correlated with self-defeating humour (r = .238, p < .001) and negatively correlated with psychological wellbeing (r = -.273, p < .001). Self-Enhancing Humour was found positively correlated with self-defeating humour (r = .194, p < .01) and psychological wellbeing (r = .47, p < .001). Self-Defeating Humour was found negatively correlated with psychological wellbeing (r = .143, p < .05).

Table 2. Correlations among the Variables.

	1	2	3	4	5	6	7
 Impaired Autonomy Domain 		.727***	26***	.141*	233**	.272***	517***
2. Disconnection Domain			33***	.201**	151*	.31***	426***
3. Affiliative Humour				014	.51***	.095	.277***
4. Aggressive Humour					095	.238***	273***
5. Self-Enhancing Humour						.194**	.47***
6. Self-Defeating Humour							143*
7. Psychological Wellbeing Note: *p <.05, **p<	01,	***p<.00.	1.				

3.3 Testing Mediation Effect

In the analysis, autonomy and disconnection domains considered as independent (predictor) variables, humour styles (affiliative, aggressive, selfenhancing and self-defeating) used as mediator variables and psychological wellbeing was taken as dependent (criterion) variable (See in Table 3).

	Coefficient	SE	Р	BC Bootstrap 95% CI	
				Lower	Upper
Total Effect of IVs' on					
Psychological					
Wellbeing					
Autonomy	40	.08	.00		
Disconnection	08	.06	.22		
Direct Effect of IVs' on					
Psychological					
Wellbeing					
Autonomy	30	.07	.00		
Disconnection	06	.06	.31		
Indirect Effect of IVs		7	7 7	_	
on Psychological					
Wellbeing through					
Affiliative Humour					
Autonomy	.00	.01		01	.02
Disconnection	.01	.01		02	.04
Indirect Effect of IVs		7			
on Psychological					
Wellbeing through					
Aggressive Humour					
Autonomy	.00	.01		03	.03
Disconnection	02	.01		06	00
Indirect Effect of IVs'					
on Psychological					
Wellbeing through Self-					
Enhancing Humour					
Autonomy	09	.04		17	02
Disconnection	.01	.03		05	.07
Indirect Effect of IVs'					
on Psychological					
Wellbeing through Self-					
Defeating Humour					
Autonomy	.00	.01		03	.01
Disconnection	.01	.01		04	.01

Table 3. Results of the Mediation of Early Maladaptive Schema Domains onPsychological Wellbeing through Humour Styles

The total effect of Early Maladaptive Schema Domains (Autonomy and Disconnection/Rejection) on Psychological Wellbeing was found significant ($F_{2, 209}$ = 39.15, p < .001, $R^2 = .27$).

In terms of the relationship between independent and dependent variables, the direct effect of the Impaired Autonomy domain (IV) on Psychological Wellbeing (DV) [β = -.40, s.e. = .08, p <.001; R^2 =.27] and Disconnection/Rejection domain (IV) on Psychological Wellbeing (DV) [β = -.08, s.e. = .06, p = .22; R^2 =.27].

Regarding the relationship among independent variables and possible mediator variables, the direct effect of the Disconnection/Rejection domain (IV) on Affiliative Humour (Mediator), was significant [$\beta = -.33$, s.e. = .10, p <.01; $R^2 =.11$]. Also the direct effect of the Disconnection/Rejection domain (IV) on Aggressive Humour (Mediator), was significant [$\beta = .23$, s.e. = .11, p <.05; $R^2 =.04$]. In addition, the direct effect of the Impaired Autonomy domain (IV) on Self-Enhancing Humour (Mediator) [$\beta = -.42$, s.e. = .16, p <.01; $R^2 =.05$] and the direct effect of the Disconnection/Rejection domain (IV), were significant [$\beta = .27$, s.e. = .11, p <.05; $R^2 =.05$].

In terms of direct effects Disconnection/Rejection schema domain had an indirect effect on Psychological Wellbeing through Aggressive Humour ($\beta = -.02$, s.e. = .01, 95% CI [-.06, -.00]). Also, Impaired Autonomy schema domain had an indirect effect on Psychological Wellbeing through Self-Enhancing Humour ($\beta = -.09$, s.e. = .04, 95% CI [-.17, -.02]).

Regarding the mediational models, the effect on mediating variables demonstrated that Impaired Autonomy had a significant effect on Self-Enhancing humour [$\beta = -.42$, s.e. = .16, p < .01; $R^2 = .05$], Self-Enhancing Humour had an effect on Psychological Well-Being [β = .22, s.e. = .03, p <.001; R^2 =.43] and Impaired Autonomy had an indirect effect on Psychological Wellbeing through Self-Enhancing Humour style (β = -.09, s.e. = .04, 95% CI [-.17, -.02]) (See in figure 1). This is a complementary mediation as stated in Zhao, Lynch JR. and Chen (2010). No other significant effects were found by Impaired Autonomy domain on humour styles.

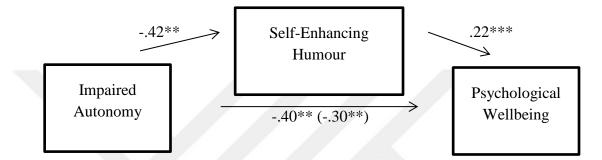


Figure 1. Mediation Model of Indirect Effect of Impaired Autonomy Schema Domain on Psychological Wellbeing, through Self-Enhancing Humour. Note: **p < .01.

Regarding the mediational models, the effect on mediating variables demonstrated that Disconnection/Rejection had a significant effect on Aggressive Humour [β = .23, s.e. = .11, p < .05; R^2 =.04], Aggressive Humour had an effect on Psychological Well-Being [β = -.11, s.e. = .04, p < .01; R^2 =.43] and Disconnection/Rejection had an indirect effect on Psychological Wellbeing through Aggressive Humour style (β = -.02, s.e. = .01, 95% CI [-.06, -.00]) (See in figure 2). This is an indirect-only mediation as stated in Zhao, Lynch JR. and Chen (2010). No other significant effects were found by Disconnection/Rejection schema domain on humour styles.

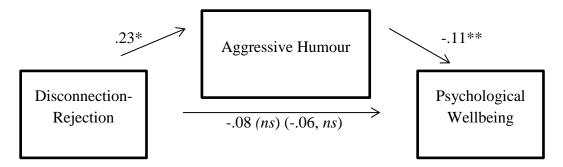


Figure 2. Mediation Model of Indirect Effect of Disconnection and Rejection Schema Domain on Psychological Wellbeing, through Aggressive Humour. Note: *p < .05, **p < .01.



CHAPTER 4

DISCUSSION

The aim of this study was to explore the relationships among schema domains and psychological wellbeing, and the potential mediating role of humour styles in this relationship.

4.1. Interpretation of Data Analyses

4.1.1. Evaluation of Correlation Analyses

First five hypotheses were on correlational relationships between early maladaptive schema domains, humour styles and psychological wellbeing. It was expected to find Autonomy and Disconnection/Rejection schema domains to be negatively correlated with psychological wellbeing (Hypothesis 1). Impaired Autonomy and Disconnection/Rejection schema domains expected to be negatively correlated with affiliative and self-enhancing humour styles (Hypothesis 2). Impaired Autonomy and Disconnection/Rejection schema domains expected to be positively correlated with aggressive and self-defeating humour styles (Hypothesis 3). Affiliative and self-enhancing humour styles expected to be positively correlated with psychological wellbeing (Hypothesis 4). Aggressive and self-defeating humour expected to be negatively correlated with psychological wellbeing (Hypothesis 5).

The correlation analyses showed that autonomy domain negatively correlated with adaptive humour (i.e. Self-enhancing and affiliative humour) and positively correlated with maladaptive humour (i.e. Self-defeating humour and aggressive humour). Martin (2007) stated that adaptive humour's main function is to decrease tension and stress among others and create an internal coping mechanism for intrapersonal issues. Similarly, autonomy domain mainly focuses on one's ability to cope stressful occasions both caused by internal and external stressors such as relatives, significant other or self (Young et al., 2003). When taken together, the correlation analysis showed that an increase in the sense of damaged autonomy can be in line with a decrease of one's ability at relieving stress for self and others. For interpersonal part, aggressive humour helps one at manipulating others when one feels disadvantaged (Martin, 2007) and one can use aggressive humour to get in an advantageous position. Furthermore, in Frewen, Brinker, Martin and Dozois's (2008) study, need for control was predicted by aggressive humour; therefore if one is in need of a quick stabilization of anxiety, he or she can try to suppress the anxiety that caused by the other via oppressing the other with aggressive humour. For intrapersonal part, self-defeating humour can help the person by showing him/her as a less threatening object, therefore this kind of manipulation can lead to a merciful help by others and by this way one can suppress or deny the problems that emerge as a result of decreased sense of autonomy (Martin, 2007). This finding is also congruent with previous research (Frewen et al., 2008; Dozois et al., 2009).

Correlation analysis showed that an increase in damaged sense of autonomy associated with a decrease at psychological wellbeing. WHO (2001, 2004) states that some of the important qualities of psychological wellbeing are ability to relieve stress, having a sense of contribution to society and ability to work productively. These qualities are also the lacking qualities of autonomy domain schema bearers and Young (2003) states that impaired autonomy domain schema bearers have a strong belief on their low functionality in daily issues and lower problem solving skills.

Disconnection domain was positively correlated with maladaptive humour styles (i.e. self-defeating and aggressive humour). This means that an increase in the feeling of being detached, alienated, unlovable and uncared was linked with an increase at aggressive, manipulative or self-criticizing, clownish humour. Disconnection schema's positive correlation with self-defeating humour is known (Dozois et al., 2009; Dozois et al., 2013); humour here can be evaluated as a maladaptive coping mechanism. Disconnection domain schema bearers often criticized by being needy, fragile (Young, 2003); just like in the autonomy domain, self-defeating humour can help these people at projecting themselves as in need of help in an acceptable way and help them at acquiring attention, affection or care that they need. Also, when the schema modes are taken into account, detached protector (Young et al., 2003) mode can use this humour style and become numb against the shame and abasement. Disconnection domain's positive correlation with aggressive humour was not present in previous studies (Dozois et al., 2009; Dozois et al., 2013) however it is also meaningful when aggressive humour is taken as a maladaptive coping method as Young (1990) stated. Aggressive humour can be thought as a

schema surrender type of coping for disconnection schema. A person who feels detached, unlovable or neglected may not want to get into a social interaction with others because of the fear of experiencing these negative feelings again and one can try not to create bonds with others; therefore, one can push the others away with his/her aggressive jokes or insults and suppress the feeling of alienation by doing this. Martin et al. (2003) also suggests that higher aggressive humour was linked with lesser levels of conscientiousness and agreeableness, which helps greatly at forming and maintaining bonds with both groups and persons. On part of adaptive humour styles, as expected, affiliative humour was negatively correlated with disconnection domain and this finding was in line with Young's (2003) description of that schema bearers. Young (2003) states that disconnection schema bearers are often considered as cold, edgy or uncaring people by others and Frewen et al. (2008) suggests that people who use affiliative humour are less vulnerable to interpersonal sensitivity (e.g. fighting, grudging). When these statements are evaluated together, it can be said that lower levels of affiliative humour usage were associated with higher levels of disconnection schema since disconnection schema consists of lesser interpersonal sensitivity. Correlation analyses showed that self-enhancing humour was negatively correlated with disconnection schema. This relationship was also found in previous research (Dozois et al., 2009; Dozois et al., 2013). One explanation on that can be Young et al.'s (2003) comment on disconnection schema, they state that often the most damaged and problematic cases are coming from this domain's problems. Furthermore, Martin (2007) states that frequent use of self-enhancing humour may cause people to be less vulnerable to emotional disturbances. Thus, the protective barrier of self-enhancing humour may reflect the correlational relationship between disconnection and self-enhancing humour. Disconnection schema was negatively correlated with psychological wellbeing. Most qualities of psychological wellbeing relate with autonomy and positive mood (Tennant et al., 2007), disconnection domain is also very closely related to depression (Dozois et al., 2009; Young et al., 2003); thus, an increased feeling of disconnection and rejection may be in line with reduced psychological wellbeing.

According to the results of the present study, psychological wellbeing most strongly correlated with autonomy, self-enhancing humour and disconnection domain, respectively. As Ryff (1989) states, eudemonic (meaningful) living can be achieved by one's personal growth, purpose in life and of course, autonomy; present study's findings are in line with these qualities. An autonomous person can have the ability of pursuing for his/her purpose in life and through time one can increase his/her personal growth; in the end one can increase the meaningfulness of his/her life and achieve eudemonic living. Also, as Ryff and Keyes (1995) states, one should achieve a better understanding of himself/herself. Furthermore, as Martin (2007) states, self-enhancing humour can help one at solving intra personal conflicts in a better way and increase acceptance of self and life, therefore it can be said that Ryff and Keyes's (1995) self-acceptance feature of psychological wellbeing can be achieved by using self-enhancing humour. This explains the positive correlational relationship between self-enhancing humour and psychological wellbeing. On the part of disconnection schemas, Ryff (1989) and Tennant et al. (2007) argues that positive affect (also hedonism) cannot be the sole predictor of psychological wellbeing. Additionally, one's positive relationships and environmental mastery (harmony) plays a big role at achieving higher psychological wellbeing. In the results of the present study, one can see that the disconnection schema was negatively correlated with psychological wellbeing. This negative correlation is supported by Ryff (1989), Ryff and Keyes (1995) and Tennant et al.'s (2007) explanations of psychological wellbeing. If one cannot create a sense of belongingness, complains about rejections and feels alienated; he or she may not reach the criteria of higher psychological wellbeing (Ryff, 1989; Ryff & Keyes, 1995; Tennant et al.'s, 2007). Psychological wellbeing was positively correlated with aggressive humour and negatively correlated with affiliative humour. As Martin et al. (2003) affiliative humour should include self-acceptance, which is an important feature of psychological wellbeing. Furthermore, affiliative humour often found together with high extraversion (Martin et al., 2003) which is found low on disconnection schema bearers (Ehsan & Bahramizadeh, 2011). On the other hand, aggressive humour's negative correlation with psychological wellbeing is congruent with psychological wellbeing; psychological wellbeing includes a sense of connectedness and interest for the other (Tennant et al., 2007). A decrease in these qualities (via a decrease in psychological wellbeing) can be occur with an increase at the use of aggressive humour (which pushes the humour's subject, the other, away) this negative correlation between psychological wellbeing and aggressive humour can explained in this way. As expected, self-defeating humour was negatively correlated with psychological wellbeing. As Martin et al. (2003) state, self-defeating humour is a defensive process which gives a chance to achieve ingratiation (see Ford & Ferguson, 2004) with the (powerful) other. The notion of being defensive is very important here since psychological wellbeing, for the most models, considered as closely related with human flourishing (Ryff & Keyes, 1995; Diener, Emmons,

Larsen & Griffin, 1985; International Wellbeing Group, 2006; Diener, Wirtz, Tov, Kim-Prieto, Choi, Oishi & Biswas-Diener, 2010) and human flourishing requires being more expansive, open rather than being defensive. In line with this information, using more self-defeating humour may follow a decrease in psychological wellbeing since the one cannot be defensive and expansive both (for the life domains).

In the light of these findings, it can be said that first five hypotheses of the study that mentioned above are supported.

4.1.2. Evaluation of Mediation Analyses

Hypothesises 6 and 7 are on mediational effect of humour styles on the relationship between early maladaptive schemas and psychological wellbeing. Negative effects of impaired autonomy, disconnection/rejection schemas on psychological well-being expected to be mediated by lower levels of affiliative and self-enhancing humour styles (hypothesis 6). Negative effects of impaired autonomy, disconnection/rejection schemas on psychological well-being expected to be mediated by higher levels of aggressive and self-defeating humour styles (hypothesis 7). These hypothesises of the study rooted from Young's (2003) assertions on humour, that it can be thought as a coping mechanism and may reflect some characteristics of personality. Young et al. (2003) also states that coping mechanisms can lead person to positive or negative consequences.

According to the results of the study, impaired autonomy domain had a direct effect on both self-enhancing humour and psychological wellbeing. This was an expected result since Ryff (1989, 1995) and Tennant et al. (2007) stated that autonomy is one of the important predictors of psychological wellbeing and a eudemonic life requires a will to make decisions that can change the direction of the person's life. On the part of humour styles, self-enhancing humour's main function is to create a protective barrier for the person while facing difficulties in life and this barrier helps the one at continuing his/her own way even while facing and struggling with problems (Martin et al., 2003). Furthermore, mediation analyses showed that impaired autonomy domain had an indirect effect on psychological wellbeing through self-enhancing humour. In other words, an increase at impaired autonomy domain can predict a decrease at psychological wellbeing; usage of self-enhancing humour can decrease prediction power of impaired autonomy domain and partially mediate the relationship. Mediational effect of self-enhancing humour on the relationship between impaired autonomy and depression (Dozois et al., 2009) and between impaired autonomy and aggression (Dozois et al., 2013) was found in earlier studies. The complementary mediation (Zhao, Lynch JR. & Chen, 2010) of self-enhancing humour style on the relationship between impaired autonomy domain and psychological wellbeing was found for the first time. This mediational relationship can be evaluated as a cycle in which through lower levels of reinforcement for taking initiatives during childhood (and also with temperament), one can create negative beliefs about his/her autonomy (Young, 2003). A person with lower levels of autonomy may not evaluate his/her capabilities very well and may not find ways (such as self-enhancing humour) to decrease the personal stress/tension of daily life (Dozois et al., 2009; Dozois et al., 2013). On the other hand, if a person can achieve or find a way to reduce tension of daily life (i.e. selfenhancing humour) his/her impaired autonomy's negative impact on his/her psychological wellbeing may decrease. However, as Zhao, Lynch JR. and Chen (2010) states, in complementary mediation the possibility of other omitted mediators are present. Thus, the mediational relationship between impaired autonomy and psychological wellbeing can be a subject for other mediators.

In the disconnection/rejection schema domain side, results of the present study demonstrated that disconnection domain has a direct effect on aggressive humour and has no significant effect on psychological wellbeing. The non-significant effect of disconnection on psychological wellbeing may seem as contradicting with the previous findings (Dozois et al., 2009; Dozois et al., 2013) however Tennant et al. (2007) described psychological wellbeing as "feeling optimistic, useful, relaxed, interested in other people, having energy to spare, dealing with issues well, thinking clearly, feeling good about oneself, feeling connected to other people, being confident about them, feeling loved, giving a chance to new things and feeling cheerful", and only four out of twelve qualities of psychological wellbeing relate to the issues that disconnection/rejection schema domain includes. Therefore, it can be said that the correlation between disconnection domain and psychological wellbeing may not be carried to a significant effect since the ties are loose. On the side of humour, disconnection schema domain's effect of aggressive humour can be explained by Young et al. (2008) and Lobbestael and Arntz's (2012) descriptions of disconnection/rejection schema domain. In both studies, they stated that disconnection/rejection schema domain bearers considered themselves as unlovable, unwanted or inferior; in time, because of these beliefs, they grow a tendency to act in a self-destructive way to avoid or terminate close relationships. This tendency is very similar to Martin's (2007) description of aggressive humour. To sum up,

disconnection/rejection schema domain can affect the humour style and may cause more aggressive humour usage in order to sweep people away (work like schema surrender mechanism). Disconnection/rejection schema domain has an indirect effect over psychological wellbeing through aggressive humour; in other words, aggressive humour mediates the relationship between disconnection domain and psychological wellbeing. In line with the explanation above, it can be stated that disconnection may not affect psychological wellbeing however it directly affects aggressive humour which directly affects psychological wellbeing. Moreover, it can be said that a person's severity of disconnection/rejection schema may not have an effect on one's psychological wellbeing, however having a problematic sense of connection can affect one's type of humour usage and one can start using aggressive humour more. In the end, usage of aggressive humour can make the individual more disconnected and sad. This mechanism acts like schema surrender coping style of disconnection schema and may reinforce the beliefs about self. Zhao, Lynch JR. and Chen (2010) states that the mediational relationship suggested in this study is an indirect-only type mediation; they state that the selected mediator is consistent with the hypothesized framework and other mediators may not fit in the model.

Overall, a dominant schema domain may or may not affect one's psychological wellbeing and the type of humour usage can change the effect of the schema on psychological wellbeing. Here, it can be seen that impaired autonomy's relationship with psychological wellbeing is mediated by self-enhancing humour whereas disconnection schema domain uses aggressive humour to indirectly affect psychological wellbeing. Thus, sixth and seventh hypotheses of the study partially supported.

4.2. Limitations

Present study includes various limitations. Firstly, participants' education levels and gender ratio were not balanced. There were two times more female participants when compared with males in the study. Also, half of the participants had bachelor's degree and one quarter of participants had higher than bachelor's degree whereas other groups were not equally spread and represented. These qualities may decrease generalizability of the study. In the aging part, Shammi and Stuss (2003) state that humour usage rate and type changes through life, they found that elder people use different humour types than younger people, therefore in the present study, the participants were often younger (M= 26.84, SD = 6.51) and this may create a general representational and performance related differences and problems.

Aside from these limitations, there were some minimal structural changes at schema domains and sub-schemas in the Turkish version (Soygüt et al., 2009). The migrations in the sub-schemas may not change the structure of the form since all migrations happened in the same domain; however, spreading the items of Subjugation schema (of Other-Directedness domain) to Enmeshment/Dependence (of Autonomy Domain) and Abandonment/Instability (of Autonomy Domain again) may weakened the schema structure of the Other-Directedness domain and created a confounding variation in the Autonomy domain. Also, Abandonment schema was originally a schema of Disconnection/Rejection domain, this reallocation of the schema changed the original schema structure 5 disconnection related schemas to 4 disconnection related schemas in Turkish form. Again, the variation in the data may have been changed through these alterations in the Turkish form. Therefore, weak interactions between variables may be caused by these alterations in the Turkish form when compared with other cultures' studies.

4.3. Future Research

For a better representation, more equal numbers for different age layers, education degrees and gender can help the further studies' generalizability. Especially by referring Shammi and Stuss's study (2003), the amount of change in the psychological wellbeing (via the effect of humour usage) can be addressed in further studies. This may help researchers at understanding the change in the importance of the humour through human life.

Aside from these, early maladaptive schema concept is mostly discussed in a concept of character pathologies and long term problems (Young, 1990, 2003). Schema therapy (and theory) highly focuses on borderline and narcissistic personality disorders (Young et al., 2003; Arntz & van Genderen, 2009). Schema questionnaire also provides clinical cut-off points for research (Soygüt et al., 2009) however present study does not focus on pathology. In humour styles' side, the relationship between pathology and humour usage was assessed in recent studies (Meyer, Helle, Tucker, Lengel, DeShong, Wingate & Mullins-Sweatt, 2017; Tucker, Wingate, Slish, O'Keefe, Cole & Hollingsworth, 2014). For further research, a clinical cut-off point requisition can be used in order to understand how early maladaptive schemas affect psychological wellbeing and how humour usage affects that relationship. Also for further studies, clinical sample can be taken from borderline and narcissistic personality disorder patients, which schema therapy has a

main focus on. That kind of additional explorations on the relationship between schemas and humour may help the patients' therapy process and daily life quality.

4.4. Clinical Implications and Contributions

Current study examined the mediator role of humour styles in the relationship between early maladaptive schemas and psychological wellbeing. Previous studies on the mediating role of humour style were mostly assessed the relationship on the concept of pathologies (Meyer el al., 2017; Tucker et al., 2014; Dozois et al., 2009; Dozois et al., 2013) however present study examines the relationship in a more general context.

Firstly, in positive psychology aspect, the results of the study suggest that presence of an early maladaptive schema may or may not affect a person's psychological wellbeing. The effect at psychological wellbeing can be altered by the appropriate humour usage. This finding tells that, a person with selected early maladaptive schemas can intervene the negative effect of the schema (to his/her psychological wellbeing) without a therapeutic help. A growing mindfulness on the humour usage can help the person at detection of harmful tendencies which also harms the person and the other, meantime. Moreover, from Seligman and Csikszentmihalyi (2000)'s perspective especially self-enhancing humour can be considered as a *buffer*, they state that positive experiences may build optimism which in the end create a preventive barrier for future stress. To add, a decrease in aggressive humour usage may increase collective well-being since harming the others may end up having lesser overall happiness for the society or clique.

Secondly, in clinical application, a schema therapist's main work starts with the detection of the damaged domain (Young et al., 2003). When the damaged need (or unsatisfied urge) is found, the therapist starts to explain; the development and acquisition of schemas are presented to the patient. Behavioural, cognitive and experiential techniques are to be used to intervene the schematic activations and correct the maladaptive coping behaviours. If a therapist is aware of this mediating power of humour, s/he can also intervene it in order to increase the life quality of the patient and the therapy. Despite of well-known maladaptive coping methods (for further information: Young, 1990, 2003), present study suggests that humour can be taken as a maladaptive coping style and can be addressed inside the therapy room. Humour is one of the most easily accessible cognitive constructs of a person, it can be found any part of human life, production of humour is very broad (Martin, 2007). In absence of basic cognitive distortions for a client, current study states that humour can be addressed in therapy. Moreover, as Weiss et al. (2016) state, behavioural interventions can help at increasing psychological wellbeing. In therapy room, adaptive humour exercises can be done as a behavioural intervention and adaptive humour usage can be supported to be used in daily life for the client. In the end clients can build up resilience for depression and anxiety (Seligman & Csikszentmihalyi, 2000).

Lastly, as Martin (2007) states, the little research has done in the field of humour both on humour based therapies and humour as a therapeutic technique. The findings of the present study suggest for a refocus on the concept of humour, which is overlook mostly by the therapeutic aspects.

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APPENDIX A

YOUNG SCHEMA QUESTIONNAIRE SHORT FORM (YSQ-SF)

Yönerge: Aşağıda, kişilerin kendilerini tanımlarken kullandıkları ifadeler sıralanmıştır. Lütfen her bir ifadeyi okuyun ve sizi ne kadar iyi tanımladığına karar verin. Emin olamadığınız sorularda neyin doğru olabileceğinden çok, sizin **duygusal olarak** ne hissettiğinize dayanarak cevap verin.

Bir kaç soru, anne babanızla ilişkiniz hakkındadır. Eğer biri veya her ikisi şu anda yaşamıyorlarsa, bu soruları o veya onlar hayatta iken ilişkinizi göz önüne alarak cevaplandırın.

1'den 6'ya kadar olan seçeneklerden sizi tanımlayan en yüksek şıkkı seçerek her sorudan önce yer alan boşluğa yazın.

Derecelendirme:

1- Benim için tamamıyla yanlış

2- Benim için büyük ölçüde yanlış

3- Bana uyan tarafi uymayan tarafından biraz fazla

4- Benim için orta derecede doğru

5- Benim için çoğunlukla doğru

6- Beni mükemmel şekilde tanımlıyor

1. _____ Bana bakan, benimle zaman geçiren, başıma gelen olaylarla gerçekten ilgilenen kimsem olmadı.

2. _____ Beni terkedeceklerinden korktuğum için yakın olduğum insanların peşini bırakmam.

3. _____ İnsanların beni kullandıklarını hissediyorum

4. ____ Uyumsuzum.

5. _____ Beğendiğim hiçbir erkek/kadın, kusurlarımı görürse beni sevmez.

6. ____ İş (veya okul) hayatımda neredeyse hiçbir şeyi diğer insanlar kadar iyi yapamıyorum

7. ____ Günlük yaşamımı tek başıma idare edebilme becerisine sahip olduğumu hissetmiyorum.

8. _____ Kötü bir şey olacağı duygusundan kurtulamıyorum.

9. _____ Anne babamdan ayrılmayı, bağımsız hareket edebilmeyi, yaşıtlarım kadar, başaramadım.

10. _____ Eğer istediğimi yaparsam, başımı derde sokarım diye düşünürüm.

11. _____ Genellikle yakınlarıma ilgi gösteren ve bakan ben olurum.

12. ____ Olumlu duygularımı diğerlerine göstermekten utanırım (sevdiğimi, önemsediğimi göstermek gibi).

13. _____ Yaptığım çoğu şeyde en iyi olmalıyım; ikinci olmayı kabullenemem.

14. ____ Diğer insanlardan bir şeyler istediğimde bana "hayır" denilmesini çok zor kabullenirim.

15. _____ Kendimi sıradan ve sıkıcı işleri yapmaya zorlayamam.

16. _____ Paramın olması ve önemli insanlar tanıyor olmak beni değerli yapar.

17. _____ Her şey yolunda gidiyor görünse bile, bunun bozulacağını hissederim.

18. _____ Eğer bir yanlış yaparsam, cezalandırılmayı hakkederim.

19. _____ Çevremde bana sıcaklık, koruma ve duygusal yakınlık gösteren kimsem yok.

20. _____ Diğer insanlara o kadar muhtacım ki onları kaybedeceğim diye çok endişeleniyorum.

21. ____ İnsanlara karşı tedbiri elden bırakamam yoksa bana kasıtlı olarak zarar vereceklerini hissederim.

22. ____ Temel olarak diğer insanlardan farklıyım.

23. _____ Gerçek beni tanırlarsa beğendiğim hiç kimse bana yakın olmak istemez.

24. ____ İşleri halletmede son derece yetersizim.

25. _____ Gündelik işlerde kendimi başkalarına bağımlı biri olarak görüyorum.

26. _____ Her an bir felaket (doğal, adli, mali veya tıbbi) olabilir diye hissediyorum.

27. ____ Annem, babam ve ben birbirimizin hayatı ve sorunlarıyla aşırı ilgili olmaya eğilimliyiz.

28. ____ Diğer insanların isteklerine uymaktan başka yolum yokmuş gibi hissediyorum; eğer böyle yapmazsam bir şekilde beni reddederler veya intikam alırlar.

29. _____ Başkalarını kendimden daha fazla düşündüğüm için ben iyi bir insanım.

30. ____ Duygularımı diğerlerine açmayı utanç verici bulurum.

31. ____ En iyisini yapmalıyım, "yeterince iyi" ile yetinemem.

32. _____ Ben özel biriyim ve diğer insanlar için konulmuş olan kısıtlamaları veya sınırları kabul etmek zorunda değilim.

33. ____ Eğer hedefime ulaşamazsam kolaylıkla yılgınlığa düşer ve vazgeçerim.

34. _____ Başkalarının da farkında olduğu başarılar benim için en değerlisidir.

35. ____ İyi bir şey olursa, bunu kötü bir şeyin izleyeceğinden endişe ederim.

36. ____ Eğer yanlış yaparsam, bunun özürü yoktur.

37. _____ Birisi için özel olduğumu hiç hissetmedim.

38. _____ Yakınlarımın beni terk edeceği ya da ayrılacağından endişe duyarım

39. _____ Herhangi bir anda birileri beni aldatmaya kalkışabilir.

40. _____ Bir yere ait değilim, yalnızım.

41. _____ Başkalarının sevgisine, ilgisine ve saygısına değer bir insan değilim.

42. ____ İş ve başarı alanlarında birçok insan benden daha yeterli.

43. ____ Doğru ile yanlışı birbirinden ayırmakta zorlanırım.

44. _____ Fiziksel bir saldırıya uğramaktan endişe duyarım.

45. _____ Annem, babam ve ben özel hayatımız birbirimizden saklarsak, birbirimizi aldatmış hisseder veya suçluluk duyarız

46. ____ İlişkilerimde, diğer kişinin yönlendirici olmasına izin veririm.

47. ____ Yakınlarımla o kadar meşgulüm ki kendime çok az zaman kalıyor.

48. _____ İnsanlarla beraberken içten ve cana yakın olmak benim için zordur.

49. ____ Tüm sorumluluklarımı yerine getirmek zorundayım.

50. ____ İstediğimi yapmaktan alıkonulmaktan veya kısıtlanmaktan nefret ederim.

51. ____ Uzun vadeli amaçlara ulaşabilmek için şu andaki zevklerimden fedakarlık etmekte zorlanırım

52. _____ Başkalarından yoğun bir ilgi görmezsem kendimi daha az önemli hissederim.

53. _____ Yeterince dikkatli olmazsanız, neredeyse her zaman bir şeyler ters gider.

54. _____ Eğer işimi doğru yapmazsam sonuçlara katlanmam gerekir.

55. _____ Beni gerçekten dinleyen, anlayan veya benim gerçek ihtiyaçlarım ve duygularımı önemseyen kimsem olmadı.

56. ____ Önem verdiğim birisinin benden uzaklaştığını sezersem çok kötü hissederim.

57. _____ Diğer insanların niyetleriyle ilgili oldukça şüpheciyimdir.

58. _____ Kendimi diğer insanlara uzak veya kopmuş hissediyorum.

59. _____ Kendimi sevilebilecek biri gibi hissetmiyorum.

60. ____ İş (okul) hayatımda diğer insanlar kadar yetenekli değilim.

61. _____ Gündelik işler için benim kararlarıma güvenilemez.

62. _____ Tüm paramı kaybedip çok fakir veya zavallı duruma düşmekten endişe duyarım.

63. ____ Çoğunlukla annem ve babamın benimle iç içe yaşadığını hissediyorum-Benim kendime ait bir hayatım yok.

64. _____ Kendim için ne istediğimi bilmediğim için daima benim adıma diğer insanların karar vermesine izin veririm.

65. ____ Ben hep başkalarının sorunlarını dinleyen kişi oldum.

66. _____ Kendimi o kadar kontrol ederim ki insanlar beni duygusuz veya hissiz bulurlar.

67. _____ Başarmak ve bir şeyler yapmak için sürekli bir baskı altındayım.

68.____ Diğer insanların uyduğu kurallara ve geleneklere uymak zorunda olmadığımı hissediyorum.

69. _____ Benim yararıma olduğunu bilsem bile hoşuma gitmeyen şeyleri yapmaya kendimi zorlayamam.

70. _____ Bir toplantıda fikrimi söylediğimde veya bir topluluğa tanıtıldığımda onaylanılmayı ve takdir görmeyi isterim.

71. _____ Ne kadar çok çalışırsam çalışayım, maddi olarak iflas edeceğimden ve neredeyse her şeyimi kaybedeceğimden endişe ederim.

72. _____ Neden yanlış yaptığımın önemi yoktur; eğer hata yaptıysam sonucuna da katlanmam gerekir.

73. _____ Hayatımda ne yapacağımı bilmediğim zamanlarda uygun bir öneride bulunacak veya beni yönlendirecek kimsem olmadı.

74. ____ İnsanların beni terk edeceği endişesiyle bazen onları kendimden uzaklaştırırım.

75. _____ Genellikle insanların asıl veya art niyetlerini araştırırım.

76. _____ Kendimi hep grupların dışında hissederim.

77. _____ Kabul edilemeyecek pek çok özelliğim yüzünden insanlara kendimi açamıyorum veya beni tam olarak tanımalarına izin vermiyorum.

78. ____ İş (okul) hayatımda diğer insanlar kadar zeki değilim.

79. _____ Ortaya çıkan gündelik sorunları çözebilme konusunda kendime güvenmiyorum.

80. _____ Bir doktor tarafından herhangi bir ciddi hastalık bulunmamasına rağmen bende ciddi bir hastalığın gelişmekte olduğu endişesine kapılıyorum.

81. _____ Sık sık annemden babamdan ya da eşimden ayrı bir kimliğimin olmadığını hissediyorum.

82. ____ Haklarıma saygı duyulmasını ve duygularımın hesaba katılmasını istemekte çok zorlanıyorum.

83. _____ Başkaları beni, diğerleri için çok, kendim için az şey yapan biri olarak görüyorlar.

84. _____ Diğerleri beni duygusal olarak soğuk bulurlar.

85. ____ Kendimi sorumluluktan kolayca sıyıramıyorum veya hatalarım için gerekçe bulamıyorum.

86. _____ Benim yaptıklarımın, diğer insanların katkılarından daha önemli olduğunu hissediyorum.

87. ____ Kararlarıma nadiren sadık kalabilirim.

88. _____ Bir dolu övgü ve iltifat almam kendimi değerli birisi olarak hissetmemi sağlar.

89. Yanlış bir kararın bir felakete yol açabileceğinden endişe ederim.

90. _____ Ben cezalandırılmayı hakeden kötü bir insanım.

APPENDIX B

HUMOR STYLES QUESTIONNAIRE

İnsanlar mizahı çok farklı biçimlerde yaşar ve dışa vururlar. Aşağıda mizahın yaşanabileceği farklı biçimleri ifade eden cümleler yer almaktadır. Lütfen her bir cümleyi dikkatle okuyarak o ifadeye ne ölçüde katıldığınızı ya da katılmadığınızı belirtin. Lütfen mümkün olduğunca dürüst ve tarafsız olarak yanıtlamaya çalışın. Yanıtlarınız için aşağıdaki değerlendirme ölçeğini temel alın:



- Üzgün ya da mutsuzsam, kendimi daha iyi hissetmek için genellikle o durumla ilgili gülünç bir şeyler düşünmeye çalışırım.
- 11. Espri yaparken ya da komik bir şey söylerken genellikle karşımdakilerin bunu nasıl kaldıracağını pek önemsemem.
- 12. Çoğunlukla kendi güçsüzlüklerim, gaflarım ya da hatalarımla ilgili gülünç şeylerden söz ederek, insanların beni daha çok sevmesini ya da kabul etmesini sağlamaya çalışırım.
- 13. Yakın arkadaşlarımla çok sık şakalaşır ve gülerim.
- 14. Yaşama karşı takındığım mizahi bakış açısı, benim olaylar karşısında aşırı derecede üzülmemi ya da kederlenmemi önler.
- 15. İnsanların, mizahı başkalarını eleştirmek ya da aşağılamak için kullanmalarından hoşlanmam.
- Çoğunlukla kendi kendimi kötüleyen ya da alaya alan espriler yapmam.
- 17. Genellikle fıkra anlatmaktan ve insanları eğlendirmekten hoşlanmam.
- Tek başınaysam ve mutsuzsam, kendimi neşelendirecek gülünç şeyler düşünmeye çalışırım.
- 19. Bazen öyle komik şeyler gelir ki aklıma bunlar insanları incitebilecek, yakışık almaz şeyler olsa bile, kendimi tutamam söylerim.
- Espriler yaparken ya da komik olmaya çalışırken çoğunlukla kendimi gereğinden fazla eleştiririm.
- 21. İnsanları güldürmekten hoşlanırım.
- 22. Kederli ya da üzgünsem genellikle mizahi bakış açımı kaybederim.
- 23. Bütün arkadaşlarım bunu yapıyor olsa bile, bir başkasıyla alay edip ona gülerlerken asla onlara eşlik etmem.

- 24. Arkadaşlarımla ya da ailemle birlikteyken çoğunlukla hakkında espri yapılan ya da dalga geçilen kişi ben olurum.
- 25. Arkadaşlarımla çok sık şakalaşmam.
- Tecrübelerime göre bir durumun eğlendirici yanlarını düşünmek, sorunlarla başa çıkmada çoğunlukla etkili bir yoldur.
- 27. Birinden hoşlanmazsam çoğunlukla onu küçük düşürmek için hakkında espri yapar ya da alay ederim.
- 28. Sorunlarım varsa ya da üzgünsem, çoğunlukla gerçek duygularımı, en yakın arkadaşlarım bile anlamasın diye, espriler yaparak gizlerim.
- 29. Başkalarıyla birlikteyken genellikle aklıma söyleyecek esprili şeyler gelmez.
- 30. Neşelenmek için başkalarıyla birlikte olmam gerekmez, genellikle tek başımayken bile gülecek şeyler bulabilirim.
- Bir şey bana gerçekten gülünç gelse bile, birini gücendirecekse eğer, buna gülmem ya da bununla ilgili espri yapmam.
- 32. Başkalarının bana gülmesine izin vermek; benim, ailemi ve arkadaşlarımı neşelendirme tarzımdır.

APPENDIX C THE WARWICK-EDINBURG MENTAL WELLBEING SCALE (WEMWBS)

	Hiç katılmıyorum	Katılmıyorum	Biraz katılıyorum	Katılıyorum	Tamamen katılıyorum
 Gelecekle ilgili iyimserim. 	1	2	3	4	5
2. Kendimi işe yarar (faydalı) hissediyorum.	1	2	3	4	5
3. Kendimi rahatlamış hissediyorum.	1	2	3	4	5
 Diğer insanlara karşı ilgiliyim. 	1	2	3	4	5
5. Farklı işlere zaman ayırabilecek enerjim var.	1	2	3	4	5
Sorunlarla iyi bir şekilde başa çıkabilirim.	1	2	3	4	5
7. Açık ve net bir biçimde düşünebiliyorum.	1	2	3	4	5
8. Kendimden memnunum.	1	2	3	4	5
9. Kendimi diğer insanlara yakın hissediyorum.	1	2	3	4	5
10. Kendime güveniyorum.	1	2	3	4	5
11. Kendi kararlarımı kendim verebiliyorum.	1	2	3	4	5
12. Sevildiğimi hissediyorum.	1	2	3	4	5
 Yeni şeylere karşı ilgiliyim. 	1	2	3	4	5
14. Neşeli hissediyorum.	1	2	3	4	5