AN INVESTIGATION OF ATTITUDE TOWARDS HELP SEEKING OF MIDDLE EAST TECHNICAL UNIVERSITY STUDENTS WITH RESPECT TO ATTACHMENT STYLE AND EARLY MALADAPTIVE SCHEMAS

A THESIS SUBMITTED TO THE GRADUATE SCHOOL OF SOCIAL SCIENCES OF MIDDLE EAST TECHNICAL UNIVERSITY

BY

AYŞE IRKÖRÜCÜ

IN PARTIAL FULFILLMENT OF THE REQUIREMENTS FOR THE DEGREE OF MASTER OF SCIENCE IN THE DEPARTMENT OF EDUCATIONAL SCIENCE

JUNE 2012

Approval of the Graduate School of Social Science.

Prof. Dr. Meliha ALTUNISIK

Director

I certify that this thesis satisfies all the requirements as a thesis for the degree of Master of Science.

Prof. Dr. Ali YILDIRIM

Head of Department

This is to certify that we have read this thesis and that in our opinion it is fully adequate, in scope and quality, as a thesis for the degree of Master of Science.

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M. S., Department of Educational Sciences Supervisor: Prof. Dr. Ayhan Demir

June 2012, 126 pages

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Anahtar Kelimler: Bağlanma şekilleri, erken dönem uyumsuz şemalar, psikolojik yardım almaya ilişkin tutumlar

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My Nephew

Nihat Ege IRKÖRÜCÜ

and

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CHAPTER I

INTRODUCTION

1.1 Background to the Study

Universities are places that provide students with the opportunity to grow intellectually and to carry out their plans for future. However, this opportunity also brings some difficult life tasks to be accomplished. Upon entering university there are some significant changes in students' lives such as separation or distancing from their families, adapting to a new environment, making new friends, having more responsibility about one's life, considering educational attainment and prospective occupational success more seriously than before. Adapting to the changes mentioned above brings different kinds of difficulties to students' lives like acquiring new skills, coping with new academic issues, facing with the demands of their families, social network and academicians, and getting used to a new sense of self (Bayram & Bilgel, 2008; Grayson & Meilman, 1992; Humphrey, 1982).

In addition to academic, environmental and psychological problems students also have to cope with developmental tasks. In Turkey, most of the students begin their university life at the age range of 18-20. These ages fall into the transition period from late adolescents to early adulthood where individuals have more independency and control over their own lives (Erikson, 1950).

In the young adulthood period, individuals seek intimacy and try to find mutually satisfying relationships in marriage and making friends. In the period of young adulthood, individuals want to be productive and want to produce something that contributes to the betterment of society (Erikson, 1950). Arnstein (1984) stressed that university students face many developmental changes including physical and sexual maturity, self-esteem, setting goals for future life and career choice. Thus while coping with academic and social demands, students also have to struggle with physiological and psychological changes that are natural parts of their development. This transition period can be described as a developmental milestone because of the biological, interpersonal and cognitive changes. Moreover, together with the demands of university life and environmental changes, this transition stage turns into a vulnerable period to psychological difficulties and morbidities. Furthermore, Newman et al. (1996) asserted that in the young adulthood period, the psychological problems may have more severe and long-lasting consequences than other developmental stages. Thus this transition period has to be handled carefully and professionally. Although in this critical transition period the need for counseling services increases the help seeking behavior of university students is found very low (Nilsson, Berkel, Flores & Lucas, 2004; Rosenthal, & Wilson; 2008)

In many investigations, researchers attempted to explain why some students seek professional counseling services and others do not; and it was found that young people mostly used informal sources to seek help before receiving help from formal sources at times of distress (Boldero & Fallon, 1995; Rickwood & Braithwaite, 1994; Sheffield, Fiorenza & Sofronoff, 2004; Wilson, Deane, Ciarrochi & Rickwood, 2005). Moreover, although the demand of this age period is to find mutually satisfying relationships, it was asserted that the relationships students establish are acquaintances rather than intimate relationships (Freeman & Thompson, 1989), and these superficial relationships are formed to have informal sources of help (Cowen, 1982).

It is emphasized that counseling service use can be increased by identifying factors leading to the use of mental health services (Cho et al. 2009, Maulik, Mendelson & Tandon, 2011). Researchers examined various kinds of variables that may be related to help seeking behavior in order to understand the factors that determine whether or not an individual seeks help from professional sources. Therefore, attitudes toward help seeking were found as one of the significant factors that affect help-seeking behavior of student (Vogel, Wester, Wei & Boysen, 2005).

Attitude is defined by Fishbein and Ajzen (1975, p.6) as "a learned predisposition to respond in a consistently favorable or unfavorable manner with respect to a given object". Thus, attitude toward help seeking can be defined as a learned predisposition to respond in a consistently favorable or unfavorable manner with respect to professional help seeking. Besides from examining attitudes, an understanding of the dynamics that influence students' attitudes toward

psychological help seeking has also become an important topic in the field of psychology.

The results of various studies indicate that there are number of factors that affect attitudes and one of the prominent factors that influence attitudes toward help seeking was found as attachment style (Moran, 2007). Bowlby (1982) defined the attachment as an emotional bond between caregiver and child formed to protect and ensure the survival of infant. Therefore, it can be seen as a special emotional relationship that involves security. Bowlby (1982) cleared that early interactions between caregiver and infant are internalized by child and forms internal working models which includes perceptions about self and others. Bartholomew (1990) and his colleagues (Bartholomew & Horowitz, 1991) systematized the internal working models in a four-category attachment model that are secure attachment style (positive view of self and others), dismissive attachment style (positive view of self, negative view of others), preoccupied attachment style (negative view of self, positive view of others) and lastly fearful attachment style (negative view of self and others). Shaffer, Vogel and Wei (2006) found that different attachment styles have different effect in the decision of help seeking. Hazan and Shaver (1987) claimed that insecure attachment styles (dismissive, preoccupied and fearful) may hinder individual attempt to seek help. Moreover, attachment theory emphasizes the relevance of insecure attachment style and psychopathology (Bowlby, 1982). In addition in the many studies, securely attached individuals engage in more help seeking behavior than insecurely attached individuals (Collins & Feeney, 2000; DeFronzo, Panzarella & Butler 2001; Moran, 2007; Vogel & Wei, 2005).

The presence of different kinds of attachment styles is important for the help seeking attitude because the activation of attachment styles starts when an individual encounters a stressor (Bowlby, 1973), and in university life this stressor might be the difficult life tasks that students face. Therefore, it is important to examine the effect of different attachment styles in terms of help seeking attitude.

Furthermore, a wide body of attachment literature has considered the association between attachment style and schemas (Feeney & Noller, 1996; Griffin & Bartholomew, 1994; Hazan & Shaver, 1994; Holmes, 1993; Mason, Platts & Tyson, 2005). Because of the substantial links in literature between attachment style and help seeking attitudes as well as between attachment styles and early maladaptive schema, an influence of schemas on attitude toward help seeking expected to be found in this study. Therefore, this study is aimed to determine whether attachment styles and early maladaptive schema styles and early maladaptive schema styles and early maladaptive schema styles and early maladaptive schema styles and early maladaptive schemas have an effect on attitudes toward seeking psychological help.

1.2 Purpose of the Study

The main purpose of this study is to investigate the influence of attachment styles and early maladaptive schemas on the help seeking attitudes of Middle East Technical University students. In addition to the main purpose, this study will also look into whether gender has an effect on the attitudes toward seeking psychological help. Research questions that were dealt in the present study are stated below.

What are the possible differences among attitudes toward seeking psychological help by gender?

Is there any significant difference between attitude toward seeking psychological help of university students with respect to attachment styles?

Is there any significant difference between attitudes toward seeking psychological help of university students with respect to different early maladaptive schemas?

1.3 Significance of the Study

Coping with daily life issues and individual problems alone can sometimes be overwhelming. Although most people need psychological help to cope with this struggle, only a few of them seek professional help, and some of them do not prefer to seek help from a professional at all (Andrews, Hall, Teesson & Henderson, 1999; Cho et al., 2009; Cooke et al., 2006; Nilsson, Berkel, Flores & Lucas, 2004; Whiteford & Groves, 2009; Yakushko, Davidson & Sanford-Martens, 2008). Many studies were conducted to understand the factors affecting the help seeking behaviors of individuals. Among these factors, attitudes toward seeking psychological help were stated as one of the most effective factors in determining an individual's decision to seek professional help (Cramer, 1999; Vogel et al., 2005). Hence, many studies were conducted to understand the factors that affecting individuals' attitudes toward professional help seeking, and one of the most important factors was found to be individuals' attachment style (Carlton & Deane, 2000; Vogel et al., 2005). Therefore, this study help to identify the variables which may have an effect on help seeking attitude. In addition, existing limited knowledge about help seeking attitude and barriers that hinders the help seeking behavior is extended.

Furthermore, researches on attachment styles have pointed out that individuals with different attachment styles have different early maladaptive schemas (Cecero, Nelson & Gillie, 2004; Horowitz, Rosenberg & Bartholomew, 1993; Mason, Platts & Tyson, 2005). Therefore, it was hypothesized in this study that early maladaptive schemas may also have an influence on help seeking attitudes. Although many studies have been carried out to understand the factors behind individual's attitudes toward professional help seeking, the influence of early maladaptive schemas on help seeking attitude is yet to be discovered. In the literature, there is no study that has examined the effects of attachment style and early maladaptive schemas on attitudes toward help seeking. This study was conducted to fill in this gap in the help-seeking literature and to enhance the knowledge about attitude toward help seeking, and to contribute to the existing limited knowledge about help-seeking behavior of Turkish university students.

Attachment styles and early maladaptive schemas are about the early interactions between infant and caregiver and these interactions form a base for social relations in later life. Therefore, it is very important to inform parents about the possible negative effects of inappropriate caregiver and infant relationship in social and emotional development of the child. Moreover, the relationship pattern which is form in the childhood may have an effect on help seeking relationship that may hinder help seeking attitude. Hence, this study may help to find solutions against the negative effects of attachment styles and early maladaptive schemas on help seeking behavior. In order to increase the help seeking attitude, more effective intervention strategies may be developed, such as finding new ways of establishing therapeutic relationship by considering attachment styles and early maladaptive schemas of individual.

In addition, cognitive behavioral therapy techniques like establishing accurate empathy, alternative interpretations of the day and distortions in one's thinking patterns may be improved with the knowledge of influence of attachment styles and early maladaptive schemas on help seeking attitude. Thus, the results of the study may help counselor to ease the help seeking process and therapeutic relationship, to gain better understanding on the behavior of help seeking. Additionally, researchers and counselors may implement further analysis to understand the relationship between the attachment styles, schemas and help seeking attitude.

1.4 Definitions of Terms

Help Seeking Behavior

Help seeking behavior is defined as "communicating with other people to obtain help in terms of understanding, advice, information, treatment, and general support in response to a problem or distressing experience" (Rickwood, Deane, Wilson & Ciarrochi, 2005, p. 4).

Attitudes toward Seeking Psychological Help

Attitude is defined by Fishbein and Ajzen (1975, p. 6) as "a learned predisposition to respond in a consistently favorable or unfavorable manner with respect to a given object". Therefore, in the present study it is assumed that the given object is seeking professional help; hence the definition of attitude toward help seeking for this study can be made as learned predisposition to respond in a consistently favorable or unfavorable manner with respect to seeking professional help.

Attachment

Sperling and Berman (1994) have defined attachment as a behavioral system in which psychological and emotional stability of individual is protected through attachment bond with a specific person. Bowlby (1958) refers to this attachment bond with specific person as an affectional or emotional bond. Bowlby (1973, p. 292) defined attachment behavior as "any form of behavior that results in a person attaining or retaining proximity to some other differentiated and preferred individual, usually conceived as stronger and/or wiser". Bowlby (1982) also asserted than bond between caregiver and infant is biologically rooted. Therefore, attachment may be defined as a biologically predetermined set of behaviors which establishes an emotional bond between the caregiver and the infant that is used to maintain proximity or contact between an individual and a caregiver in the interest of survival.

Attachment Styles

In this study, four attachment categories proposed by Bartholomew and Horowitz (1991) were used. Secure attachment style refers to individuals who have a positive view of their self and others (low anxiety and low avoidance). Preoccupied attachment style, on the other hand, involves individuals who have negative self perception and positive perception of others (high anxiety and low avoidance). Dismissing avoidant style refers to individuals with positive self perception and negative perception of others (low anxiety and high avoidance) and fearful avoidant style includes individuals with negative perception of self and others (high anxiety and high avoidance) (Bartholomew & Horowitz, 1991).

Schema

It has been defined by Segal (1988, p. 147) as 'organized elements of past reactions and experience that form a relatively cohesive and persistent body of knowledge capable of guiding subsequent perceptions and appraisals'

Early Maladaptive Schemas

Young (1999, p. 9) defined early maladaptive schemas as "stable and enduring themes that develop during childhood and are elaborated upon throughout an individual's lifetime".

CHAPTER II

REVIEW OF LITERATURE

This chapter is devoted to the overview of the relevant literature of the current study and is examined under three sections. In the first section, help seeking behavior and research about help seeking will be presented. In the second section, attachment theory, studies about attachment and the relationship between attachment styles and help seeking behavior will be demonstrated. In the third section, the early maladaptive schema theory, research on early maladaptive schemas and the relation of early maladaptive schemas and attachment style as well as help seeking behavior will be discussed.

2.1 Help Seeking

Helping is defined by Hill (2004, p. 4) as "one person assisting another in exploring feelings, gaining insight, and making changes in his or her life" and help seeking behavior is defined by Rickwood et al. (2005, p. 4) as "communicating with other people to obtain help in terms of understanding, advice, information, treatment, and general support in response to a problem or distressing experience".

Many studies reported high levels of psychological distress among university students (Demirüstü, Binboğa, Öner & Özdamar, 2009; Eskin, KaynakDemir & Demir, 2005; Kaya, Genç, Kaya & Pehlivan, 2004; Özdel, Bostancı, Özdel & Oğuzhanoğlu, 2002; Özenli, Yoldaşcan, Topal & Özçürümez, 2009), few of them were reported to use counseling services and receive professional psychological help (Andrews, Hall, Teesson & Henderson, 1999; Andrews, Issakidis & Carter, 2001; Cho et al., 2009; Cooke, Bewick, Barkham, Bradley & Audin, 2006; Güneri, Aydın & Skovholt, 2003; Nilsson, Berkel, Flores & Lucas, 2004; Yakushko et al., 2008; Whiteford & Groves, 2009).

Ün-Açıkgöz and Açıkgöz (1992) have found that Turkish university students have great expectations from their universities, however, university life and academic life fall short of their expectations, which makes them frustrated. As a result, these frustrations negatively influence students' motivation, interests and attitudes toward the field and university. In the study of Güneri (2006) carried out at 26 universities in Turkey, the top ten causes of seeking help was indicated as communication problems, adjustment to university life, romantic relationships, depression, anxiety disorders, test anxiety, study skills, academic failure, low selfesteem and relations with parents. In other studies, it was suggested that depression and anxiety were among the most common problems faced among university students (Ovuga, Boardman & Wasserman, 2006; Özdemir & Rezaki, 2007; Voelker, 2003; Wong, Cheung, Chan, Ma & Tang, 2006). Although need for counseling services considerably high, the help seeking behavior of university students is found very low (Nilsson et al., 2004; Rosenthal & Wilson; 2008) One of the important reasons of not seeking help from professional sources was found in the literature as the type of help seeking source (Christensen, Birk, Brooks & Sedlacek, 1976; Deane, Wilson & Ciarrochi, 2001; Sheffield et al., 2004). Help seeking sources vary according to their level of formality as formal (e.g. family, friends) and informal (e.g. mental health professionals, teachers) (Rickwood et al., 2005). Informal sources are the most preferred type of help seeking among young people before receiving help from formal sources at times of distress (Boldero & Fallon, 1995; Rickwood & Braithwaite, 1994; Rickwood et al., 2005; Sheffield et al., 2004).

Deane et al. (2001) found that the preference of informal source depends on the type of the problem. In the same study, it was also affirmed that young people prefer friends for all types of personal problems while preferring mental health professionals and telephone help lines when experiencing suicidal thoughts. Moreover, in the study of Deane et al. (2001) it was affirmed that many young people do not seek help from anyone for personal, emotional and suicidal problems. They also found that young people preferred informal sources to seek help. Hanson and Swanson (1993) reported the order of choosing target person for help seeking as self, best female friend, mother, best male friend, father, counselor, faculty adviser and minister. In another study, Christensen et al., (1976) asserted that while people prefer to seek help from counseling centers for vocational problems, they prefer to seek help from informal sources for personal problems. Sheffield, Fiorenza and Sofronoff (2004), found that friends are the largest source to seek help for personal, emotional and behavioral problems. Their study involved 254 adolescences and it was found that among those students 66.7% sought help from friends, 59% from parents and family members, 19.8% from school counselors, 14.1% from doctors, 12.8% from psychiatrists, 10.3% from teachers, 10.3% from psychologists, 7.7% from telephone crisis hotlines, and 3.8% from their church.

Cho et al. (2009) conducted a nationwide study with Korean adults (N = 6.275), and found out that only 1.9% of the participants used the mental health services during the past 12 months and only 6.1% of the respondents who met the criteria of a psychiatric disorder (n = 916) made use of the mental health services. In the study of Nilsson et al. (2004) it was reported that only about 2% of the international students sought help from university counseling centers. Moreover, one third of international students in the study dropped out of treatment after the initial intake interview. These findings were supported by another research which carried out by Yakushko et al. (2008) who found that 70% of the international students in their sample did not continue to taking professional help after a single session. In Australia's 1997 mental health survey, it was reported that despite the high prevalence of mental disorder, only one in three people sought help for their problems (Whiteford & Groves, 2009).

In a study with 4.699 students in Red-Brick University it was reported that only 3% of the students had used the university counseling center (Cooke et al., 2006). In a survey study which involved over 10.600 participants, it was reported that although more than one in five adults met the criteria for a mental health disorder, only 38% of them sought some type of help (Andrews et al., 1999).

It is emphasized that the use of mental health service can be strengthened or promoted by identifying the factors that leads to mental health service use (Cho et al., 2009; Maulik et al., 2011). In order to understand the factors that lead individuals to seek or not to seek help from professional sources, researchers have examined various kinds of variables that may be related to help seeking behavior. Rickwood et al. (2005) asserted that the major barrier to professional psychological help seeking is the negative attitudes toward professional help seeking.

Many studies support the notion that individuals with more positive attitudes toward professional psychological help seeking are more likely to seek help (Dean & Todd, 1996; Kelly & Achter, 1995; Komiti, Judd & Jackson, 2006; Mo & Mak, 2009; Wrigley, Jackson, Judd & Komiti, 2005). Kahn and Williams (2006) associated attitudes toward help seeking with utilization of the campus counseling center, and they found that attitudes toward help seeking is a predictor of actual campus counseling center use. Attitudes toward mental health help-seeking were found to significantly correlate with mental health service use in another study which was conducted with a sample size of N = 8.796 in six European countries (ten Have et al., 2010).

Carlton and Deane (2000) emphasized the relationship between attitudes toward professional help seeking and intention to seek help in their study and affirmed that attitudes toward seeking professional psychological help are significant predictors of intentions to seek help for both personal and emotional problems and suicidal thoughts. Moreover, there are many studies which emphasize the strong relationship between attitudes and intention to seek psychological help. In all of these studies, it was claimed that attitudes were found to be the strongest predictors of actual intention to seek professional help (Bayer & Peay, 1997; Cepeda-Benito & Short 1998; Kelly & Achter, 1995; Vogel et al., 2005).

Attitude was defined by Fishbein and Ajzen (1975, p. 6) as "a learned predisposition to respond in a consistently favorable or unfavorable manner with respect to a given object". Thus, attitudes toward help seeking can be defined as learned predispositions to respond in a consistently favorable or unfavorable manner with respect to seeking professional help. Breckler & Wiggins (1989, p. 408) have determined three important characteristics of attitudes "they are learned, they are predisposed actions, and they imply evaluation (favorable-unfavorable, positive-negative, good-bad)".

The most predominant theory which formalized the link between behavior and attitude is the Theory of Planned Behavior (Ajzen, 1985). The theory of planned behavior is an extension of the theory of reasoned action and it asserts that individuals' intentions are the most important determinants of performing a certain behavior (Ajzen & Fishbein, 1980; Fishbein & Ajzen, 1975). The theory further asserts that motivational factors that influenced to perform a behavior are taken over by intentions which are determinants of the level of willingness to perform a certain behavior as well as determinants of the level of effort that an individual plans to allocate for that specific behavior (Ajzen, 1985; 1991; 2005).

According to the theory of planned behaviors, an individual's intention to perform a behavior can be predicted by three cognitive components which are attitudes, subjective norms and perceived behavioral control (Ajzen, 1985; 2005; Ajzen & Fishbein, 1980; Fishbein & Ajzen 1975). Attitudes are not innate; individuals acquire negative and positive attitudes throughout their life (Ajzen & Cote, 2008), they are shaped by beliefs, self generated and formed by direct observations and indirect acceptance of information from outside sources, for which there is a need for cognitive processing that may affect inference about that object, actions and events (Ajzen & Cote, 2008). Hence, attitude was defined by Miller (2005) as an evaluation of the variety of beliefs about a specific behavior.

Besides, subjective norms are defined as perceptions of an individual that are influenced by one's social network with the intention of performing a behavior (Ajzen, 1991; Miller, 2005). On the other hand, perceived behavioral control is defined as an evaluation of a behavior according to the perception about one's ability to perform it (Miller, 2005).

The basic premise of the theory was explained by Ajzen (1991, p.188) as "the more favorable the attitude and subjective norm with respect to a behavior, and the greater the perceived behavioral control, the stronger should be an individual's intention to perform the behavior under consideration". However it was also affirmed that the three components of intention to perform a behavior are not equally weighted to predict the behavior, the weight may change according to the individual and situation (Ajzen, 1991; 2005).

In brief, the theory of TPB claims that people consciously determine to perform or not to perform a behavior with regards to attitudes toward the behavior in question, subjective norms about that behavior and perceived behavioral control. In a literature review made by Godin and Kok (1996) including 56 studies which investigated 87 behaviors which are predicting future health behaviors, found that 41% of variance in intentions and 34% of variance in predicting future health behavior were explained by the theory of planned behavior.

In another study which examined the efficacy of the planned behavior theory, it was found that the theory of planned behavior is accounted for 39% and 27% of the variance in intention and behavior, respectively (Armitage & Conner, 2001). Mackenzie, Knox, Gekoski and Macaulay (2004) also investigated the intentions to use professional help by examining the three components of the theory of planned behavior and found that the three components of the theory were significant predictors of intentions to seek professional help. In a recent study, Mo and Mak (2009) supported the effectiveness of the theory on help seeking behavior by finding positive correlation between attitudes toward help seeking, subjective norm, and perceived behavioral control.

Apart from examining attitudes; understanding the dynamics that influence students' attitudes toward psychological help seeking has also become an important topic. The results of various studies indicate that there are a number of factors that

affect attitudes. One of them is gender differences. Gender was found as a significant predictor of attitudes toward seeking professional psychological help (Nam et al., 2010; Sheffield, Fiorenza & Sofronoff, 2004). Furthermore, various studies have affirmed that females have more positive attitudes toward psychological help seeking compared to males (Ang, Lim, Tan & Yau, 2004; Barwick, deMan & McKelvie, 2009; Jahson, 2001; Kartalova- O'Doherty & Doherty, 2010; Koydemir-Özden, 2010; Leong & Zachar, 1999; Mackenzie, Gekoski & Knox, 2006; Nam et al., 2010; Svensson, Nygard, Sorensen & Sandanger, 2009; Türküm, 2005). Studies showed that not only gender but also sex role orientation has an influence on attitudes toward help seeking (Johnson 2001; Türküm, 2005). Johnson (2001) found that femininity has an influence on the confidence of professionals' abilities to help with psychological problems. In the study of Türküm (2005), the positive help seeking attitudes of androgynous students who had both femininity and masculinity personality traits were found higher compared to both masculine and undefined students. In the same study the help seeking attitudes of feminine students were found to be more positive than both masculine and undefined students.

In a study done with 137 male college students from Midwestern University in the United States whose age range from 17 to 66 (Levant, Wimer, Williams, Smalley & Noronha, 2009), it was found that the masculinity variables which are greater endorsement of traditional masculinity ideology, conformity to masculine norms, and a higher degree of gender role conflict had an influence on attitudes toward seeking psychological help. In the same study masculinity variables were associated with negative attitudes toward seeking psychological help.

Ang et al. (2004) found different results compared to the other studies which confirm the influence of sex role orientation on attitudes toward help seeking and they found that masculinity did not significantly affect help-seeking attitudes. Moreover, they found that students with low femininity scores had less positive attitudes toward professional help-seeking than students with high femininity scores, especially with regards to being stigmatized and more sensitive about the opinions of others. Another study was conducted by Judd, Komiti and Jackson (2008) to understand why being female assisted help seeking behavior. They found that women had higher rates on help-seeking for mental health problems than men. They also affirmed that this difference might be a reflection of gender role differences. In the same study they have asserted that men's social status, greater control and decision-making power may influence acceptance of a diagnosis of mental disorder and their difficulty in expressing feelings and emotions may influence their help seeking for psychological problems (Amit, Brian, Murray & Jitender, 2009; Chan & Hayashi, 2010; Judd et al, 2008).

Several studies have reported that gender makes a significant contribution to the attitudes toward help seeking. In a study which involved Chinese college students (N = 995), it was found that although gender was a significant predictor of attitude, the influence of gender difference remained the same for the professional help seeking behavior, in other words it was found that males and females were equally unlikely to seek professional help for psychological problems, however by explaining Asian cultural norms like stigma attached to mental health services and cultural reluctance to disclose personal problems, possible explanations for these findings were given (Hsiaowen, 2008).

Age difference was also found to be another factor that influences the help seeking behavior (Shea & Yeh 2008). There are many contradictory findings about the effects of age on help seeking attitudes. In the literature whereas some studies have found that elder people have low intentions to seek help (Westerhof, Maessen, De Brujin & Smets, 2008) and negative attitudes toward help seeking (Lebowitz & Niederehe, 1992), other studies have concluded that elder individuals are associated with more positive attitudes toward help seeking compared to younger individuals (Mackenzie et al, 2006; Svensson et al., 2009).

In a cross national study which was carried out with the participation of 262 Muslim-women, it was found that younger participants, whose age range from 19 to 20, had less positive attitudes toward seeking professional help than elder ones, whose age range from 21 to more than 22. In the same study researchers attributed this difference to insufficient knowledge about mental health problems and less awareness about the availability of mental health services (Al-Krenawi, Graham, Dean, & Eltaiba, 2004). In a recent study which involved Turkish university students, it was reported that students between the ages of 24 and 28 had more positive attitude than students aged between 17 and 19 (Koydemir-Özden & Erel, 2010). Fisher and Turner (1970) and Cash, Kehr and Ronald (1978) suggested that individuals who received help for psychological problems would have a more favorable attitudes toward help-seeking. Wilson, Rickwood and Deane (2007) asserted that previous help seeking experiences had an influence on the future help seeking behavior, they found that students who had previously received professional help and viewed it as helpful were more likely to seek help in the future than those who viewed it as unhelpful. These findings were supported by Raviv, Raviv, Vago-Gefen, and Schacher Fink (2009). They also found that the degree of satisfaction with previous professional contacts increased not only the positive attitudes toward help seeking but also the willingness to refer to self and to other mental health sources. Furthermore, it was also found that students who had prior help seeking experiences had greater stigma tolerance, which increases the likelihood of consulting mental health service, than the students who did not experience (Egisdottir & Gerstein, 2009).

There are also many studies which were conducted to understand the relationship between prior counseling experiences and attitudes toward help seeking, which affirmed that individuals who had previously been in counseling had more positive attitudes toward seeking help compared to individuals who had not previously sought counseling (Hsiaowen, 2008; Egisdottir & Gerstein, 2009; Kahn & Williams, 2006; Sheffield et al., 2004; Vogel, Wade, Wester, Larson & Hackler, 2007; Woodward & Pachana, 2009). Contrary to previous studies mentioned above, Koydemir-Özden and Erel (2010) carried out a study with 389

Turkish students and did not find significant effect of previous help-seeking experience on students' attitude toward help seeking.

Research has predisposed that the level of perceived psychological distress has an influence on attitudes toward help seeking, moreover studies associate less positive attitudes toward help seeking with greater perceived distress (Galhoun & Selby, 2006). In a study by Wilson et al., (2007), which included younger high school students, older high school students and the first year university students, it was found that, as depressive symptoms increase, the intention to seek help decreases. Sheffield et al., (2004), associated greater psychological distress with greater willingness to seek help; however, this relationship was not mediated by attitude.

Gender and expectations form psychological help were also examined with regards to the severity of the problem. It was found that females tend to perceive problem more severe than males, also individuals' expectation about the potential benefit of psychological help was found to be positively correlated with the relationship between the severity of the problem and attitude toward help seeking (Raviv et al., 2009).

In two contemporaneous population-based surveys: the US National Comorbidity Survey (NCS) (N = 5877) and the Ontario Health Survey (OHS) (N = 6902), the severity of emotional problems were associated with negative attitudes toward help seeking, moreover, it was reported that %50 of OHS and 20% of NCS respondents declared that they may not seek professional help if they did not have

serious emotional problems (Amit et al., 2009). A positive correlation between perceived seriousness of a problem and willingness to seek help was found in different studies (Hanson & Swanson, 1993). A conflicting finding was found in the study of Hsiaowen (2008), which was done with Chinese students; it was found that higher levels of depressive symptoms were associated with more negative attitudes toward seeking professional psychological help. However, this contradiction was explained with stigma which is attached to psychological problems in Asian cultures and cultural reluctance to disclose psychological problems to others who are outside of one's social network. Apart from levels of distress; Koydemir-Özden and Erel (2010) found that having a current problem influences the help seeking attitudes, they reported that students with current problems have more positive attitude than students' with no problem.

Fisher and Turner (1970) indicated that personality could play an important role in help seeking attitudes although help seeking decision may be influenced by various interpersonal and social components. Barwick et al. (2009) affirmed that an individuals' personality bears a significant relationship to help-seeking attitudes. They found that regardless of their gender, individuals who have low self-esteem, high anxiety traits and external locus of control (individual who believe their life is controlled by others) have less positive attitudes toward seeking professional help compared to individuals with high self-esteem, low anxiety traits and less external locus of control. The social network of a person was found as another factor that may influence his or her attitudes toward seeking psychological help. It was asserted that a person's social network that accepts and supports help seeking behavior may have an influence on that individual's decision to seek psychological help (Rickwood & Braithwaite, 1994).

In another study, Vogel et al., (2007) examined the influence of being prompted to seek help and knowing someone who sought help on attitudes about seeking mental health with college students (N = 780). They reported that students who prompted to seek help and who knew someone who had sought help had more positive attitudes about seeking mental health services. Moreover, negative social network orientation, which was defined by Tolsdorf (1976) as the beliefs, attitudes and expectations of an individual to use social network members for receiving help to deal with their life problems, was associated with less positive attitudes toward professional psychological help (Tata & Leong, 1994).

Perceived social support was also found as another predictor of attitudes toward help seeking (Vogel et al., 2005; Çebi, 2009). In other studies, it was found that individuals who perceived high social support from their families, friends and the significant others were more likely to have positive attitudes toward seeking psychological help than those who perceived low support (Çebi, 2009; Gourash, 1978; Koydemir-Özden, 2010; Miville & Constantine, 2006).

Fischer and Cohen (1972) and Al-Krenawi et al. (2004) had found education as another demographic variable which influences attitudes toward help seeking. In both of these studies it was reported that the attitudes of college juniors/seniors toward seeking psychological help were more positive than that of either college freshmen/sophomores or high school and they also affirmed that college freshmen/sophomores had more positive attitudes than high school students. In another study, it was found that individuals who had higher education had more positive attitudes than individuals who had no education or only primary school education toward receiving professional help (Sheikh & Furnham, 2000). Barney, Griffiths, Jorm and Christensen (2006) claimed that people with 12th grade education were less likely to seek help from a professional than people with bachelor degree education. The differences in attitudes with regards to the level of educational were explained in the study by Al-Krenawi et al., (2004) by having more academic experience and aging. It was reported that it is not only the education of a person that influences the help seeking attitude but also the parents' education level. Koydemir-Özden (2010) found that individuals whose parents' education level is higher education or above had more favorable attitudes than those with parents with elementary education.

On the other hand, Vogel, Wester, Larson and Wade (2006) asserted that people have inaccurate and insufficient knowledge about mental illnesses. In a study by Sheikh and Furnham (2000) causes of mental illnesses were found to be a significant predictor of attitudes toward seeking professional help; moreover the influence of supernatural causes of mental illnesses were found to be increasing the negative attitude toward professional help. In the same study it was also affirmed that Muslims and individuals with no education or with only primary education had more supernatural causes of mental illnesses than other people believing in other religions and those with higher levels of education. Inaccurate knowledge about mental illnesses and causes of mental illnesses were also found to affiliate with negative attitudes toward seeking psychological treatment (Trump & Hugo, 2006).

Leong and Zachar (1999) found that people who had a restrictive view on mental illnesses were more likely to have negative attitudes toward help seeking. In number of studies, greater knowledge about mental illnesses was associated with less negative attitudes (Heights, Chimonides & Frank, 1998; Sheffield, Fiorenza & Sofronoff, 2004).

In the study of Samouilhan and Seabi (2010), the beliefs about mental illnesses and etiology of mental illnesses were investigated as well as the participants' general attitudes toward seeking psychological help, and it was found that although individuals consider that they need professional help, they avoid taking it because of the stigma surrounding the mental illness and therefore they prefer to ignore the seriousness of the problem.

Difference in culture with regards to attitudes toward help seeking was also investigated by various researchers. The common findings of these studies are that in western cultures there are more positive attitudes toward help seeking whereas in Asian cultures there are more negative attitudes (Chen & Mak, 2008; Sheikh & Furnham, 2000). Shea and Yeh (2008) affirmed that adherence to Asian values predicts the level of positive help seeking attitudes. They found lower adherence to Asian values to increase the positive help seeking attitudes. Individual's cultural background was also found as a moderator in the relationship of gender and the help seeking attitude.

In the study of Nam et al., (2010) it was found that females had more favorable attitudes toward help seeking than males; however this difference was observed to change when cultural backgrounds were added to the analysis. It was also reported that Americans tended to have more favorable attitudes toward seeking help than the Asians or Asian Americans with regards to gender differences. In addition, in Korean, Chinese and Arab cultures; individuals tend to have more negative attitudes toward seeking professional help compared to other cultures. This negative attitude was explained by cultural perception about selfdisclosure, since in Asian and Arab cultures self-disclosure is not perceived as good when someone outside of their social network is disclosed (Al-Darmaki, 2003; Hsiaowen, 2008; Yoo, Goh & Yoon, 2005).

Stigma has been found as one of the most important reasons that prevent individuals from seeking help (Barney et al., 2006; Rickwood et al., 2005; Rickwood, Deane & Wilson, 2007; Vogel & Wade, 2009). Moreover, perceived social stigma and self-stigma were found to be a predictor of one's attitudes toward seeking psychological help (Komiya, Good & Sherrod, 2000; Vogel et al., 2006). On the other hand, Shea and Yeh (2008) associated lower levels of stigma with more positive help seeking attitudes. Other studies had found that stigmatization was more common in small rural areas than big communities (Komiti et al., 2006) and stronger for males than females (Moller-Leimkuhler, 2002).

Sirois and colleagues (2003) investigated procrastination in relation to help seeking behavior among university students during a high stress period, and they have associated procrastination with fewer wellness behavior and treatment delay. This finding was supported by Stead, Shanahan and Neufeld (2010) recently and they affirmed that reduced procrastination was associated with increased mental health help-seeking behaviors.

Self-disclosure, which is defined as sharing personal information and interpersonal difficulties about oneself with a selected 'target person' (Derlega, Anderson, Winstead & Greene, 2011; Jourard & Lasakow, 1958), was claimed to be a barrier in individuals' help seeking behavior (Hanson & Swanson, 1993; Vogel & Wester, 2003). Vogel and Westler (2003) affirmed that a person's comfort with self-disclosing significantly predicts that person's attitudes toward help seeking. This discomfort was explained in the same study by the perception of an individual about self-disclosure. They further asserted that individuals may consider self-disclosure of emotion and personal information as a risk taking behavior which decreases attitudes toward help seeking. Other studies showed that counselors and strangers have received the lowest amount of self-disclosure (Hanson & Swanson, 1993); whereas same-sex friends and mothers have received the highest amount of self-disclosure (Hanson & Swanson, 1993; Jourard & Lasakow, 1958). The differences in choosing a target person to self-disclose were found to be the same even in positive disclosures (Derlega et al. 2011). In the study carried out by Jourard & Lasakow (1958), attitudes, opinions, interests, tests, and work were found to be the most important topics to disclose, while money, personality and body were found to be the least.

Emotional competency, which is defined as identifying, defining and managing one's emotions (Ciarrochi & Deane, 2001), was asserted as a potential barrier to seek help from a professional (Rickwood et al., 2005). Komiya et al. (2000) found a negative relationship between lack of emotional openness and attitudes toward professional help seeking. Moreover, in other studies low emotional competence was associated with lower intentions to seek help (Ciarrochi & Deane, 2001; Ciarrochi, Deane, Wilson & Rickwood, 2002).

Several other factors were affirmed to have an influence on the attitudes toward psychological help-seeking such as the fear of emotion, emotional openness, the fear of treatment (Komiya et al., 2000; Zartaloudi & Madianos, 2010); self-concealment (Kelly & Acther, 1995; Larson & Chastain, 1990; Yoo et al., 2005) level of acculturation and individualism (Tata & Leong, 1994); alienation and racial identity (Delphin & Rollock, 1995) and problem-solving skills (Esentürk-Ercan, 2010).

To summarize, university students encounter different kinds of personal and emotional problems throughout their college years and although they experience various kinds of problems for which they are in need of professional psychological help, they do not seek help because they may perceive a number of barriers to help seeking for their psychological problems, but the reasons for not seeking help may vary. According to the literature, one of the most significant predictors of seeking or not seeking help is individuals' attitudes toward professional help seeking. However there is myriad of variables that influence attitude. The factors that have an influence on help seeking intention, behavior and attitude were mentioned above, however in the literature the effect of attachment styles and early maladaptive schemas has not been discovered yet.

2.2 Attachment Theory

The relationship between environment and the individual plays an important role in the development of personality. The relationship between the mother and the child is the first bond of a person with the environment and the relationship between them has a crucial place in personality development. The first model of the bound between the mother and the child and its function has its origins in the work of John Bowlby (1982). After Bowlby, the attachment theory was defined by several other researchers (Ainsworth, 1969; Bartholomew & Horowitz, 1991; Hazan & Shaver, 1987). The concept and foundations of the attachment theory are rooted in the object-relations-psychoanalytic theory (Kernberg, 1976; Mahler, 1975; Sable, 1992), the cognitive developmental psychology (Gerwirtz, 1969), the control systems theory (Cassidy, 1999), and community psychology (Mikulincer & Shaver, 2007).

Attachment theory was proposed as a means to explain and describe the lifelong patterns of individuals' inclination to develop strong emotional bonds with

others (Bowlby, 1988). Bowlby (1982) defined attachment as the biologically rooted intense and enduring affectional bond between child and caregiver for providing security and protection to infant. Moreover, Bowlby (1988) proposed four distinguishing characteristics of attachment: The first one is 'proximity maintenance' which is a desire to be close to an attachment figure; secondly he claimed that child returns to their attachment figure when needed and perceives the caregiver as a 'safe heaven'. The third characteristic of attachment was identified as the secure base. Bowlby (1988) asserted that in order to explore the environment, a child uses his or her attachment figure as a 'secure base' and turns to this safe base in the face of a fear or threat. The last characteristic was presented as the 'separation distress' which was defined as anxiety that occurs when the attachment figure is not available at times of distress.

The attachment bond between an infant and the attachment figure is formed to ensure the survival of an infant (Bowlby, 1988), to provide safety, security, protection, affection, devotion and love (Pior & Glaser, 2006), and to help the infant explore the environment by protecting itself from danger with the help of the caregiver (Crowell & Waters, 1994). Especially in times of trouble; the attachment figure serves as a "haven of safety" (Bowlby, 1982). It was affirmed that attachment system is activated in the separation period of a child and the attachment figure (Bowlby, 1988). Furthermore, the attachment system can also be activated in the later stages of life by threat, illness, or fatigue (Holmes, 1993). Sable (1992) on the other hand, associated psychological disturbances with disruption of the main attachment relationship. She asserted that the separation from the caregiver and the permanent lose of attachment figure plays an important role especially in the disruption of attachment relationship.

Sperling and Berman (1994) defined attachment as a behavioral system in which psychological and emotional stability of an individual is protected through an attachment bond with a specific person. Bowlby (1973, p. 292) defined attachment behavior as "any form of behavior that results in a person attaining or retaining proximity to some other differentiated and preferred individual, usually conceived as stronger and/or wiser". Bowlby (1973) asserted that attachment behaviors form an organized behavior system which is a combination of various kinds of behavior like smiling, following, sucking, clinging to maintain proximity to the attachment figure. The aim of this organized behavior system is "felt security" (Feenay & Noller, 1996), thus the function of the attachment figure serves as 'a secure base' to make an infant feel secure enough to explore the environment (Bowlby, 1988). Therefore, it could be said that attachment is a biologically predetermined set of behaviors which is used to maintain proximity or contact between an individual and a caregiver in the interest of survival. Furthermore, the attachment theory aims to explain how the emotional bond between the individual and the caregiver is formed and how the quality of this bond can affect the development of an individual in his or her lifespan. Attachment behavior is governed by an internal working model (Cassidy, 1999) and expectations about the availability and the responsiveness of the attachment figure (Feenay & Noller, 1996). Bowlby (1979) claimed that an infant's early experiences in the child-caregiver relationship, are internalized in the course of time by the child and forms a prototype for later relationships. This prototype was referred to as the attachment mental representations of the self and others or "internal working models". Internal working models, which are cognitive structures consisting of judgments and evaluations about the self and the environment; influence the thought of an individual (Cassidy, 1999; 2000), shape the expectations of individuals about significant others in stressful situations (Priel & Shamai, 1995), allow individuals to provide an idea about the outcomes of interactions with others (Mikulincer & Shaver, 2007) and organize a way for the individual as to how to understand and respond in the social world (Scott-Brown & Wright, 2001)

Internal working models consist of two different yet interrelated dimensions, which are models of self and models of others. Bowlby's (1973) defined concepts of working models of attachment as personal beliefs which are shaped by the responses of the caregiver in times of need for support and protection. In general, individuals for whom caregivers are available at any time; desire to experience positive self-worth and establish positive relationships with others and individuals for whom caregivers are not available when they desire, experience negative self-worth and establish unhealthy relationships (Bylsma, Cozzarelli & Sümer, 1997).

Mary Ainsworth (1913-1999) studied early emotional attachments and the development of the attachment theory and later began to systematically study the

infant-parent separations. Ainsworth, Blehar, Waters and Wall (1978) studied attachment relationships by observing infant and caregiver relationships. Based on the responses of the researchers' observations, Ainsworth et al., (1978) described three major styles of attachment: secure attachment, ambivalent-insecure attachment, and avoidant-insecure attachment. These three attachment styles were related to responsiveness and sensitivity of an attachment figure to the needs of a child and the availability of an attachment figure when needed by child.

Ainsworth et al., (1978) developed a technique called the strange situation in which they examined the separation and reunion of the attachment figure and the infant. According to the analyses of the strange situation they determined the characteristics of three attachment styles. They asserted that securely attached infants; who feel secure and trust their caregiver when frightened exhibits distress when separated from their caregiver and be happy when the caregiver returns. Children, who have ambivalent attachments that do not depend on their caregiver when needed, exhibit distress when the caregiver leaves. Lastly children with avoidant attachment style who perceive their caregiver as abusive or neglectful, prefer to avoid their caregiver when they are in distress. They have also reported that consistency in parents' behavior plays an important role in the formation of attachment styles. They asserted that while inconsistent responsiveness leads a child to form a ambivalent attachment style, the consistent caregiver unresponsiveness makes a child form an avoidant attachment style. Bowlby (1979, p. 129) made it clear that attachment relationship is important for humans "from the cradle to grave". The basic premise of attachment theory was also supported by Ainsworth (1969; 1989) who confirms that attachment relationships continue to be crucial throughout a person's life span. Bowlby (1988) asserted that although the initially formed attachment bonds are persistent, in the adolescence and adulthood period new bonds are also formed (Bowlby, 1988). Sperling and Berman (1994) asserted that adult attachment is a repeated representation of an early attachment structure. Individuals maintain specific attachment styles that are governed by internal representation of the self and others throughout their life (Kirkpatrick, 2005; Sperling & Berman, 1994).

Bartholomew and Horowitz (1991) appraised that securely attached children tend to be secure individual in adulthood who have positive views of others and a good balance between intimacy and autonomy; in contrast to secure individuals, insecurely attached children develop insecure attachment styles in adulthood and may have tendency to avoid contact with others. Attachment figures can change according to the needs of each developmental process; the degree of gratification according to developmental needs plays an important role in the selection of the attachment figure (Hazan, Hutt, Sturgeon & Bricker, 1991).

Hazan and Shaver (1994) reported that because the attachment style formation process mainly persist the same, the function and the dynamics of attachment behavior system also remain the same throughout a person's life. On the other hand, the relationship between early attachment and adult love relationships was first investigated by Hazan and Shaver (1987). They examined the attachment styles, which were proposed by Ainsworth et al., (1978) to investigate the influence of these structures on the romantic love relationships. They affirmed the early attachment process to have an influence on the formation, maintenance and the termination of the adult romantic relationship. On the basis of Airsworth et al., (1978), Hazan and Shaver (1987) proposed three attachment styles; which are secure attachment style, avoidant attachment style and anxious/ambivalent attachment style. Adults with secure attachment style have no fear of being rejected and abandoned. They have a feeling of self-worth, and in contrast, adults with anxious/ambivalent attachment style have a strong fear of being rejected and abandoned despite their intense desire to form a relationship with others. Individuals with avoidant attachment style were reported to be reluctant in forming intimate relationships and suppressing their needs due to the fear of being rejected (Hazan & Shaver, 1987; 1994). They asserted that despite the similarity between infant attachment and adult attachment, there are some differences. They apprised that the attachment relationship is one-sided in infancy whereas it is reciprocal in adulthood. Secondly they asserted that while in infant attachment, child needs physical contact, only the knowledge of the availability of an attachment figure when needed is enough in adult attachment. And lastly they informed that a child usually chooses parents as an attachment figure, yet in adult attachment peers or sexual partner are favored.

Subsequently Bartholomew (1990) and his colleagues (Bartholomew & Horowitz, 1991) systematized the internal working models in a four-category attachment model. They proposed that internal working models of attachment consisted of two parts; they separated these two parts in to further parts according to the evaluation of thoughts and feelings as negative or positive. Individuals with positive view of self and others were classified as having secure attachment styles (low anxiety and low avoidance), whereas individuals who have negative self and positive perception of others were classified as having preoccupied attachment styles (high anxiety and low avoidance). Besides, individuals with positive self and negative perception of others were classified as having dismissing attachment styles (low anxiety and high avoidance); and lastly individuals with negative self and negative perception of others were classified as having a fearful attachment style (high anxiety and high avoidance). Secure individuals were reported to have a sense of worthiness, feeling of comfort in establishing and maintaining relationships, trust to others and high self-confidence. Preoccupied individuals were found to have dependency on others because of the sense of unworthiness and the perception of others as trustworthy. A dismissing individual was characterized as having a feeling of worthiness; however they do not trust others and are defensive toward others. Finally, fearful individuals were defined as people who have a low sense of lovability. Furthermore, they avoid close relationship due to their strong fear of rejection and distrust (Bartholomew, 1990, Bartholomew & Horowitz, 1991; Griffin & Bartholomew, 1994). Hazan and Shaver (1987) surveyed 620 adults and reported that 56% of adults had secure attachment styles, whereas 25% of them had avoidant and 19% had anxious attachment styles. In another study reported in the same paper a sample of 108 college students were surveyed. It was found that 56% of the students had secure attachment styles while 23% of them had avoidant and %20 of them had anxious/ambivalent attachment styles. In an another study which was done with Turkish university students, it was found that while secure attachment style was the most common attachment style among Turkish university students, the fearful attachment style was found to be the least common one (Sümer & Güngör, 1999).

2.2.1 Attachment and Help Seeking

Komiya et al. (2000) suggested that in order to understand the reasons behind the decision of an individual to seek or not to seek professional help, the individual differences need to be understood. Lopez et al., (1998) affirmed that one of the individual differences that might influence an individual's decision to seek help might be adult attachment. Also Shaffer et al. (2006) indicated that different attachment styles should lead to differences in the help-seeking decisions of individuals. Bowlby (1973) suggested that attachment systems are activated when an individual is distressed, according to this premise, researchers found that insecure attachment styles may hinder an individual's attempts to seek help (Hazan & Shaver, 1987; Kobak & Sceery, 1988).

In the attachment literature it can be seen that the findings of many studies present similar results with regards to the relationship between attachment styles and help seeking. The findings indicated that securely attached individuals engage in more help seeking behavior than insecurely attached individuals (Collins & Feeney, 2000; DeFronzo et al., 2001; Moran, 2007; Vogel & Wei, 2005). Lopez et al. (1998) indicated that insecurely attached individuals (including dismissive and fearful attachment styles) are less willing to receive professional psychological help and view mental health counseling negatively compared to securely attached individuals.

Vogel and Wei (2005) on the other hand, affirmed that not only individuals with secure and insecure attachment styles present differences in help seeking intention, but also individuals with different types of insecure attachment, which include dismissing, fearful and preoccupied attachment styles, present the same level of willingness to seek professional help. In different studies it was reported that individuals who have secure and preoccupied attachment styles are more likely to receive psychological treatment and are more willing to seek help than those who have dismissing and fearful attachment styles (Bartholomew & Horowitz, 1991; Collins & Feeney, 2000; Mallinckrodt, Gantt & Coble, 1995).

Moran (2007) found that individuals with dismissive attachment styles are less likely to seek help than individuals with preoccupied or fearful styles. In another study, it was found that individuals with dismissing and fearful attachment styles are less inclined to share their problems with others or seek support from others compared to individuals with secure and preoccupied attachment style (Bartholomew & Horowitz, 1991; Kobak & Screery, 1988; Mikulincer & Nachshon, 1991). Dozier (1990) reported that among a group of clients with serious psychopathological disorders, adults with dismissive attachment styles were more likely to reject treatment providers and less likely to use mental health services compared to individuals with secure, fearful and preoccupied attachment styles.

Larose and Bernier (2001) explained the relationship between insecure attachment and low proximity seeking by highlighting the influence of beliefs, attitudes and expectations on taking support from others which in turn influences help-seeking behavior in people with insecure attachment styles. In attachment literature, the studies illustrated that there is a negative correlation between insecure attachment styles and perception of social support (Collins & Read, 1990; Kobak & Sceery, 1988; Lopez, 1997; Mikulincer & Nachshon, 1991).

Kobak and Sceery (1988) reported that securely attached individuals have more support from their families than insecurely attached individuals. Florian, Mikulincer and Bucholtz (1995) also affirmed previous findings which asserted that secure individuals perceive more available support compared to insecure individuals. They also added that securely attached individuals are more prone to seek help in times of need than insecurely attached individuals because they have more positive views of others. In brief, they discuss the difference between secure attachment style and insecure attachment style with regards to seek social support by indicating the difference in trusting others. Reis and Shaver (1988) appraised that because trust promotes self-disclosure and intimacy at any age, individual needs to trust someone to be sure about the availability and responsiveness of that person at times of distress.

In another study, Priel and Shamai (1995) indicated that individuals with insecure attachment styles are less satisfied with the support they receive from others, and they have also asserted that securely attached individuals perceive others more trustworthy than insecurely attached individuals. Mikulincer and Nachshon (1991) affirmed that since individuals with secure and preoccupied attachment styles have a positive view of others, they perceive others trustworthy which make them disclose more easily and effectively than individuals with dismissive and fearful attachment styles who have negative views of others.

Many researchers affirmed that individuals with a secure attachment style are more willing to self-disclose, are more efficient in disclosing personal problems and expressing their emotions in a relatively more open way than individuals with insecure attachment styles which include fearful, preoccupied and dismissive styles (Anders &Tucker, 2000; Bartholomew & Horowitz, 1991; Collins & Feeney, 2000; Collins & Read, 1990; Keelan et al., 1998; Kobak & Hazan, 1991). Mikulincer and Nachshon (1991) asserted that securely attached individuals exhibit the least comfort and competence with self-disclosure than insecurely attached ones. Keelan et al., (1998) affirmed that securely attached individuals disclosed more intimately to their partners than insecurely attached ones. Dozier (1990) informed that among four attachment styles, the level of self-disclosure was the least in the dismissive group. Eames and Roth (2000) and Justitz (2002) examined the relationship between client attachment styles and therapy alliance. In both studies individuals with secure attachment styles were reported as having better therapy alliance than individuals with insecure attachment styles. Moreover, a fearful attachment style was found to have the weakest therapy alliance.

In addition to four attachment styles Brennan, Clark and Shaver (1998) proposed two dimensions of adult attachment as anxiety and avoidance. They suggested that individuals with high levels of either or both dimensions of adult attachment are insecurely oriented while individuals with low levels of either or both dimensions of adult attachment are securely oriented.

The anxiety dimension of adult attachment was defined as one's negative view of oneself, worries about rejection and abandonment, and an excessive need for approval from others; on the other hand, avoidance dimension was explained as a negative view of others, the worries about depending on others and excessive need for self-reliance (Brennan et al., 1998; Shaver & Fraley, 2004). Shaver and Mikulincer (2002) and Vogel and Wei (2005) further argued that these two orthogonal dimensions of adult attachment play an important role in one's help seeking intention. There are many studies which examined the relationship between attachment avoidance (e.g., negative internal working model of others), attachment anxiety (e.g., negative internal working model of self) and help seeking intention. Dozier (1990) and Feeney and Ryan (1994) reported that individuals with

attachment avoidance are more reluctant to seek professional help compared to those with attachment anxiety.

Vogel and Wei (2005) examined the mediating roles of perceived social support and psychological distress on the relationship between adult attachment and help-seeking intentions with 355 college students, and found that individuals with attachment avoidance are less likely to seek help than individuals with attachment anxiety. They also found that individuals with attachment avoidance to be less willing to acknowledge distress.

Shaffer et al. (2006) investigated the mediating effects of anticipated risks, benefits, and attitudes toward seeking counseling on the relation between adult attachment and help-seeking intentions for psychological and interpersonal concerns. They conducted the study with a sample of 821 undergraduate students and found that individuals with attachment anxiety to be more positively related to acknowledging distress and to seeking help than those with attachment avoidance. Moreover, they added that perceived social support and psychological distress play an important mediating role between attachment and intent to seek professional psychological help.

The differences in the intention to seek help between two dimensions were attributed to an individual's perception of others. Researchers reported that because of the fact that individuals with attachment anxiety perceive others positively, they are more willing to seek counseling than individuals with attachment avoidance; on the other hand because individuals with attachment avoidance see others negatively, they avoid relying on others for help (Cassidy, 1994; 2000; Kobak & Sceery, 1988; Shaver & Mikulincer, 2002).

2.3 Early Maladaptive Schemas

The concept of 'schemata' was firstly used by Bartlett (1932) to explain how individuals understand the world by organizing information with a mental structure. Psychologists like Piaget, Bandura, Watson, Freud and Beck (Stein, 1992) have also utilized the schema to understand and explain the influence of environment on individuals' thoughts and behaviors. Beck (1976) theorized that an individual's emotions and behaviors are shaped and conducted by cognitive schemas. Beck (1967) defined the schemas, or core beliefs, as deeper levels of beliefs about the self that are global, rigid and over generalized.

Beck (1967, p. 283) described the cognitive schema as ". . . a cognitive structure for screening, coding, and evaluating the stimuli that impinge on the organism . . ." Integrating the work of Beck (1976) and Bowlby (1988); Young (1990) revised the definition of cognitive schemas and provided a definition for Early Maladaptive Schemas (EMS) as ". . . extremely stable and enduring themes that develop during childhood and are elaborated upon throughout an individual's lifetime" (p. 9). Thus, while accepting the organizational and informational processing function of schemas, Young also highlighted the thematic content and early onset of cognitive schemas. Recently, Young, Klosko and Wieshaar (2003) added that in addition to memories and cognitions, EMS contains emotions and bodily sensations as well. Considering these definitions, schemas can be defined as

extremely stable and enduring abstract cognitive structures comprised of memories, bodily sensations, emotions, and cognitions which affect evaluations about the world and oneself, which form a basis for organizing and processing the information about oneself and environment by affecting the information evaluation process.

According to Young et al., (2003), early maladaptive schemas develop during childhood as a result of a combination of dysfunctional interactions with parents, siblings and peers; a child's inherited vulnerable temperament; traumatic childhood events and repeatedly thwarted or unmet core needs in childhood. These universally unsatisfied core needs are identified as establishing secure attachment with others, feeling of autonomy, competence and a sense of identity, having a sense of freedom while expressing valid needs, emotions, realistic limits, and selfcontrol (Young et al., 2003). Young (1999) asserted that schemas form a basis for guiding the interpretation of later experience.

Schemas are rigid and enduring cognitive structures which are strongly resistant to change and are perpetuated by themselves throughout life. Schemas that are dysfunctional and negative are termed as early maladaptive schemas. Maladaptive schemas stay in a latent situation until an individual encounters a negative life event which influences a particular schema (Young et al., 2003). The activation of schemas result with individual erroneous and dysfunctional perception, thought and behavior since schemas operate themselves in a manner that enables the individual to distort or magnify the truth and negate or minimize the information that is inconsistent with the schema to maintain and confirm them (Young, 1999; Young et al., 2003).

Young (1999) defined eighteen early maladaptive schemas and classified them into five domains through clinical observation as Disconnection and Rejection; Impaired Autonomy and Performance; Impaired Limits; Other-Directedness; Overvigilance and Inhibition.

The first domain that is disconnection and rejection is about the unsatisfied needs of a person for security, safety, stability, empathy, and acceptance. Young et al. (2003), considers this domain as the most powerful and damaging domain since it involves the abandonment/instability, mistrust/abuse, emotional deprivation, and defensiveness/shame schemas which are formed by the most traumatic early life experiences. Young et al., (2003) apprised that the schemas under this domain are developed by a person when a child is brought up in an abusive, unstable, unpredictable, cold, withholding, rejecting, or isolated family environment. Individuals who have these schemas under the disconnection and rejection domain can experience isolation and discomfort when connecting to others and establishing trust. They may also experience over-distress at times of separation and rejection (Young et al., 2003).

According to Young et al., (2003) the schemas under disconnection and rejection domain are as follows;

1. Abandonment / Instability: An individual who has this schema believes that the closest people to them will abandon, die or get sick or leave them for someone better. They also feel that the emotional support and connection they established with other people will not be a stable and reliable one.

2. Mistrust / Abuse: Individuals with this schema tend to avoid establishing intimate relationships. They do not share their thoughts and feelings with others and do not get too close to others, because they feel that others will hurt, abuse, humiliate, cheat, lie, manipulate or take advantage of them. They perceive that others hurt them intentionally or as a result of an unjustified and extreme negligence.

3. Emotional Deprivation: Young et al. (2003) asserted that individuals with this schema believe that their emotional needs will not be satisfied by others. This is because they conceive that no one is available for them to get affection and support when they need. People who have this schema perceive themselves as misunderstood and lonely.

4. Defectiveness / Shame: Individuals with this type of schemas may perceive themselves as defective, flawed, inferior, bad, worthless and unlovable, because of their perceptions and they may feel chronic feelings of shame about who they are. To justify their perception about themselves, they degrade themselves as well as allowing others to degrade them. Furthermore, they avoid establishing relationships with others to hide their deficiencies that they believe they have.

5. Social Isolation / Alienation: Individual who has this schema believes that others will not accept them and will leave them out of their group since individuals

with this schema have perceptions of being different from other people and not part of a community of group.

The second domain is impaired autonomy and performance and it is about the expectations that interfere with a person's perceived ability to function independently, or successfully. The schemas under this domain are developed by a person when a child is brought up in an over protective family environment where all the responsibilities of a child are accomplished by parents to protect the child from harm. In this family environment, children begin to feel incompetency. They cannot be aware of their own potential, cannot trust themselves and their abilities to accomplish a task or responsibility and can feel to have inadequate self-control. Individuals who have schemas under this domain feel that they are not competent enough to control themselves and their life and thus establish unhealthy relationships and connection with others. Although this is rare, the opposite family environment can produce the same effect. People with schemas in the impaired autonomy and performance domains are not able to form their own identities and live their own lives, and they will be dependent on their families and other people in their life.

The schemas under impaired autonomy and performance domain;

6. Dependence / Incompetence: In the first part of schema-incompetence, individuals feel that they are not 'competent' enough to handle daily problems and decide and judge by themselves, thus in the second part, individuals feel 'dependent' on others to take care of them and function for them like their families. 7. Vulnerability to Harm or Illness: Individuals with these schemas have a constant fear that something will happen to them. Young et al. (2003) described these fears as medical illness, natural disaster, and victims of crime, terrible accident, losing all money, nervous breakdown and going crazy.

8. Enmeshment / Undeveloped Self: In this schema individuals perceive extreme emotional involvement and closeness to one or more than one person, especially to a parent figure. They believe that they cannot sustain their life without the help of that person. Since, individuals with this schema are extremely dependent, they surrendered their identity to maintain their connection with a significant person and they may feel emptiness because of a lack of individual identity.

9. Failure: Individuals who have this schema believe that they will fail or inevitably fail in the areas of achievement, especially when they are compared to their peers, thus they have a feeling of inadequacy relative to their peers in achievement areas.

The third domain is impaired limits and it is about a lack of internal limits with regards to reciprocity or self-discipline and a lack of respect for others. In other words, it is about having difficulty in realizing others' needs and controlling one's drives. Schemas in this domain are formed when a person is raised in a family that is over indulgent and where all the misbehaviors are excused. Children, who grow up in these kinds of family environments may feel too special or may be too selfish, spoiled, or irresponsible and feel unlimited control on behalf of others, thus may have difficulty in controlling themselves in social relationships and may show laxity of conduct in daily life.

The schemas under impaired limits domain;

10. Entitlement / Grandiosity: Individuals who have this schema feel themselves superior to others, they feel that they are special and have special rights and privileges. They do not limit themselves with the principles of reciprocity that guide healthy human interaction and try to satisfy their needs by manipulating, dominating, competing and forcing others, and by ignoring others' needs.

11. Insufficient Self-Control / Self-Discipline: Individuals with this schema have difficulty in controlling excessive emotions and impulses and also they are insufficient in controlling themselves and being tolerant to frustration while trying to achieve personal goals.

The fourth domain is other-directedness and is about an excessive focus on the desires of others. The schemas under this domain are formed when a child brought up in an environment where they were not allowed to pursue their personal preferences and where they were taught to excessively focus on others' feelings and thoughts. Children learn to suppress (sometimes be unaware) their own needs in order to gain love, approval, maintain one's sense of connection, or avoid retaliation. Moreover, in these families, acceptance and love is often conditional to the child's behavior. Often these children are insufficient in expressing their emotions and thoughts because they believe that they will be accused by their families or their families will respond to them in an unfavorable manner. As a result, children gain approval when they are directed by the desires of others rather than by their personal will.

The schemas under other-directedness domain;

12. Subjugation: Individuals with this schema need to be approved by others in order to be self-assured. Such individuals suppress their needs; and follow other people's desires to gain approval, acceptance and interest from others. They also suppress their emotions to avoid anger, retaliation, or abandonment.

13. Self-Sacrifices: Individuals who have this schema present excessive effort to meet others' needs at the expense of their own desires. They sacrifice themselves in order to prevent others from experiencing pain, to avoid feeling of guilt because of feeling of selfishness and to maintain their relationship with that person who they perceive as needy. After a long self-sacrificing period individuals may experience excessive anger toward people to whom they sacrificed themselves since they may start to think that they are not appreciated enough as well as thinking that their needs are not satisfied.

14. Approval Seeking / Recognition Seeking: Individuals with this schema show excessive desire to be approved by others to satisfy their unmet core emotional needs. They perceive that their thoughts and feelings are not important for others, as they were taught to focus on the thoughts and feelings of other. The approval seeking types always expect to be approved and accepted, while recognition seeking types expect to be applauded and admired. The last domain is overvigilance and inhibition and it is about suppressing spontaneous feelings and impulses while maintaining rigid and personal rules. People with schemas in this domain are often raised in a family that exaggerate responsibilities, have strict rules, expect perfection, do not encourage and support expression of emotions, thoughts and happiness. As a consequence the child focuses on negative life events, becomes unhappy, and avoids establishing close relationships.

The schemas under overvigilance and inhibition domain;

15. Negative / Pessimism: Individuals who have this schema focus on the negative aspects of life while ignoring the positive aspects. They have unrealistic, exaggerated, and pessimistic expectations about future. To avoid from their foreside consequences about the future they spent a great deal of time to be sure not to make mistakes.

16. Emotional Inhibition: Individuals with this schema over suppress their emotions and behaviors to avoid negative situations and also avoid discussing them. Young et al. (2003) determined the most common areas where emotionally inhibited individuals suppress their emotions as; anger, aggression, positive impulses, expressing vulnerability, freely communicating with others about feelings, disregarding emotions and emphasizing rationality.

17. Unrelenting Standards / Hypercriticalness: To avoid hypercriticism of oneself and others, individuals with this schema believe that they should reach high standards in their behavior and work. These individuals have rigid rules about their

life; they are perfectionists although they perceive their standards normal and are always in a rush to accomplish more (Young et al., 2003).

18. Punitiveness: Individuals who have this schema believe that people including themselves should be harshly punished because of their mistakes. They have difficulty in excusing the mistakes of themselves and others. Moreover, they do not accept any excuses and lack the quality to show mercy.

2.3.1 Early Maladaptive Schemas and Attachment

Cecero et al. (2004) presented that the definition of internal working models were to be closely related to the definition of EMS. Bowbly (1988) apprised that internal working models are cognitive schemas which contain thoughts about self and others in one's social world. Likewise the internal working models, the EMSs were referred to as cognitive structures which are self-defeating emotional and cognitive patterns regarding oneself and one's personal relationships (Young, et al., 2003). Similar to the formation of internal working models, the development of early maladaptive schemas is based on the unmet basic emotional needs in relationships with significant others and they affect self-perception (Mason et al., 2005; Young, 1990). Schemas include dysfunctional internal working models, the reactions of children to their attachment figure and their coping strategies (Young et al., 2003). Parallel to the attachment theory, the cognitive theory also emphasizes the influence of early childhood events on the psychology of an adult. Both of the theories posit that the effect of early childhood events on an individual's psychology may be mediated by an internal model. The main distinction is that while the attachment theory claims that an individual subconsciously shapes relationship patterns according to the relationship with their parents; the cognitive theory affirms that individuals forms their relationship patterns with others or parents not only by replicating their relationship with their parents but also with the opinions about oneself and others which individual formed in relation to their childhood interactions.

To sum up, both the internal working models and the cognitive schemas are the mental representations of the self and the others, and both of them are cognitive structures which include beliefs, attitudes and memories (McBride & Atkinson, 2009). Moreover, the activation process is the same. Both can be activated by internal or external stimuli and have criteria for attending and processing information when the information is processed and appraised. Moreover, it is also worth noting that for both the first appraisal of information is done unconsciously before the conscious process occurs (Main, Kaplan & Cassidy, 1985; McBride & Atkinson, 2009). And lastly, Hill and Safran, (1994) have asserted that interpersonal schemas represent an emotional bond that individuals establish with the attachment figure, which allows them to predict interaction with the significant other.

A wide body of attachment literature has focused on the association between attachment style and schemas (Feeney & Noller, 1996; Griffin & Bartholomew, 1994; Hazan & Shaver, 1994; Holmes, 1993; Mason et al. 2005). Horowitz et al. (1993) studied the relationship between attachment styles and early maladaptive schemas, and they asserted that people with insecure attachment styles (preoccupied, fearful and dismissive) have at least the early maladaptive schemas.

Cecero et al. (2004) investigated the relationship between attachment styles and schemas with 292 undergraduate students by using separate multiple linear regressions for each of the four attachment styles, with EMSs as the predictor variable and attachment styles as the criterion variables. They found that the 15schema model was significantly predicting all four attachment styles. They affirmed that abandonment/instability was significant positive predictor of preoccupied attachment style; social isolation/alienation and emotional deprivation were significant predictors of dismissing attachment while abandonment/instability and subjugation were significant negative predictors of dismissing attachment style. They also added that mistrust/abuse and emotional inhibition schemas were a significant positive predictor of fearful attachment style. Furthermore, they asserted that none of the EMSs' predicted secure attachment positively.

Another association between attachment and maladaptive schemas was done by Mason et al. (2005) within a clinical sample of 72 people who were in contact with mental health services to see whether individuals with fearful attachment styles had more maladaptive schemas compared to the individuals with secure attachment styles. 14 (19.4%) of participants were classified as secure, 34 (47.2%) of them as fearful, 18 (25%) as preoccupied, and 6 (8.3%) as dismissing which means that the majority of participants had insecure attachment styles (81%).

Their findings indicated that individuals with fearful and preoccupied attachment styles possessed significantly more early maladaptive schemas than individuals with secure and dismissing attachment styles. They also found that the fearful group possessed greater maladaptive schemas while the secure attachment style group had lower scores of maladaptive schemas. By using the discriminant function analysis, they characterized the secure attachment style group by lower scores for emotional deprivation, abandonment, enmeshment, mistrust/abuse, subjugation, social isolation, defectiveness/shame, emotional inhibition, and dependence/incompetence. On the other hand, the fearful attachment style group was characterized by greater social isolation, defectiveness/shame, and emotional inhibition; and lastly the preoccupied group was characterized by abandonment, subjugation, and emotional deprivation scores as characterizing this group. They informed that because the number of participants in the dismissing attachment style group fell below the number of predictor variables, they did not use the group in this analysis.

In a recent study, which was conducted with 289 students with a mean age of 21 years, the researchers found consistent results with previous findings by confirming the strong correlation between attachment and early maladaptive schemas (Bosmans, Braet & Vlierberghe, 2010).

Hazan and Shaver (1987) on the other hand, related attachment styles in adulthood with parental care-giving. They affirmed that different experiences with maternal and paternal figures have influence on determination of attachment style. They conducted a survey with 620 individual and reported that individuals with insecure attachment styles described a mother who did not understand and a father who was cold, not caring, and not confident. They also informed that in contrast to insecure individuals, secure individuals described their mothers as respectful, accepting, not rejecting, and not critical, and their fathers as fair. However Cecero, et al. (2004) who investigated romantic attachment rather than attachment to parents, did not find any difference between attachment to mother and father figures. Considering the study of Hazen and Shaver (1987) researchers examined the relationship between parenting experiences and attachment style with regard to their impact on determination of schemas (Harris & Curtin, 2002; Suess, Grossman & Sroufe, 1992). Blissett et al., (2006) confirmed the different impact of attachment figure on schemas by examining the relationships between schemas and perceptions of the quality of the current attachment relationship with maternal and paternal figures in a non-clinical sample. They also regarded the maternal attachment figure as the most influential in predicting the schemas of mistrust/abuse, emotional deprivation, abandonment, social isolation, insufficient self-control and enmeshment whereas mistrust/ abuse, emotional deprivation and abandonment schemas alone predicted the quality of the paternal relationship.

2.3.2 Early Maladaptive Schemas and Help Seeking

In attachment literature it is known that people with insecure attachment styles are less willing to seek help and show less positive attitudes toward help seeking. Moreover, in literature it is reported that insecurely attached individuals are more inclined to have EMSs than securely attached individuals. Because of the substantial links between attachment style and help seeking attitude as well as between attachment style and EMSs, it is reasonable to expect help seeking attitudes to be associated with a stronger or weaker presence of these schemas. Therefore, it can be assumed that an individual's help seeking attitude may be influenced by the presence of EMSs.

Research has shown that there are many factors that influence a person's decision to seek help and attitude toward professional help seeking have been found one of the strongest factors that affects an individual's decision to seek help. However, as it was asserted in literature, attitude is influenced by many factors. Moreover, Young (2003) theorized that early maladaptive schemas would affect a person's decision to seek help. Therefore, it is hypothesized that there will be differences between the attitudes of individuals who vary on their attachment styles and EMSs. In this study, the question of whether individuals' attitudes toward seeking psychological help differ with regards to their schemas and attachment styles will be explored.

CHAPTER III

METHOD

The methodological procedures followed in the study are presented in this chapter. First section presents the participants of the study, second section deals with the psychometric properties of the data collection instruments, the third includes data collection process and in the last section the data analysis procedure was described.

3.1 Participants

Participants were selected from Middle East Technical University in Ankara. The participants were selected by using convenient sampling procedure. The sample size was reduced to five hundred seventy two from seven hundred fifty because of unanswered items in the scales. Therefore, the sample of the present study consisted of five hundred seventy two undergraduate students from thirty departments of the five faculties of the university. The sample included 308 male (53.8%) and 264 female (46.2%) students. The age of the participants ranged from 18 to 26 years old (M = 20.75; SD = 1.46).

As to the faculties of the participants, 26 (4.5%) of the participants were from the faculty of architecture, 50 (8.7%) were from the faculty of economics and administrative science, 62 (10.8%) were from the faculty of arts and science, 211 (36.9%) were from the faculty of engineering and 223 (39%) were from the faculty of education.

3.2 Data Collection Instruments

In order to collect data, a demographic information form was developed to get information with regards to the participants' gender, and faculty. In addition to the demographic information form, three different instruments were used in the current study: Relationship Scale Questionnaire (RSQ; Griffin & Bartholomew, 1994) was used to measure the internal working models of attachment, Attitudes toward Seeking Psychological Help-Shortened (ASPH-S; Türküm, 2001) was used to measure participants' attitudes toward seeking psychological help, and lastly the Young Schema Questionnaire-Short form (YSQ-SF; Young & Brown, 2006) was used to measure early maladaptive schemas.

3.2.1 Demographic Information Questionnaire

The demographic information questionnaire consisted of three questions which asked the participant to indicate their age, gender and faculty. The volunteer participation form was attached to the demographic information form.

3.2.2 The Attitudes toward Seeking Psychological Help-Shortened (ASPH-S): The ASPH of Fischer and Turner (1970), which was developed to measure attitudes toward help seeking was adapted to Turkish by Türküm (2001). The ASPH-S has 18 items which are asked to be rated on a five- point Likert-type scales ranging from 1 (strongly disagree) to 5 (strongly agree). High scores indicate high positive attitude toward seeking professional psychological help (Türküm, 2001). The reliability coefficient of the scale was found .88 for the total scale. Subscales were found as .76 for the first factor that included seven items which indicate confidence in taking psychological help, .77 for second factor that include seven items which indicate beliefs about getting psychological help, .76 for third factor that include seven items which indicate endurance against labeling, and .68 for fourth factor that include six items which indicate self-disclosure (Türküm, 2001). Test-retest reliability was .99. Discriminative validity analysis was found to be sufficient by examining the differences between two groups that were formed with students who received psychological help and with those who did not. The results showed significant difference between two groups (t = 3.53), which was evaluated as sufficient discriminative validity (Türküm, 2001).

3.2.3 Relationship Scales Questionnaire (RSQ)

The RSQ, which was developed by Griffin and Bartholomew (1994) and adapted to Turkish by Sümer and Güngor (1999), was used to measure attachment styles of participants. RSQ's subscales measure the Secure, Preoccupied, Dismissing and Fearful Attachment styles (Sümer & Güngör, 1999). It is a 30-item questionnaire with a seven-point scale range from "not at all like me" (1) to "very much like me" (7). In the scale, the subscales for secure and dismissing attachment styles consist of five items and the subscales for fearful and preoccupied attachment styles consist of 4 items. While scoring the scale, the average of the assigned items for each attachment style is calculated. The attachment style with the highest average is considered to be the attachment style of that person (Sümer and Güngör, 1999). The 17 items of RSQ aim at measuring the four category model of Bartholomew and Horowitz's (1991) relationship questionnaire and the 13 items are taken from Hazan and Shaver's (1987) Attachment Measure Paragraphs and Collins and Read's (1990) Adult Attachment Scale. The test-retest reliability coefficients of the scale were found to be between .54 and .78 and the correlation coefficients of the scale was found between .49 and .61 (Sümer and Güngör, 1999). Sümer and Güngör (1999) implemented the cross-cultural comparison with a US sample and the results showed that RSQ had satisfactory levels of reliability, stability and convergent validity.

Griffin and Bartholomew (1994) reported that the Cronbach alpha coefficients of the RSQ's subscales ranged between .41 and .71, but the test-retest correlation coefficient was satisfactory. Griffin and Bartholomew (1994) explained the low alpha levels of the RSQ with the characteristics of the subscales, which measure both the model of self and the model of others at the same time.

3.2.4 Young Schema Questionnaire- Shortened (YSQ-SF)

The Young Schema Questionnaire- Short Form (YSQ-SF; Young & Brown, 1999) was used to assess the early maladaptive schemas which measure 18 early maladaptive schemas. The original Young Schema Questionnaire, which was developed (1990) and revised (1991) by Young and Brown, has 205 items and measures 15 early maladaptive schemas. In the present study, the Turkish version of 75-item short form of the original YSQ has been used to measure 14

maladaptive schemas. Each item of the YSQ-SF is rated on a six-point Likert scale ranging from 1 (completely untrue of me) to 6 (describes me perfectly). The mean scores are calculated for each of the 14 early maladaptive schemas and higher scores indicate a more dysfunctional level of that schema domain (Oei & Baranoff, 2007). Total scores on each of the 18 subscales can range from 0 to 30.

Psychometric properties and factorial structures of YSQ were examined by Schmidt, Joiner, Young and Telch (1995) and Lee, Taylor and Dunn (1999), and according to these studies the factor structure of the measure revealed similarity with Young's findings (1999). The internal consistency coefficients of the scale, however, indicated a range between .83 (Enmeshment/Undeveloped Self) and .96 (Defectiveness/Share). Moreover, in the study of Schmidt et al., (1995) the testretest reliability for the EMS ranged from .50 to .82.

The Turkish adaptation of the YSQ-SF was made by Karaosmanoğlu, Soygüt, Tuncer, Derinöz, and Yeroham (2005). According to this study which was carried out with psychiatric patients, the internal consistency coefficients for the EMSs were found to be between the range of .75 (social isolation) and .93 (failure). In another study which was conducted by Soygüt, Karaosmanoğlu and Çakır (2009), the principal components analysis was conducted to demonstrate the scale's factorial structure. The findings of the study indicated that although at the beginning there were 15 factorial structures; a 14-factor structure of the Young Schema Questionnaire was observed in the interpretable range. In the study, the 27th and 45th items were loaded on the 15th factor. Therefore they were excluded from the scale since it was considered as a duplication of factor 7, and was not considered a separate factor, thus regarding to the results of this study, 14 factors were determined. In this study, while the Cronbach's alpha of internal consistency ranged between .53 and .81, test-retest reliability ranged from .66 to .83.

3.2.5 Validity and Reliability of Scales

Principal component analysis (PCA) was conducted to test the construct validity of the scales and to find out the factor structure. Assumptions of PCA were checked for each scale. First, the sample size needs to be N > 300 (Tabachnick & Fidell, 2001). The sample size is N = 572, so it is enough for PCA. Secondly, the variables are metric. Thirdly, the factorability of the items was assessed. The Bartlett test of sphericity was significant for three of the scales. Finally, multivariate normality and sampling adequacy are assumed based on the Kaiser-Meyer-Olkin, which should be greater than .50 (Leech, Barrett & Morgan, 2005) and in this study the Kaiser-Meyer-Olkin value was found to be .93 for ASPH-S, .87 for RSQ and .91 for YSQ-SF. Data were found to be suitable for principal component analysis (PCA). According to the PCA of 18 questions of ASPH-S, 3 factors were found; and as for the PCA of 30 questions of RSQ, 6 factors were found; and lastly for the PCA of 80 questions of YSQ-SF, 18 factors were found. In social science studies, the total variance should be at least 55% (Osborne & Costello, 2004). The total variance value that is greater than 55% shows that the scale is adequate for the sample for which it was used. According to the model, variances of ASPH-S 3 factors, RSQ 6 factors and YSQ-SF 18 factors were found to be 61.17%, 53.81 %, and 60.88 %, respectively, and these variances explain the majority of the each scale.

In the current study, Cronbach's coefficient alpha was calculated to test the reliability of the scales. The internal consistency coefficients for the RSQ and YSQ-SF scales were .89 and .94 respectively which are all greater than .60. This means that the scale is reliable. However, the internal consistency coefficient for the ASPH-S was found to be .63, which is also accepted as a relatively reliable value. Moreover, changes in reliability were calculated for each of the items in each scale, and it was seen that 18 items of the ASPH-S scale, 30 items of RSQ and 80 items of YSQ-SF have greater alpha levels than .20, which means that each question in the scales has the same effect on reliability, thus none of them should be excluded. Additionally, scale items were investigated as to whether they had any additivity by using Tukey's test and found that they are additive (p < 0.001) which means that the items in the scales can be added and that this total is meaningful.

3.3 Data Collection Procedure

In order to conduct the study, the necessary permission from the Middle East Technical University Human Subjects Ethics Committee and the Presidency was taken. By using convenience sampling method, three different questionnaires and a demographic form were distributed at the beginning of the classes for which the instructors gave permission, between October, 2011 and November, 2011. Before asking for the participation of the students, they were given a short standard explanation of the aims of the study was provided both verbally and in the written copy of the volunteer participation form. For anonymity, students were told not to write their names on questionnaires.

3.4 Operational Definitions of the Variables

Gender: Data regarding gender was gathered by demographic information form. Gender is a dichotomous variable and it is defined as male or female.

Attitude toward Help Seeking: The help seeking attitude of students was determined by the Attitude toward Help Seeking Scale (Fischer & Turner, 1970). High scores from the scale indicates more positive attitude toward help seeking while low scores indicate less positive attitude.

Attachment Styles: Attachment styles are nominal variables classified as secure, dismissive, preoccupied and fearful. The determination of the attachment styles was done by the Relationship Scale Questionnaire (Griffin & Bartholomew, 1994). The classification was done by scoring the scale; the average of the assigned items for each attachment style is calculated. The attachment style with the highest average is considered to be the attachment style of that person.

Early Maladaptive Schemas: Schemas are nominal variables classified in to 14 different schemas that are Abandonment / Instability, Mistrust / Abuse, Emotional Deprivation, Defectiveness / Shame, Social Isolation / Alienation, Dependence / Incompetence, Vulnerability to Harm or Illness, Enmeshment / Undeveloped Self, Failure, Entitlement / Grandiosity, Insufficient Self-Control / Self-Discipline, Subjugation, Self-Sacrifices, Approval Seeking / Recognition Seeking, Negative / Pessimism, Emotional Inhibition, Unrelenting Standards / Hypercriticalness and Punitiveness. The determination of early maladaptive schemas was done by The Young Schema Questionnaire- Short Form (YSQ-SF; Young & Brown, 1999). The classification was done by calculating the mean scores for each of the 14 early maladaptive schemas and higher scores indicate a more dysfunctional level of that schema domain.

3.5 Data Analysis

Before conducting the analysis; the accuracy of data entry, missing values and the assumptions for one-way analysis of variance were investigated. The missing values were excluded reducing the sample size from 750 to 572 (308 males and 264 females). Before the investigation process, assumptions were checked for each analysis. Data were analyzed by using SPSS 18.0. In order to understand the characteristics of the sample, descriptive statistics (mean, standard deviation) of the data were presented. After that, exploratory factor analysis and reliability analysis (Cronbach's coefficient alpha) were conducted respectively to check the validity and reliability of the instruments. In the third step, information related to attitude toward help seeking with regards to gender was presented. Afterwards, a series of initial analysis were conducted to explore as to whether attachment styles and early maladaptive schemas were related to attitude toward psychological help seeking in order to find out whether there were any significant differences in terms of styles and early maladaptive schemas. Finally for the main analysis, the effect of attachment styles and early maladaptive schemas on attitudes toward seeking psychological help was explored by using one-way analysis of variance.

CHAPTER IV

RESULTS

In this chapter, findings of this study were presented. First of all, descriptive statistics related to the gender of the participants were presented. For preliminary analyses, information related to gender differences in attitudes toward seeking psychological help was reported. Finally, for the main purpose of the study; one way analysis of variance (one-way ANOVA) test results were presented with regards to the difference in students' attitudes toward seeking psychological help in the attachment styles and early maladaptive schemas respectively.

4.1 Descriptive Statistics of the Main Study

The target population of the present study is the students of the Middle East Technical University (METU), in Ankara. This population included students from the faculties of education, engineering, arts and sciences, economics and administrative sciences, and architecture. The sample was selected by the convenience sampling method. The sample consisted of 572 (264 female, 308 male) undergraduate students from thirty departments of the five faculties.

The Relationship Scale Questionnaire scores of the participants were analyzed with regards their attachment styles. It was found that 17 participants had equal values in two different attachment styles, thus they were excluded. Apart from these 17 participants; the attachment styles of the participants were categorized under four sub categories. According to these categories 27% of the participants had secure attachment styles (n = 154), 15.4% of the participants had fearful attachment styles (n = 88), 18.4% of the participants had preoccupied attachment styles (n = 105), and 36.4% of the participants had dismissive attachment styles (n = 208). When the participants' scores on the Young Schema Questionnaire were considered; the inferences about the existence of the maladaptive schemas were found as follows: 8.2 % of the participants had emotional deprivation schemas (n = 47), 13.5% of the participants had failure schemas (n = 77), 24.5% of the participants had negative/pessimism schemas (n = 77)140), 24% of the participants had social isolation/mistrust schemas (n = 137), 27.6% of the participants had emotional inhibition schemas (n = 158), 65.4 % of the participants had approval seeking schemas (n = 374), 8.2% of the participants had enmeshment/dependency schemas (n = 47), 69.2% of the participants had entitlement/insufficient self-control schemas (n = 396), 28.8% of the participants had self-sacrifice schemas (n = 165), 7% of the participants had abandonment schemas (n = 40), 69.8% of the participants had punitiveness schemas (n = 399), 8.6% of the participants had defectiveness schemas (n = 49), 17.8% of the participants had vulnerability to harm schemas (n = 102), 51.4% of the participants has unrelating standards schemas (n = 294).

4.2 Assumption Check for One-Way ANOVA

Firstly, independent observation assumption can be assumed for the present study as the participants' responding to questions independently of one another in the data collection process. This is actually the consequence of selecting the data randomly. Secondly, The Levene's test for equality of variance was conducted to test the homogeneity, the level of significance was selected as alpha= 0.05, the findings supported the homogeneity assumption. Lastly, although the normality assumptions are not satisfied for each group; the large sample size, the homogeneity of variance and random selection yielded fairly accurate p values (Green & Salkind, 2008). According to the data, it is concluded that the assumptions for using one-way ANOVA are satisfied for each group, hence the one way analysis of variance applied to analyze the data.

4.3 Gender and Attitudes toward Help Seeking

One-way ANOVA was conducted to evaluate the effect of gender on students' help seeking attitude. Subjects were divided into two groups according to their gender; females (M = 71.63, SD = 9.14) and males (M = 64.90, SD = 9.58). There is significant difference between help seeking attitude of females and males at 0.05 level of significance, F(1, 572) = .00, p = 00, $\eta^2 = 0.11$ and it is greater than 0.05. Attachment styles have medium effect on students help seeking attitude, accounting for about % 11 of the variance, $\eta^2 = .11$. The summary of one-way ANOVA results is presented in table 1. The Post hoc test cooperation cannot be performed for gender as it is two groups, but inferential from their mean

differences can be made; the female group (M = 71.63, SD = 9.14) has higher mean than the male group (M = 64.90, SD = 9.58). Therefore, it could be said that female students have more positive attitude than male students.

Table 1.

One-Way ANOVA Results for the Effects of Gender on Students' Attitude toward Help Seeking

Source	Type III SS	df	MS	F	Sig.	Partial η^2		
Corrected	6433.34 ^a	1	6433.34	73.64	.00	.11		
Model								
Intercept	2650410.29	1	2650410.29	30339.01	.00	.98		
Gender	6433.34	1	6433.34	73.64	.00	.11		
Error	49795.09	570	87.36					
Total	2742662.00	572						
Corrected Total	56228.43	571						
a. R Squared = .114 (Adjusted R Squared = ,113)								

4.4 Attachment Styles and Attitudes toward Help Seeking

One way analysis of variance was conducted to evaluate the effect of attachment styles of the students on their attitude toward help seeking scores. Subjects were divided into two groups according to their attachment styles; secure attachment style (M = 70.52, SD = 9.03), fearful attachment style (M = 67.09, SD = 10.62), preoccupied attachment style (M = 69.50, SD = 9.36) and dismissive attachment style (M = 67.13, SD = 10.28). The significant difference between attitude toward help seeking scores of students and different attachment styles at the 0.05 level of significance was found F(1, 3) = 4.66, p = .003, $\eta^2 = .02$.

A one way analysis of variance was conducted to learn about the effect of attachment styles of the students on their attitude toward help seeking scores. There was a significant effect of attachment styles on the level of students help seeking attitude at the p < .05 level for help seeking attitude for the students F(3, 572) = 4.66, p = .003. Attachment styles have small effect on students help seeking attitude, accounting for about % 2 of the variance, $\eta^2 = .02$. The summary of ANOVA results presented in table 2.

Table 2.

ANOVA Results for the Effects of Attachment Styles on Students' Attitude toward Help Seeking

Source	Type III SS	df	MS	F	Sig.	Partial η^2
Corrected	1351.60 ^a	3	450.53	4.66	.00	.02
Model						
Intercept	2429682.63	1	2429682.63	25148.31	.00	.98
KATEGORI	1351.60	3	450.53	4.66	.00	.02
Error	54876.84	568	96.61			
Total	2742662.00	572				
Corrected Total	56228.43	571				
a. R Squared = .0	024 (Adjusted]	R Squa	ared = .019)			

Post hoc comparison using the Scheffe test indicated that the mean scores for the secure attachment style (M = 70.52, SD = 9.03) was significantly different than the dismissive attachment style (M = 67.13, SD = 10.28). The Scheffe test results are presented in table 3.

Table 3.

Seeking Attitude. 95% Confidence (I) (J) Interval **٦** S

Post hoc Comparison of the Effect of Attachment Styles on Students' Help

	Attachment	Attachment	Mean			Inter	vai	
	Styles	Styles	Difference	nce Std.		Lower	Upper	
	Styles	Styres	(I-J)	Error	Sig.	Bound	Bound	
Scheffe	Secure	Fearful	3.42	1.26	.06	13	6.98	
		Preoccupied	1.01	1.22	.88	-2.43	4.46	
		Dismissive	3.39*	1.03	.01	.51	6.27	
	Fearful	Secure	-3.42	1.27	.06	-6.98	.13	
		Preoccupied	-2.41	1.39	.39	-6.31	1.49	
		Dismissive	035	1.22	1	-3.44	3.38	
	Preoccupied	Secure	-1.01	1.23	.88	-4.46	2.43	
		Fearful	2.41	1.39	.39	-1.49	6.31	
		Dismissive	2.37	1.18	.25	92	5.67	
	Dismissive	Secure	-3.39*	1.03	.01	-6.27	51	
		Fearful	.03	1.22	1	-3.38	3.44	
		Preoccupied	-2.37	1.18	.25	-5.67	.92	

4.5 Early Maladaptive Schemas and Attitude toward Help Seeking

One way analysis of variance was conducted to determine the effect of schemas on students' attitude toward help seeking. Each schema was analyzed separately. The one way analysis of variance indicated no significant effect of schemas of emotional deprivation F(1, 572) = 3.12, p = .78, failure F(1, 572) =2.70, p = .10, negative/pessimism F (1, 572) = 2.99, p = .84, approval/recognition seeking F(1, 572) = 1.08, p = .29, enmeshment/grandiosity F(1, 572) = 3.64, p =.57, self-sacrifices F(1, 572) = 0.74, p = .39, abandonment/instability F(1, 572)=.20, p =.65, punitiveness F (1, 572) = 0.65, p = .42, vulnerability to harm or illness F(1, 572) = 1.72, p = .19 and unrelenting standards/hypercriticalness F(1, 572) = 1.72, p = .19 and unrelenting standards/hypercriticalness F(1, 572) = 1.72, p = .19 and unrelenting standards/hypercriticalness F(1, 572) = 1.72, p = .19 and unrelenting standards/hypercriticalness F(1, 572) = 1.72, p = .19 and unrelenting standards/hypercriticalness F(1, 572) = 1.72, p = .19 and unrelenting standards/hypercriticalness F(1, 572) = 1.72, p = .19 and unrelenting standards/hypercriticalness F(1, 572) = 1.72, p = .19 and unrelenting standards/hypercriticalness F(1, 572) = 1.72, p = .19 and unrelenting standards/hypercriticalness F(1, 572) = 1.72, p = .19 and F(1, 572) = 1.72, p = .19 and F(1, 572) = 1.72, p = .19 and F(1, 572) = 1.72, p = .19 and F(1, 572) = 1.72, p = .19 and F(1, 572) = 1.72, p = .19 and F(1, 572) = 1.72, p = .19 and F(1, 572) = 1.72, p = .19 and F(1, 572) = 1.72, p = .19 and F(1, 572) = 1.72. 572) = 1.83, p = .18 on students' attitude toward help seeking. The one way analysis of variance indicated significant effect of schemas of social isolation/alienation F (1, 572) = 13.70, p = .00, partial η^2 = .02, emotional inhibition F (1, 572) = 18.11, p = .00, partial η^2 = .03, entitlement/grandiosity F (1, 572) = 6.11, p = .01, partial η^2 = .01 and defectiveness/shame F (1, 572) = 13.69, p= .00, partial η^2 = .02 on students' attitude toward help seeking.

Findings indicated that significant effect of schemas of social isolation/alienation schema, emotional inhibition schema, entitlement/grandiosity schemas and defectiveness/shame schema on students' help seeking attitude. Therefore the effect size of each significant finding calculated.

A significant main effect was obtained for social isolation/alienation schemas the eta-squared was η^2 =.02, thus it could be said 2% variance in students help seeking attitude can be explained by the main effect of social isolation/alienation schema. Another significant finding was emotional inhibition schema which has the eta-squares as $\eta^2 = .03$ that explain the %3 variance in help seeking significant attitude. The other effect found with was entitlement/grandiosity schema which has partial $\eta^2 = .01$ that refer to the %1 variance in help seeking attitude. Lastly, defectiveness/shame schema was found to have significant effect on help seeking attitude with effect size of $\eta^2 = .02$ that explains %2 variance in help seeking attitude. All schemas which has significant effect on students' help seeking attitude has small to medium influence on help seeking attitude. The results are presented in table 4 below.

Table 4.

One-Way ANOVA Results for the Effects of Early Maladaptive Schemas on Students' Attitude toward Help Seeking

Early Maladaptive						Partial
Schemas	Type III SS	df	MS	F	Sig.	η^2
Emotional Deprivation	306.46	1	306.46	3.12	.08	.00
Failure	265.16	1	265.16	2.70	.10	.00
Negative/Pessimism	294.31	1	294.31	2.99	.08	.00
Social Isolation /Alienation	1319.75	1	1319.75	13.70	.00	.02
Emotional Inhibition	1731.43	1	1731.43	18.11	.00	.03
Approval Seeking/	107.13	1	107.13	1.09	.29	.00
Recognition Seeking						
Enmeshment/	356.32	1	356.32	3.64	.06	.01
Undeveloped Self						
Entitlement/Grandiosity	595.91	1	595.91	6.11	.01	.01
Self-Sacrifices	73.18	1	73.18	.743	.39	.00
Abandonment/Instability	19.97	1	19.97	.20	.65	.00
Punitiveness	64.25	1	64.25	.65	.42	.00
Defectiveness/Shame	1318.44	1	1318.44	13.69	.00	.02
Vulnerability to Harm or	169.56	1	169.56	1.72	.19	.00
Illness						
Unrelenting Standards/	179.73	1	179.73	1.83	.18	.00
Hypercriticalness						

CHAPTER V

DISCUSSION

This chapter includes the discussion of the results, as well as the limitations, strengths and implications of the current study. Suggestions for future research on the topic will also be discussed.

5.1 General Discussion of the Results

The current study investigates the effect of attachment styles and early maladaptive schemas on attitudes toward psychological help-seeking among Middle East Technical University students. First, gender was examined and the results were found to be in the expected direction; there was a significant effect of gender on help seeking attitudes. In addition, females were found to have more positive help seeking attitude than males. Secondly attachment styles and attitude toward help seeking scores were examined. As predicted, a significant influence of attachment styles on attitudes toward help seeking was found. Finally, early maladaptive schemas and attitude scores of students were examined. In the present study findings indicated that the Social Isolation/Alienation schema, the Emotional Inhibition schema, the Entitlement / Grandiosity schema and the Defectiveness /

Shame schema had an effect on students' attitude toward seeking psychological help. Discussions of the findings are presented below.

5.1.1 Gender and Attitude toward Psychological Help Seeking

It was hypothesized in the present study that there would be a gender difference in help-seeking attitudes of males and females. Significant differences were found between male and female subjects. This finding is in line with previous studies which found that gender itself is a significant predictor of attitudes toward seeking professional psychological help (Nam et al., 2010; Sheffield et al., 2004).

The findings of the current study also supported previous research which affirms that gender has an influence on help seeking attitude and the attitudes to seeking psychological help in students were remarkably more positive for female students (Ang et al., 2004; Barwick et al., 2009; Gekoski & Knox, 2006; Kartalova-O'Doherty & Doherty, 2010; Leong & Zachar, 1999; Mackenzie, Türküm, 2005; Nam et al., 2010; Özden, 2010; Svensson et al., 2009). The reasons behind the difference between males and females in terms of their attitudes toward seeking psychological help were investigated in several other studies. The contrast in this respect is mostly attributed to the reflection of gender role differences (Amit et al., 2009; Chan & Hayashi, 2010; Judd et al., 2008).

Researchers affirmed that men's social status (Judd et al., 2008), lack of motivation, stigma attached to expressing feelings, the fear of intimacy (Silverberg, 1986), and the lack of fit with the culture of masculinity (Addis & Mahalik, 2003; Rochlen & Hoyer, 2005) may influence seeking help.

However, these findings differed from those of Furnham and Andrew (1996) who studied with Asians and a Caucasian British sample; Atkinson and Gim (1989) whose participants were Asian-American; and Bee-Gates, Howard-Pitney, LaFromboise, and Rowe (1996) who worked with Native American-Indian high school students had all found that there were no significant differences between males and females with regards to the levels of attitudes toward help-seeking.

5.1.2 Main Analyses of Attitudes toward Psychological Help Seeking Attachment Style and Attitude toward Psychological Help Seeking

Research in the study of attachment theory revealed that the attachment styles hinder an individual's intentions to seek psychological help (Hazan & Shaver, 1987, Kobak & Sceery, 1988; Vogel & Wei, 2006). Furthermore, researchers also affirmed that attitudes toward seeking professional psychological help are a significant predictor of intentions to seek help (Bayer & Peay, 1997; Bohns & Flynn, 2010; Carlton & Deane, 2000; Cepeda-Benito & Short 1998; Kelly & Achter, 1995; Vogel et al., 2005). Thus, the first hypothesis was developed covering findings of the literature about the relation of help seeking intention, help seeking attitude and attachment style.

The initial investigation addressed the question as to whether the attachment styles affect the attitudes toward seeking psychological help. Results of the current study indicated that attachment styles had an effect on attitudes toward seeking psychological help. It was found that individuals who possessed secure

attachment styles had more positive attitudes toward help seeking than those with preoccupied, dismissive and fearful attachment styles.

In addition, the results of the present study are consistent with previous studies that suggest a relationship between attachment styles and help seeking attitudes (Shaffer et al., 2006). In the present study, it was also found that securely attached individuals had higher positive attitudes toward psychological help seeking compared to fearful and dismissive individuals, which is in line with previous research in this area (Collins & Feeney, 2000; DeFronzo et al., 2001; Hazan & Shaver, 1987; Kobak & Sceery, 1988; Lopez et al., 1998; Moran, 2007; Vogel & Wei, 2005).

The difference among attachment styles might arise from individuals' perceptions of others. Since the securely attached individuals have positive view of others (Bartholomew & Horowitz, 1991), they have more positive attitudes about sharing their problems and are more willing to seek support from others (Bartholomew & Horowitz, 1991; Florian et al., 2001; Kobak & Screery, 1988; Mikulincer & Nachshon, 1991).

Early Maladaptive Schemas and Attitude toward Psychological Help Seeking

Research in the attachment theory revealed that the attachment styles hindered an individual's intention to seek psychological help (Collins & Feeney, 2000; Hazan & Shaver, 1987; Kobak & Sceery, 1988, Vogel & Wei, 2006). Furthermore, researchers also affirmed that attitudes toward seeking professional psychological help are a significant predictor of intentions to seek help (Bayer & Peay, 1997; Bohns & Flynn, 2010; Carlton & Deane, 2000; Cepeda-Benito & Short 1998; Kelly & Achter, 1995; Vogel et al., 2005). Therefore, one of the research questions of the present study was developed covering findings of the literature about the relationship between help seeking attitude and attachment style.

The initial investigation addressed the question as to whether the attachment styles affect the attitudes toward seeking psychological help. Results indicated that attachment styles had an effect on the attitudes toward seeking psychological help. Individuals who possess secure attachment styles had more positive attitudes than those with preoccupied, dismissive and fearful attachment styles. This result is consistent with previous studies that suggest a relationship between attachment styles and help seeking attitudes (Shaffer et al., 2006). In the present study, it was also found that secure individuals have significantly higher positive attitudes toward psychological help seeking than fearful and dismissive individuals which is in line with previous research in this area (Collins & Feeney, 2000; DeFronzo et al., 2001; Hazan & Shaver, 1987; Kobak & Sceery, 1988; Lopez et al., 1998; Moran, 2007; Vogel & Wei, 2005).

The difference among attachment styles might arise from individuals' perceptions of others. Because the securely attached individuals have positive views of others (Bartholomew & Horowitz, 1991), they have more positive attitude about sharing their problems and seeking support from others (Bartholomew &

Horowitz, 1991; Florian et al., 2001; Kobak & Screery, 1988; Mikulincer & Nachshon, 1991).

A wide body of attachment literature has considered the association between attachment style and schemas (Bosmans et al., 2010; Feeney & Noller, 1996; Griffin & Bartholomew, 1994; Hazan & Shaver, 1994; Holmes, 1993; Mason, Platts, & Tyson, 2005). Additionaly, Horowitz et al. (1993) found that insecure attachment styles (preoccupied, fearful, and dismissive) had early maladaptive schemas. In the study of Cecero et al., (2004), they affirmed that abandonment/instability was a significant positive predictor of preoccupied attachment style; social isolation/alienation and emotional deprivation were significant predictors of dismissing attachment while abandonment/instability and subjugation were significant negative predictors of dismissing attachment style. Another association between attachment and maladaptive schemas was done by Mason et al. (2005), by using discriminant function analysis. They characterized the secure attachment style group by lower scores for emotional deprivation, subjugation, enmeshment, mistrust/abuse, abandonment, social isolation, defectiveness/shame, emotional inhibition, and dependence/incompetence. On the other hand the fearful attachment style group was characterized by greater social isolation, defectiveness/shame, and emotional inhibition; and lastly the preoccupied group was characterized by abandonment, subjugation, and emotional deprivation scores as characterizing this group.

In the present study, the significant link between attachment styles and help seeking attitude was found. Hence, it is reasonable to expect that help seeking attitudes would also be associated with a stronger or weaker presence of these schemas. Thus the present study also highlights the role of early maladaptive schemas in determining attitude levels toward seeking psychological help. Investigations were done for each maladaptive schema, thus another research question was developed for the presence of each schema. The result of the study found that the presence of the social isolation/alienation schema, emotional inhibition schemas, entitlement/grandiosity schema and defectiveness/shame schema are affecting individuals' attitudes toward seeking psychological help.

According to present study, the difference between presences of some maladaptive schemas and help seeking attitudes might be attributed to the difference in attachment styles that individuals posses. However other difference might arise from the characteristics of those schemas. Individuals with the entitlement/grandiosity schema might believe that taking psychological help will not solve their problems because they have perception of being superior than others.

Individuals with the defectiveness/shame schema avoid establishing relationships with others to hide their deficiencies that they believe they have and they do not disclose these deficiencies because of the chronic feelings of shame about who they are; and this may hinder their help seeking attempts. This is also valid for individual who have the Social Isolation / Alienation schemas, since they have a perceptions of being different than others, and because they have constant fears of others that they will not accept them and will leave them out of their group. Therefore, they will not be willing to disclose and seek help from professionals. And the last schema, which affects attitudes toward help seeking, was found to be emotional inhibition. Individuals with this schema overly suppress their emotions and behaviors to avoid negative situations and avoid discussing them, so they avoid sharing personal information with others and refuse to get psychological help for their problems.

The studies in the attitudes toward help seeking literature indicate that individuals with higher self-esteem (individuals who feel good about themselves) and individuals with external locus of control (individual who believe their life is controlled by others) were associated with a less positive attitudes toward seeking professional help (Barwick et al., 2009), self-disclosure (Jourard & Lasakow, 1958; Vogel & Wester, 2003), emotional competency (Komiya et al., 2000) and selfconcealment (Kelly & Acther, 1995; Larson & Chastain, 1990; Yoo et al., 2005).

Furthermore, stigmatization (by others) has been associated with low help seeking attitudes (Barney et al., 2006; Rickwood et al., 2005; Rickwood et al., 2007; Shea & Yeh, 2008; Vogel & Wade, 2009). Referring to the findings of the present study about the presence of specific schemas and help seeking literature, it can be understood that factors which affect the attitudes toward seeking help are also the characteristics of the schemas that influence help seeking attitude as well.

5.2 Limitations

According to the literature, there are many factors that affect attitudes toward help seeking and many of them are related to personality factors (Barwick et al., 2009). Personality factors are confounding variables especially in the causal comparative studies because of a lack of randomization and manipulation, which also bring internal validity threats to a study. Subject characteristics are important threats in this study as the students differ in their age, field, socio-economic status and other variable groups. Besides from internal validity threats causal comparative design also brings some limitations to study since there was no attempt to directly manipulate the variables and control other possible factors, findings of the study could neither be attributed definitely to the independent variables nor can they be used to infer a direct causal link among the variables in this study. Thus further analyses that allow manipulation might be done. Another limitation of the study will be sample inclusion because the research population was limited to a single campus hence the findings of the study cannot be generalized to the all university students in Turkey.

5.3 Future Recommendations

This study was carried out with students from METU. Therefore, future studies can be conducted to see if the findings of this study are consistent for other samples as well. Also research in different Turkish universities could give more reliable and accurate results and conclusions about help seeking attitudes of all Turkish university students. Furthermore, the current study included participants whose age ranged between 18 and 26, thus, future researchers may consider including a wider range in their study.

In order to gain a better understanding of the relationship between attitudes toward psychological help seeking, attachment styles and early maladaptive schemas, future studies may be conducted using path analysis to determine the most viable path model in which the relationships among early maladaptive schemas, attachment styles and attitudes toward psychological help seeking are best described.

Previous help seeking experience was accepted in the literature as one of the factors that has an influence on help seeking attitudes. Therefore, future research can focus on previous help seeking experiences as a variable in relation to help seeking attitudes, early maladaptive schemas and attachment styles.

Finally, help seeking attitude was associated with age and maturity in the literature. In addition, previous studies have shown that age and maturity cast an influence on early maladaptive schemas; for that reason further research using a longitudinal design can be conducted to study the effect of early maladaptive schemas and attachment style on help seeking attitudes.

5.4 Implication

This study shed light on the factors that affect the help seeking attitudes by examining the contribution of early maladaptive schemas and attachment styles. The most remarkable finding of the study is the effect of early maladaptive schemas on help seeking attitudes. Realizing the effect of different variables on attitudes toward professional help seeking is the first step in understanding the reason of help seeking behavior and increasing the use of counseling service. Investigating the relationship between various factors and help seeking attitude may allow researchers to study other variables that have greater amount of variance associated with help seeking behavior and support researchers to develop better models of the relation among help seeking attitude, attachment styles and early maladaptive schemas.

In addition, with the help of the findings of this study counseling centers may develop treatment programs that consider individual early maladaptive schemas and attachment styles.

The awareness about the relationship among help seeking attitudes, schemas and attachment styles may help counselor to draw case conceptualizations for each client. This may also help counselors to develop some treatment designs to encourage individuals to take psychological help, to minimize the early terminations, to encourage reluctant clients to use psychological services, to make individuals disclose easily and to understand the root of the client's problem. Besides knowing early maladaptive schemas and attachment styles of clients may help counselors to predict what type of behavior their client will have in establishing a therapeutic relationship. Moreover, the findings of the study can be used by counselors to inform parents about how their behavior may influence their children. For instance, counselors may inform the parents about a possible relationship between attachment styles and help seeking attitudes to allow them to

take necessary precautions to prevent their children from the negative effects of insecure attachment styles.

5.5 Conclusion

In conclusion, this study has showed that early maladaptive schemas and attachments styles had an effect on attitude toward help seeking. Individuals with secure attachment style were found to have more positive attitudes toward psychological help seeking than individuals with preoccupied, dismissive and fearful attachment styles. As a unique contribution of this study, Social Isolation/Alienation schema, Emotional Inhibition schema, Entitlement/Grandiosity schema and Defectiveness/Shame schema have been found to have an effect on help seeking attitude.

On the other hand, gender was found to have an influence on the help seeking attitudes of students. Moreover, female students were found to have more positive help seeking attitudes compared to male students.

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APPENDICES

APPENDIX A

DEMOGRAPHIC INFORMATION FORM

Değerli Katılımcı,

Bu araştırma ODTÜ Eğitim Bilimleri Bölümü öğretim üyesi Prof. Dr. Ayhan Demir danışmanlığında yüksek lisans öğrencisi Ayşe Irkörücü tarafından yapılmaktadır. Çalışmanın amacı, yetişkin bireylerin psikolojik yardım almaya ilişkin tutumlarının, bağlanma şekillerinden ve erken dönem uyumsuz şemalarından ne ölçüde etkilediğini belirlemektir. Çalışmaya katılmak gönüllülük esasına bağlı olup, elde edilecek bilgiler toplu olarak değerlendirilecek ve gizli tutularak bilimsel araştırma kapsamında kullanılacaktır. Sizden beklenen soruları samimiyetle ve eksiksiz olarak cevaplamanızdır. Anketi cevaplamanız yaklaşık olarak 10 dakika sürmektedir. Ankette kişisel rahatsızlık hissetmenize sebebiyet verebilecek sorular olmadığı halde böyle bir durum hissederseniz ya da başka bir sebepten dolayı rahatsızlık hissederseniz, anketi cevaplamayı bırakabilirsiniz. Çalışmanın sonuçları hakkında bilgi edinmek isterseniz Ayşe Irkörücü (E-posta: e168650@metu.edu.tr) ile iletişim kurabilirsiniz.

Cinsiyet: K () / E () Yaş : Bölüm:

APPENDIX B

YOUNG SCHEMA QUESTIONNAIRE SHORT FORM

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. Lütfen her bir ifadeyi dikkatlice okuyun ve her bir ifadenin sizi ne ölçüde <u>tanımladığını</u> aşağıdaki 6 aralıklı ölçek üzerinde değerlendiriniz.

- 1. Benim için tamamıyla yanlış
- 2. Benim için büyük ölçüde yanlış
- 3. Bana uyan tarafi uymayan tarafindan 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	1	2	3	4	5	6
	olaylarla gerçekten ilgilenen kimsem olmadı.						
2	Beni terk edeceklerinden korktuğum için yakın olduğum insanların peşini bırakmam.	1	2	3	4	5	6
3	İnsanların beni kullandıklarını hissediyorum.	1	2	3	4	5	6
4	Uyumsuzum.	1	2	3	4	5	6

	Okul hayatımda neredeyse hiçbir şeyi diğer insanlar	Γ					
5	kadar iyi yapamıyorum.		2	3	4	5	6
	Günlük yaşamımı tek başıma idare edebilme becerisine	1				 	
6	sahip olduğumu hissetmiyorum.		2	3	4	5	6
7	Kötü bir şey olacağı duygusundan kurtulamıyorum		2	3	4	5	6
0	Anne babamdan ayrılmayı, bağımsız hareket	1	2	2	4	_	~
8	edebilmeyi, yaşıtlarım kadar, başaramadım.	1	2	3	4	5	6
9	Eğer istediğimi yaparsam, başımı derde sokarım diye	1	2	3	4	5	6
9	düşünürüm.	1	2	3	4	5	0
10	Genellikle yakınlarıma ilgi gösteren ve bakan ben	1	2	3	4	5	6
10	olurum.	1	2		+		U
11	Olumlu duygularımı diğerlerine göstermekten utanırım	1	2	3	4	5	6
11	(sevdiğimi, önemsediğimi göstermek gibi).	1	2	5	4	5	0
12	Yaptığım çoğu şeyde en iyi olmalıyım; ikinci olmayı	1	2	3	4	5	6
12	kabullenemem.	1	2	5	т	5	0
13	Diğer insanlardan bir şeyler istediğimde bana "hayır"	1	2	3	4	5	6
15	denilmesini çok zor kabullenirim.	1	2	5	4	5	0
14	Kendimi sıradan ve sıkıcı işleri yapmaya zorlayamam	1	2	3	4	5	6
15	Paramın olması ve önemli insanlar tanıyor olmak beni	1	2	3	4	5	6
15	değerli yapar.	1	2	5	Т	5	0
16	Her şey yolunda gidiyor görünse bile, bunun	1	2	3	4	5	6
10	bozulacağını hissederim.	1	2				
17	Eğer bir yanlış yaparsam, cezalandırılmayı hak ederim.	1	2	3	4	5	6
18	Çevremde bana koruma sağlayan sıcaklık, ve duygusal	1	2	3	4	5	6
10	yakınlık gösteren kimsem yok.	1	-		r		
19	Diğer insanlara o kadar muhtacım ki onları	1	2	3	4	5	6
.,	kaybedeceğim diye çok endişeleniyorum.		_				
20	İnsanlara karşı tedbiri elden bırakamam yoksa bana	1	2	3	4	5	6
_ ,	kasıtlı olarak zarar vereceklerini hissederim.		_				
21	Temel olarak diğer insanlardan farklıyım.	1	2	3	4	5	6
22	Gerçek beni tanırlarsa beğendiğim hiç kimse bana yakın	1	2	3	4	5	6
	olmak istemez.	1	-		r		

23	İşleri halletmede son derece yetersizim.	1	2	3	4	5	6
	Gündelik işlerde kendimi başkalarına bağımlı biri					 	
24	olarak görüyorum.		2	3	4	5	6
25	Her an bir felaket (doğal, adli, mali veya tıbbi) olabilir	1	2	3	4	5	6
25	diye hissediyorum.	1	2	3	4	3	0
	Diğer insanların isteklerine uymaktan başka yolum	<u> </u>				<u></u>	
26	yokmuş gibi hissediyorum; eğer böyle yapmazsam bir	1	2	3	4	5	6
	şekilde beni reddederler veya intikam alırlar.						
27	Başkalarını kendimden daha fazla düşündüğüm için ben	1	2	3	4	5	6
21	iyi bir insanım.	1	2	5	4	5	0
28	Duygularımı diğerlerine açmayı utanç verici bulurum.	1	2	3	4	5	6
29	En iyisini yapmalıyım, "yeterince iyi" ile yetinemem.	1	2	3	4	5	6
	Ben özel biriyim ve diğer insanlar için konulmuş olan	<u> </u>					
30	kısıtlamaları veya sınırları kabul etmek zorunda	1	2	3	4	5	6
	değilim.						
31	Eğer hedefime ulaşamazsam kolaylıkla yılgınlığa düşer	1	2	3	4	5	6
51	ve vazgeçerim.	1	2	3	4	5	0
32	Başkalarının da farkında olduğu başarılar benim için en	1	2	3	4	5	6
52	değerlisidir.	1	2	5	-	5	0
33	İyi bir şey olursa, bunu kötü bir şeyin izleyeceğinden	1	2	3	4	5	6
55	endișe ederim.	1	2	5		5	
34	Birisi için özel olduğumu hiç hissetmedim.	1	2	3	4	5	6
35	Yakınlarımın beni terk edeceği ya da ayrılacağından	1	2	3	4	5	6
55	endişe duyarım.	1	2	5	-	5	0
36	Herhangi bir anda birileri beni aldatmaya kalkışabilir.	1	2	3	4	5	6
37	Bir yere ait değilim, yalnızım.	1	2	3	4	5	6
38	Başkalarının sevgisine, ilgisine ve saygısına değer bir	1	2	3	4	5	6
30	insan değilim.	1	2	3	4	5	0
39	Okula başarısı konusunda birçok insan benden daha	1	2	3	4	5	6
57	yeterli.	1	4	5	+	5	U
40	Doğru ile yanlışı birbirinden ayırmakta zorlanırım.	1	2	3	4	5	6
41	Fiziksel bir saldırıya uğramaktan endişe duyarım.	1	2	3	4	5	6

[Yakınlarımla o kadar meşgulüm ki kendime çok az	Γ				l	
42	zaman kalıyor.	1	2	3	4	5	6
	İnsanlarla beraberken içten ve cana yakın olmak benim	<u> </u> 			 		
43	için zor.	1	2	3	4	5	6
44	Tüm sorumluluklarımı yerine getirmek zorundayım.	1	2	3	4	5	6
44		1	~	5	-		0
45	İstediğimi yapmaktan alıkonulmaktan veya	1	2	3	4	5	6
	kısıtlanmaktan nefret ederim.						
46	Uzun vadeli amaçlara ulaşabilmek için şu andaki	1	2	3	4	5	6
	zevklerimden fedakarlık etmekte zorlanırım.	ļ					
47	Başkalarından yoğun bir ilgi görmezsem kendimi daha	1	2	3	4	5	6
	az önemli hissederim.						
48	Yeterince dikkatli olmazsanız, neredeyse her zaman bir	1	2	3	4	5	6
40	şeyler ters gider.	1	2	5	-	5	0
49	Eğer işimi doğru yapmazsam sonuçlara katlanmam	1	2	3	4	5	6
49	gerekir.	1	2	3	4	5	0
50	Beni gerçekten dinleyen, anlayan veya benim gerçek	1	2	3	4	_	
50	ihtiyaçlarım ve duygularımı önemseyen kimsem olmadı.	1	2	3	4	5	6
51	Önem verdiğim birisinin benden uzaklaştığını sezersem	1	2	3	4	5	6
51	çok kötü hissederim.	1	Ζ	3	4	3	0
	Diğer insanların niyetleriyle ilgili oldukça	1	2	3	4	5	~
52	şüpheciyimdir.	1	2	э	4	3	6
	Kendimi diğer insanlara uzak veya kopmuş						_
53	hissediyorum.	1	2	3	4	5	6
54	Kendimi sevilebilecek biri gibi hissetmiyorum.	1	2	3	4	5	6
55	Okul hayatımda diğer insanlar kadar yetenekli değilim.	1	2	3	4	5	6
	Ailemin tüm parasını kaybedip fakir ve zavallı duruma	1	2	2	4	_	
56	düşmesinden endişe duyarım.	1	2	3	4	5	6
	Çoğunlukla annem ve babamın benimle iç içe	<u> </u>			l 	 	
57	yaşadığını hissediyorum. Benim kendime ait bir	1	2	3	4	5	6
	hayatım yok.						
	Kendim için ne istediğimi bilmediğim için daima benim	4			4		
58	adıma diğer insanların karar vermesine izin veririm.	1	2	3	4	5	6
l		i	I	I	L	L	Iİ

59	Ben hep başkalarının sorunlarını dinleyen kişi oldum.	1	2	3	4	5	6
60	Kendimi o kadar kontrol ederim ki insanlar beni	1	2	2	4	_	~
60	duygusuz veya hissiz bulurlar.	1	2	3	4	5	6
<i>c</i> 1	Diğer insanların uyduğu kurallara ve geleneklere uymak	1	2	3	4	5	6
61	zorunda olmadığımı hissediyorum.	1	2	5	4	5	0
62	Benim yararıma olduğunu bilsem bile hoşuma gitmeyen	1	2	3	4	5	6
02	şeyleri yapmaya kendimi zorlayamam.	1		5	4	5	0
63	Bir toplantıda fikrimi söylediğimde veya bir topluluğa	1	2	3	4	5	6
05	tanıtıldığımda onaylanılmayı ve takdir görmeyi isterim.	1	2	5	4	5	0
	Ne kadar çok çalışırsam çalışayım, maddi olarak iflas						
64	edeceğimden ve neredeyse her şeyimi kaybedeceğimden	1	2	3	4	5	6
	endişe ederim.						
65	Neden yanlış yaptığımın önemi yoktur; eğer hata	1	2	3	4	5	6
05	yaptıysam sonucuna da katlanmam gerekir.	1	2	5	4	5	0
	Hayatımda ne yapacağımı bilmediğim zamanlarda	1					
66	uygun bir öneride bulunacak veya beni yönlendirecek	1	2	3	4	5	6
	kimsem olmadı.						
67	İnsanların beni terk edeceği endişesiyle bazen onları	1	2	3	4	5	6
07	kendimden uzaklaştırırım.	1	2	5	4	5	0
68	Genellikle insanların asıl veya art niyetlerini araştırırım.	1	2	3	4	5	6
69	Kendimi hep grupların dışında hissederim.	1	2	3	4	5	6
	Kabul edilemeyecek pek çok özelliğim yüzünden	1					
70	insanlara kendimi açamıyorum veya beni tam olarak	1	2	3	4	5	6
	tanımalarına izin vermiyorum.						
71	Okul hayatımda diğer insanlar kadar zeki değilim.	1	2	3	4	5	6
70	Günlük yaşamımı tek başıma idare edebilme becerisine	1	2	3	4	5	6
72	sahip olduğumu hissetmiyorum.	1	2	5	4	5	6
	Bir doktor tarafından herhangi bir ciddi hastalık				Å		
73	bulunmamasına rağmen bende ciddi bir hastalığın	1	2	3	4	5	6
	gelişmekte olduğu endişesine kapılıyorum.						
74	Sık sık annemden babamdan ya da eşimden ayrı bir	1	2	3	4	5	6
/4	kimliğimin olmadığını hissediyorum.	1	2	3	4	5	U

75	Haklarıma saygı duyulmasını ve duygularımın hesaba katılmasını istemekte çok zorlanıyorum.	1	2	3	4	5	6
76	Başkaları beni, diğerleri için çok, kendim için az şey yapan biri olarak görüyorlar.	1	2	3	4	5	6
77	Diğerleri beni duygusal olarak soğuk bulurlar.	1	2	3	4	5	6
78	Bir dolu övgü ve iltifat almam kendimi değerli birisi olarak hissetmemi sağlar.	1	2	3	4	5	6
79	Yanlış bir kararın bir felakete yol açabileceğinden endişe ederim	1	2	3	4	5	6
80	Ben cezalandırılmayı hak eden kötü bir insanım.	1	2	3	4	5	6

APPENDIX C

THE ATTITUDES TOWARD SEEKING PSYCHOLOGICAL HELP-SHORTENED SCALE

Aşağıda psikolojik yardımla ilgili, çeşitli cümleler yazılmıştır. Her bir cümleyi okuyarak, bu fikre ne ölçüde katıldığınızı yan taraftaki ilgili paranteze (X) işareti koyarak belirtiniz. Cümlelerin tek bir doğru veya yanlış cevabi yoktur. Sizden beklenen kendi görüşlerinizi samimiyetle işaretlemenizdir.

		Tamamen Katılıyorum	Oldukça Katılıyorum	Kararsızım	Pek Katılmıyorum	Kesinlikle Katılmıyorum
1.	Psikolojik rahatsızlığım kendiliğinden geçmiyorsa, psikolojik yardım almak benim için bir çözümdür.	()	()	()	()	()
2.	Danışacağım uzmanın, benim ruh sağlığı bozuk bir kişi olduğumu düşünmesinden çekinirim.	()	()	()	()	()
3.	Psikolojik yardım alarak, ruhsal sıkıntılarımın nedenini anlayabilirim.	()	()	()	()	()
4.	Yakın bir arkadaşım, benden ruhsal problemi ile ilgili olarak fikrimi sorduğunda, psikolojik yardım almasını önerebilirim.	()	()	()	()	()
5.	Kendimi çok rahatsız hissedersem psikolojik yardım isteyebilirim.	()	()	()	()	()
6.	Gerektiğinde, duygusal sorunların çözümüne yardımcı olması için, kişisel	()	()	()	()	()

	sırlarımı bir uzmana açabilirim.					
7.	Kişi psikolojik yardım alarak, yıpratıcı					
	duygularıyla nasıl baş edebileceğini	()	()	()	()	()
	öğrenebilir.					
8.	Ruhsal sorunlarımın olduğunun duyulması					
	beni utandırır.	()	()	()	()	()
9.	Psikolojik yardım, kişinin sorunlarla başa					<u> </u>
	çıkma gücünü yükseltir.	()	()	()	()	()
10.	Psikolojik yardım alarak, duygularımı					
	gözden geçirebilecek güvenli bir ortam	()	()	()	()	()
	bulabilirim.					
11.	Psikolojik yardım alan kişinin diğer					
	insanlarla iletişimi kolaylaşır.	()	()	()	()	()
12.	Hakkımda söyleneceklerden dolayı,					
	psikolojik yardım almaktan çekinirim.	()	()	()	()	()
13.	Psikolojik yardım, kişinin kendine saygısını		<i>(</i>)			<i>.</i>
	azaltır.	()	()	()	()	()
14.	Bir uzmanla sorunlar hakkında konuşmak,					
	duygusal çatışmalardan kurtulmanın etkili	()	()	()	()	()
	bir yoludur.					
15.	Yaşamımda karşılaşabileceğim duygusal					
	bir krizi psikolojik yardımla	()	()	()	()	()
	atlatabileceğime inanıyorum.					
16.	Kişi, çevresiyle ilişkilerinin zarar görmesini					
	istemiyorsa, ruhsal bir tedavi gördüğünü	()	()	()	()	()
	onlardan saklamalıdır.					
17.	Ruhsal tedavi gördüğü bilinen kişi,	()	()		()	
	arkadaşlarını kaybetmeye mahkûmdur.	()	()	()	()	()
18.	Eğer bir ruhsal bozukluğum olduğunu					
	düşünürsem, ilk yapacağım şey,	()	()	()	()	()
	profesyonel yardım almak olacaktır.					

APPENDIX D

RELATIONSHIP SCALE QUESTIONAIRE

Aşağıda yakın duygusal ilişkilerinizde kendinizi nasıl hissettiğinize ilişkin çeşitli ifadeler yer almaktadır. Yakın duygusal ilişkilerden kastedilen arkadaşlık, dostluk, romantik ilişkiler ve benzerleridir. Lütfen her bir ifadeyi bu tür ilişkilerinizi düşünerek okuyun ve her bir ifadenin sizi ne ölçüde <u>tanımladığını</u> aşağıdaki 7 aralıklı ölçek üzerinde değerlendiriniz.

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Beni hiç tanımlamıyor Beni kısmen tanımlıyor Ta	mai	mıy	la b	eni	tanı	mlı	yor
1. Başkalarına kolaylıkla güvenemem.	1	2	3	4	5	6	7
2. Kendimi bağımsız hissetmem benim için çok önemli.	1	2	3	4	5	6	7
3. Başkalarıyla kolaylıkla duygusal yakınlık kurarım.	1	2	3	4	5	6	7
 Bir başka kişiyle tam anlamıyla kaynaşıp bütünleşmek isterim. 	1	2	3	4	5	6	7
 Başkalarıyla çok yakınlaşırsam incitileceğimden korkuyorum. 	1	2	3	4	5	6	7
 Başkalarıyla yakın duygusal ilişkilerim olmadığı sürece oldukça rahatım. 	1	2	3	4	5	6	7
 İhtiyacım olduğunda yardıma koşacakları konusunda başkalarına her zaman güvenebileceğimden emin değilim. 	1	2	3	4	5	6	7
8. Başkalarıyla tam anlamıyla duygusal yakınlık kurmak istiyorum.	1	2	3	4	5	6	7
9. Yalnız kalmaktan korkarım.	1	2	3	4	5	6	7
10. Başkalarına rahatlıkla güvenip bağlanabilirim.	1	2	3	4	5	6	7

11. Çoğu zaman, romantik ilişkide olduğum insanların beni gerçekten sevmediği konusunda endişelenirim.12345612. Başkalarına tamamıyla güvenmekte zorlanırım.12345613. Başkalarının bana çok yakınlaşması beni endişelendirir.12345614. Duygusal yönden yakın ilişkilerim olsun isterim.12345615. Başkalarının bana dayanıp bel bağlaması konusunda oldukça rahatımdır.12345616. Başkalarının bana, benim onlara verdiğim kadar değer vermediğinden kaygılanırım.12345617. İhtiyacınız olduğunda hiç kimseyi yanınızda bulamazsınız.12345618. Başkalarıyla tam olarak kaynaşıp bütünleşme arzum bazen onları ürkütüp benden uzaklaştırıyor.12345619. Kendi kendime yettiğimi hissetmem benim için çok önemli.12345620. Birisi bana çok fazla yakınlaştığında rahatsızlık duyarım.123456	7
13. Başkalarının bana çok yakınlaşması beni endişelendirir.12345614. Duygusal yönden yakın ilişkilerim olsun isterim.12345615. Başkalarının bana dayanıp bel bağlaması konusunda12345616. Başkalarının bana, benim onlara verdiğim kadar değer12345617. İhtiyacınız olduğunda hiç kimseyi yanınızda12345618. Başkalarıyla tam olarak kaynaşıp bütünleşme arzum bazen onları ürkütüp benden uzaklaştırıyor.12345619. Kendi kendime yettiğimi hissetmem benim için çok önemli.123456	
14. Duygusal yönden yakın ilişkilerim olsun isterim.12345615. Başkalarının bana dayanıp bel bağlaması konusunda oldukça rahatımdır.12345616. Başkalarının bana, benim onlara verdiğim kadar değer vermediğinden kaygılanırım.12345617. İhtiyacınız olduğunda hiç kimseyi yanınızda bulamazsınız.12345618. Başkalarıyla tam olarak kaynaşıp bütünleşme arzum bazen onları ürkütüp benden uzaklaştırıyor.12345619. Kendi kendime yettiğimi hissetmem benim için çok önemli.123456	7
15. Başkalarının bana dayanıp bel bağlaması konusunda12345616. Başkalarının bana, benim onlara verdiğim kadar değer vermediğinden kaygılanırım.12345617. İhtiyacınız olduğunda hiç kimseyi yanınızda bulamazsınız.12345618. Başkalarıyla tam olarak kaynaşıp bütünleşme arzum bazen onları ürkütüp benden uzaklaştırıyor.12345619. Kendi kendime yettiğimi hissetmem benim için çok önemli.123456	
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önemli.	7
20. Dirici hana aak farda yakunlaatučunda rahataurluk duwarum 1222456	7
20. Birisi bana çok fazla yakınlaştığında rahatsızlık duyarım.123456	7
21. Romantik ilişkide olduğum insanların benimle kalmak123456istemeyeceklerinden korkarım.	7
22. Başkalarının bana bağlanmamalarını tercih ederim.123456	7
23. Terk edilmekten korkarım.123456	7
24. Başkalarıyla yakın olmak beni rahatsız eder.123456	7
25. Başkalarının bana, benim istediğim kadar yakınlaşmakta123456gönülsüz olduklarını düşünüyorum.	7
26. Başkalarına bağlanmamayı tercih ederim.123456	7
27. İhtiyacım olduğunda insanları yanımda bulacağımı123456biliyorum.	7
28. Başkaları beni kabul etmeyecek diye korkarım.123456	7
29. Romantik ilişkide olduğum insanlar, genellikle onlarla, benim kendimi rahat hissettiğimden daha yakın olmamı123456isterler.	7
30. Başkalarıyla yakınlaşmayı nispeten kolay bulurum.123456	1

APPENDIX E



TEZ FOTOKOPİ İZİN FORMU

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Fen Bilimleri Enstitüsü	
Sosyal Bilimler Enstitüsü	
Uygulamalı Matematik Enstitüsü	
Enformatik Enstitüsü	
Deniz Bilimleri Enstitüsü	

<u>YAZARIN</u>

	Soyadı : Adı : Bölümü :
	TEZIN ADI (İngilizce) :
	TEZIN TÜRÜ : Yüksek Lisans Doktora
1.	Tezimin tamamı dünya çapında erişime açılsın ve kaynak gösterilmek şartıyla tezimin bir kısmı veya tamamının fotokopisi alınsın.
2.	Tezimin tamamı yalnızca Orta Doğu Teknik Üniversitesi kullancılarının erişimine açılsın. (Bu seçenekle tezinizin fotokopisi ya da elektronik kopyası Kütüphane aracılığı ile ODTÜ dışına dağıtılmayacaktır.)
3.	Tezim bir (1) yıl süreyle erişime kapalı olsun. (Bu seçenekle tezinizin fotokopisi ya da elektronik kopyası Kütüphane aracılığı ile ODTÜ dışına dağıtılmayacaktır.)
	Yazarın imzası Tarih