

## The Relationship of Professional Burnout to Early Maladaptive Schemas in Emergency Psychologists

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Professional burnout is a very common syndrome that affects the well-being of people and the work of entire organizations. It is actively studied on various professional samples, especially on representatives of socio-economic professions ("human-to-human"). Over the last decade, early maladaptive schemas (EMS) have been found to be associated with burnout. Despite active research, data on both burnout and EMS in extreme psychologists are lacking. The present study was conducted on this particular sample, which is intended to fill the existing gap. Thirty-six extreme psychologists participated in the study, most of the respondents worked in the emergency department or with hospice patients. The full versions of the Maslach Burnout Inventory (MBI) questionnaire adapted by N. Vodopyanova for socio-economic professions, as well as J. Young's questionnaire for early maladaptive schemas in the adaptation of P. Kasyanik and E. Romanova. Using correlation analysis, it was found that most EMS were related to burnout. After analyzing the data obtained during the empirical study, an additional hypothesis, and an alternative set of techniques to test it were proposed. The results of the study may be of practical importance for burnout prevention in psychologists of extreme profile.

***Keywords:*** burnout, professional burnout, early maladaptive patterns, EMS, EMERCOM psychologists, emergency psychologists, maladaptive coping, coping moduses.

**For citation:** Mironova O.I., Kovalevskaja E.A. The Relationship of Professional Burnout to Early Maladaptive Schemas in Emergency Psychologists. *Psikhologiya i pravo = Psychology and Law*, 2024. Vol. 14, no. 2, pp. 185–198. DOI:10.17759/psylaw.2024140214

## Взаимосвязь профессионального выгорания и ранних дезадаптивных схем у экстремальных психологов

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Профессиональное выгорание является очень распространенным синдромом, от кото-  
рого страдают благополучие людей и работа целых организаций. Его активно изучают  
на различных профессиональных выборках, особенно на представителях социноми-  
ческих профессий («человек—человек»). Последнее десятилетие было установлено,  
что ранние дезадаптивные схемы (РДС) связаны с выгоранием. Несмотря на активное  
изучение, данные и о выгорании, и о РДС у психологов экстремального профиля от-  
сутствуют. Данное исследование проводилось именно на этой выборке, что призвано  
восполнить существующий пробел. В исследовании приняли участие 36 психологов  
экстремального профиля, большая часть респондентов работали в МЧС или с пациен-  
тами хосписов. Были использованы полные версии опросника на профессиональное  
выгорание Maslach Burnout Inventory (МБИ) в адаптации Н. Водопьяновой для социо-  
номических профессий, а также методики Д. Янга на ранние дезадаптивные схемы в  
адаптации П. Касьяника и Е. Романовой. С помощью корреляционного анализа было  
установлено, что большинство РДС связано с выгоранием. После анализа данных, по-  
лученных в ходе эмпирического исследования, была выдвинута дополнительная гипо-  
теза и предложен альтернативный набор методик для ее проверки. Результаты иссле-  
дования могут иметь практическое значение для профилактики выгорания у психоло-  
гов экстремального профиля.

**Ключевые слова:** выгорание, профессиональное выгорание, ранние дезадаптивные  
схемы, РДС, психологи МЧС, экстремальные психологи, дезадаптивный копинг, мо-  
дусы копинга.

**Для цитаты:** Миронова О.И., Ковалевская Е.А. Взаимосвязь профессионального выгорания и  
ранних дезадаптивных схем у экстремальных психологов [Электронный ресурс]. Психология  
и право. 2024. Том 14. № 2. С. 185–198. DOI:10.17759/psylaw.2024140214

### **Introduction**

One of the most researched topics of the last decades is the professional burnout syndrome. Even  
though burnout is not a disease according to the World Health Organization classification, it strong-  
ly affects a person's professional activity and his/her well-being in general [18]. If there are several  
burned-out employees, the work of the whole organization can be threatened. Signs of emotional  
burnout syndrome are revealed in the fact that the employee feels continuous fatigue, tiredness, de-

creased efficiency, headaches, disturbed sleep, increased passion for addictions, feeling that his strength, capabilities, and emotions are exhausted [17; 30]. As a result, such a worker develops a negative attitude to his labor activity, as well as to those people with whom he needs to interact at work. Burnout of an employee can reach the stage when absolute disappointment not only with his work activity, but also with his life in general. This paper uses the Maslach Burnout Inventory (MBI) methodology adapted by E. Vodopyanova [1]. This is one of the most widespread methods, so its validity has been verified by a large number of studies. In the most studies the following definition of burnout is used: it is a state characterized by excessive exhaustion, depersonalization or cynicism towards one's work, as well as a feeling of reduced professional efficiency caused by long-term stress at the workplace [24; 29]. In the recent studies it is considered that burnout can affect specialists of any profession, but especially high rates are observed in spheres where an integral part of work is helping people, in particular, psychologists of various profiles. The prevalence varies from 44.1% to 59% [21; 31; 33]. Helping professions include medical and social workers, psychologists and so-called first responders. First responders are specialists who are the first to arrive at the scene of an emergency. These include the already mentioned medical workers and psychologists, as well as police officers, EMERCOM staff, firefighters, etc. Such professions involve a very high level of stress. Burnout is the result of chronic stress at work, and the stronger the stress, the more likely the development of burnout [30]. The profession of an EMERCOM psychologist combines a lot of stressors: the emergency itself and the risks associated with it, work with disaster victims, lack of systematized psychological assistance at the workplace and not always satisfactory salary level. Y. Shoigu writes: "Emergency psychological aid is comparable to a medical ambulance - the faster it is rendered, the more chances that the affected person will preserve his psychological health and will be able to return to normal life". Limited time to provide psychological help is an additional stressor [9]. Frequency of being in the emergency zone and "sudden change of life and professional stereotype" are also important factors [8]. Therefore, we assume that these specialists will be especially susceptible to professional burnout syndrome.

Stress is not only a factor in professional burnout. Stress also activates early maladaptive schemas, or EMS. This construct comes from the theory of schemas, which, in turn, is based on the cognitive theory of A. Beck [16]. According to this theory, the presence of negative schemas in an individual increases the probability of vulnerability to psychological disorders. EMS are "stable character traits, internal constructs, or mental representations of dysfunctional beliefs about oneself and one's relationships with others, including cognitions, memories, bodily sensations, and affective states" [12]. EMS develops when a child tries to get his or her needs met, but a significant adult responds inappropriately, such as being aggressive or overprotective. In this case, early maladaptive schemas are very stable because they are formed in early childhood. Thus, schema theory provides insight into why psychological disorders in some people are chronic and difficult to change. A total of 18 EMS are distinguished and categorized into five domains:

1. Disconnection and Rejection
2. Impaired Autonomy and Performance
3. Over-Vigilance and inhibition
4. Impaired Limits
5. Other-directedness [10].

The distribution of 18 EMS across domains is presented in Table 1.

Table 1

**Classification of early maladaptive schemas**

Domain	Disconnection and Rejection	Impaired Autonomy and Performance	Other-directedness	Over-Vigilance and inhibition	Impaired Limits
EMS title and description	Emotional deprivation	Dependence / incompetence	Subjugation	Negativity / pessimism	Entitlement / grandiosity
	Abandonment / instability	Vulnerability to harm or illness	Self-sacrifice	Emotional inhibition	Insufficient self-control / self-discipline
	Mistrust / abuse	Enmeshment / Undeveloped self	Approval-seeking / recognition-seeking	Unrelenting standards / hypercriticalness	
	Defectiveness / Shame	Failure		Punitiveness	
	Social isolation / Alienation				

EMS are activated in stressful situations. This activation produces emotions that often do not correspond to the real situation but reflect childhood experiences. Schema theory shows that negative consequences, such as burnout, can be traced not only to the activation of certain EMS, but also to the ways in which people try to cope with these schemas. EMS begin to form in childhood, but it is hypothesized that they can become stronger during life, especially if maladaptive coping strategies are used to cope with them. Because this is a long and untraceable process, coping behaviors can also become automatic, which is referred to as coping modus [21; 36]. For example, if a person uses detached coping (unwillingness to establish emotional connections) and at the same time he or she is emotionally exhausted, this leads to depersonalization, which is a component of burnout. At the same time, if coping is maladaptive, it can lead to negative consequences for a person. Negative consequences, in turn, can increase stress levels, which, as mentioned, can lead to both burnout and start a new cycle related to EMS. Thus, EMS are part of the stress spiral and may be predictors of burnout [19; 35].

In recent years, special attention has been paid to the study of burnout in samples of certain professional communities, such as medical personnel, teachers, athletes, firefighters, police officers, and psychologists. However, studies of professional burnout among extreme psychologists are currently lacking. This study examines this particular category of professionals. Data on the prevalence of early maladaptive schemas, even not in the context of burnout, among extreme psychologists are also lacking. Therefore, data on burnout in similar professional groups such as counseling and clinical psychologists were used. In particular, findings from studies by Susan Simpson and colleagues and April Kaeding and colleagues were used [25; 35]. The most common EMS among psychologists are the “Unrelenting standards/hypercriticalness” and “Self-Sacrifice”. The reason is that they

are socially acceptable and even approved for this profession. These patterns are not just frequent, but are predictors of burnout [25; 35]. The authors attribute the reason for the high prevalence of EMS among psychologists to the fact that “a significant proportion of professionals report unfavorable childhood circumstances”. The psychologists who have experienced such circumstances may have an “increased capacity for empathy toward clients, but they may also be more at risk for developing maladaptive beliefs, coping mechanisms, and associated psychological distress” [15]. It is worth noting that both studies by S. Simpson and A. Keding had a specific feature. The authors measure burnout through the scale “Emotional exhaustion” of K. Maslach’s MBI questionnaire. The point is that the authors of the MBI questionnaire themselves point out that it is impossible to calculate the “total burnout score” using their methodology [29]. Even though attempts were made to derive a total burnout score using this questionnaire at the Bekhterev Institute, we did not find any studies in which such a methodology was used [11]. In order not to compare EMS scores with three scales, the authors of previous mentioned studies used only the “emotional exhaustion” scale to operationalize professional burnout, as it is considered to be the “core” of burnout. Also, a shortened version of the J. Young Early maladaptive schemas questionnaire was used, including 15 schemes instead of 18. The shortened version did not include the following early maladaptive schemas: “Negativism,” “Punitiveness,” and “Approval Seeking” [12].

In this research, the non-shortened version of both techniques was used in order to more fully reveal the nature of the possible relationship. We assume that these three early maladaptive schemas (“Negativity/pessimism”, “Punitiveness”, and “Approval-seeking/recognition-seeking”) are also positively correlated with the “Emotional Exhaustion” scale, since these schemas belong to the same domains as “Self-Sacrifice” and “Unrelenting standards/hypercriticalness”, namely the domains of “Other-directedness” and “Over-vigilance and inhibition”.

**Purpose of the study:** to identify the presence and nature of the relationship between professional burnout and early maladaptive patterns in extreme psychologists.

**Hypothesis of the study:** The hypothesis of the study is the assumption that professional burnout in extreme psychologists is related to such EMS as “Self-sacrifice”, “Unrelenting standards/hypercriticalness”, “Negativity/pessimism”, “Punitiveness” and “Approval-seeking/recognition-seeking”.

## Research Methods

The methods for the empirical study were questionnaire and testing. In the questionnaire the respondents were asked to indicate gender, age, specialization, and education level. K. Maslach’s professional burnout questionnaire adapted by E. Vodopyanova was used as methods. Vodopyanova [2] and the questionnaire to identify early maladaptive schemas by J. Young adapted by P. Kasyanik and E. Romanova [4]. The IBM SPSS Statistics program was used for data processing and correlation analysis. For data visualization was used R Studio program.

The main purpose of the empirical study was to measure the level of burnout and the intensity of early maladaptive schemas in extreme psychologists. To estimate the level of burnout, the questionnaire of K. Maslach adapted by E. Vodopyanova was used. This questionnaire contains 3 scales: “Emotional exhaustion” (9 questions), “Depersonalization” (5 questions) and “Personal achievements” (8 questions). In total, the questionnaire contains 22 questions, each of which respondents are asked to rate on a 7-point Likert scale how often they experience these or those states. There were 18 scales in the J. Young questionnaire, with one scale corresponding to one EMS. Each scale contains 5 questions. In this methodology, a 6-point Likert scale is used to answer a question and subjects are asked to evaluate how much they agree with the given statement.

The respondents were 36 professionals, of whom 13.9% were male and 86.1% were female. The average age was 36 years. Work experience varied from 1 to 25 years, the average length of service was 11 years. Psychologists working in the Ministry of Emergency Situations were the most numerous among the subjects (13 people), followed by private practitioners working at the scene of an emergency (10 people). 11 people worked with hospice patients, and two sample members were psychologists from law enforcement agencies. The level of education “Specialist” was 22 respondents (one specialist had the degree “Candidate of Psychological Sciences”). Eight respondents were masters and six respondents were bachelors.

### Results and discussion

The results of the study showed significant positive correlations between burnout scales and early maladaptive schemas. They are presented in Table 2.

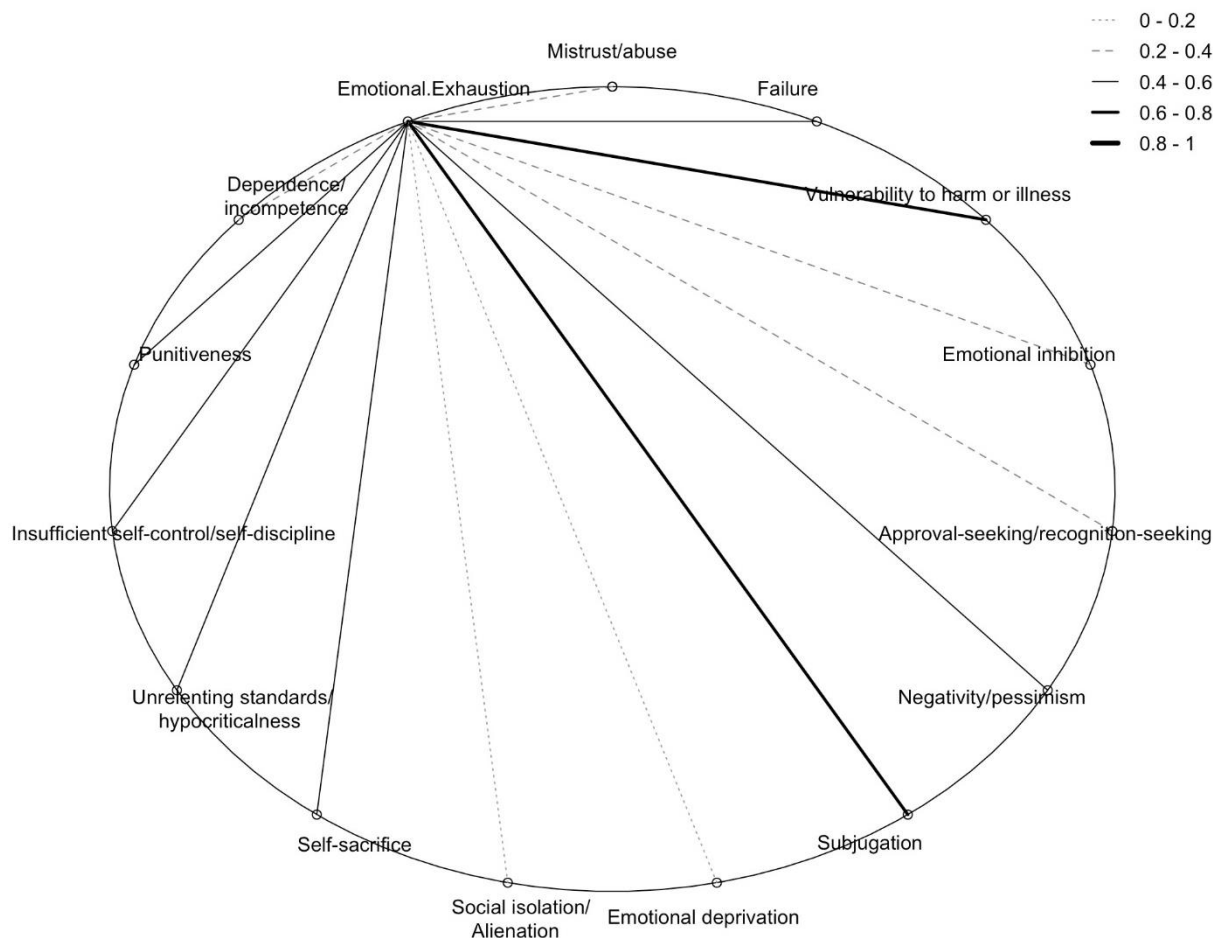
Table 2

#### Correlations between YSQ D. Young’s and MBI K. Maslach, S. Jackson’s scores

	Emotional Exhaustion	Depersonalization	Personal accomplishments
Mistrust / abuse	0,366*	0,612***	-0,509**
Failure	0,566***	0,490**	-0,550***
Vulnerability to harm or illness	0,614***	0,478**	-0,647***
Emotional inhibition	0,368*	0,556***	-0,517***
Approval-seeking / recognition-seeking	0,362*	0,368*	-0,368*
Negativity / pessimism	0,566***	0,529***	-0,534***
Subjugation	0,619***	0,330*	-0,395*
Emotional deprivation	0,024	0,252	-0,371*
Social isolation / Alienation	-0,017	0,069	-,501**
Self-sacrifice	0,443**	0,097	-0,087
Unrelenting standards / hypercriticalness	0,529***	0,185	-0,196
Insufficient self-control / self-discipline	0,534***	0,202	-0,438**
Punitiveness	0,431**	0,405*	-,305
Dependence / incompetence	0,247	0,165	-0,442**

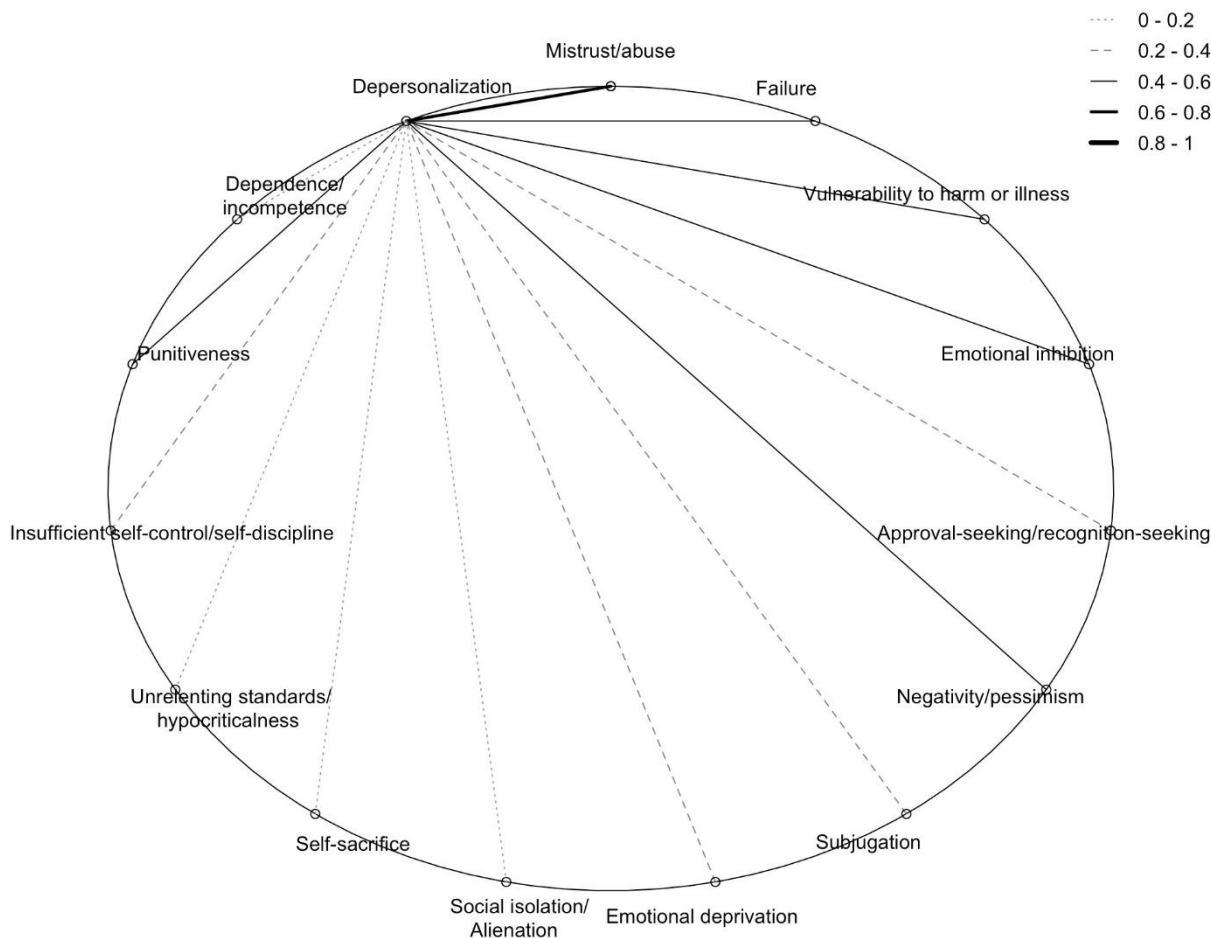
Note: «\*\*\*» —  $p \leq 0,001$ ; «\*\*» —  $p \leq 0,01$ ; «\*» —  $p \leq 0,05$ . Spearman correlations are given for the relationships of the “Dependence” and “Subjugation” scales; otherwise, Pearson correlations are given.

Since, as it was mentioned above, some authors consider the “Emotional exhaustion” scale to be the core of burnout, let’s start the review with it. Positive correlations were found between this scale and the following EMS: “Failure”, “Vulnerability to harm or illness”, “Negativity/pessimism”, “Subjugation”, “Unrelenting standards/hypercriticalness”, “Insufficient self-control/self-discipline” (at the significance level  $p \leq 0.001$ ). Positive correlations with “Punitiveness” and “Self-sacrifice” were found at significance level  $p \leq 0.01$ . Also “Emotional exhaustion” correlates with “Mistrust/abuse”, “Emotional deprivation” and “Approval-seeking/recognition-seeking” (at significance level  $p \leq 0.05$ ). This relationship can be presented more clearly in the form of correlation plaid in Figure 1.



*Figure 1.* The correlation pleiad of interrelations between Emotional exhaustion and EMS meanings  
*Note:* The range of correlation meanings and its graphical image is given on the picture. The stronger is the correlation, the thicker is the line

Hence, 11 EMS out of 18 are correlated with “Emotional exhaustion”. A probable explanation of such a significant number of EMS correlated with this particular scale is that it is the “core” of professional burnout, and also that this factor is the most significant (and may even be the only one) at a low or moderate level of burnout [20]. If we consider this scale as the core of burnout, the results are consistent with the data presented in earlier studies by A. Keding and S. Simpson, which speaks in favor of the hypothesis we put forward [25, 35]. However, the schemas correlating with emotional exhaustion turned out to be much more numerous than originally thought. Interestingly, among the correlates, all EMS from the domain “Other-directedness” and “Over-Vigilance and inhibition” are represented. The high correlations with the domain “Other-directedness” can be explained by the fact that in socio-economic professions, to which psychologist belongs, such focus is important for professional self-actualization, and, accordingly, such domains are common among psychologists [3]. And, since the most important professional competences in particular are conditioned by the ability to interact with others, they are among the first to suffer from burnout, or rather from emotional exhaustion.



*Figure 2.* The correlation pleiad of interrelations between depersonalization and EMS meanings  
*Note:* The range of correlation meanings and its graphical image is given on the picture. The stronger is the correlation, the thicker is the line

Many significant positive correlations were also found with “Depersonalization” scale, which other authors did not consider in the above-mentioned studies on a sample of psychologists. Visually, the obtained results of the correlation between depersonalization and EMS can be presented in the form of a correlation pleiad in Figure 2.

The level of depersonalization increases in extreme psychologists when their scores on these maladaptive schemas increase. Depersonalization is not only a component of burnout but can also be a risk factor for depressive disorders and general anxiety, so it is as much important as the emotional exhaustion, which other authors in some cases chose as a synonym of burnout [34]. Some authors believe that this factor is the most problematic in its consequences in burnout. Depersonalization is manifested in excessive formalism in performing one’s duties, indifference to the condition and requests of other people [23; 27]. In addition, depersonalization is expressed primarily in the tendency to see mainly “bad” sides in the character and behavior of other people. In general, practicing psychologists are susceptible to depersonalization also due to the specific features of their professional activity. For example, the presence of situations when a specialist lacks positive feedback, successful results, clear guidelines in the correction process. The consequence of this is often a compensatory mechanism of dehumanization of clients, namely, labeling them and using a devaluing vocabulary [6].



It is noteworthy that only those EMS correlate with the depersonalization scale, which also correlate with the emotional exhaustion scale. Therefore, there is almost no difference in the domains either, which means that mostly EMS from the same domains correlate with depersonalization as with the emotional exhaustion scale. At the same time, there is strong evidence that depersonalization is a separate scale and is not related to emotional exhaustion [23; 26; 37].

The results of the negative correlation between the “Personal achievement” scale and the EMS can be visually represented as correlation plaid in Figure 3.

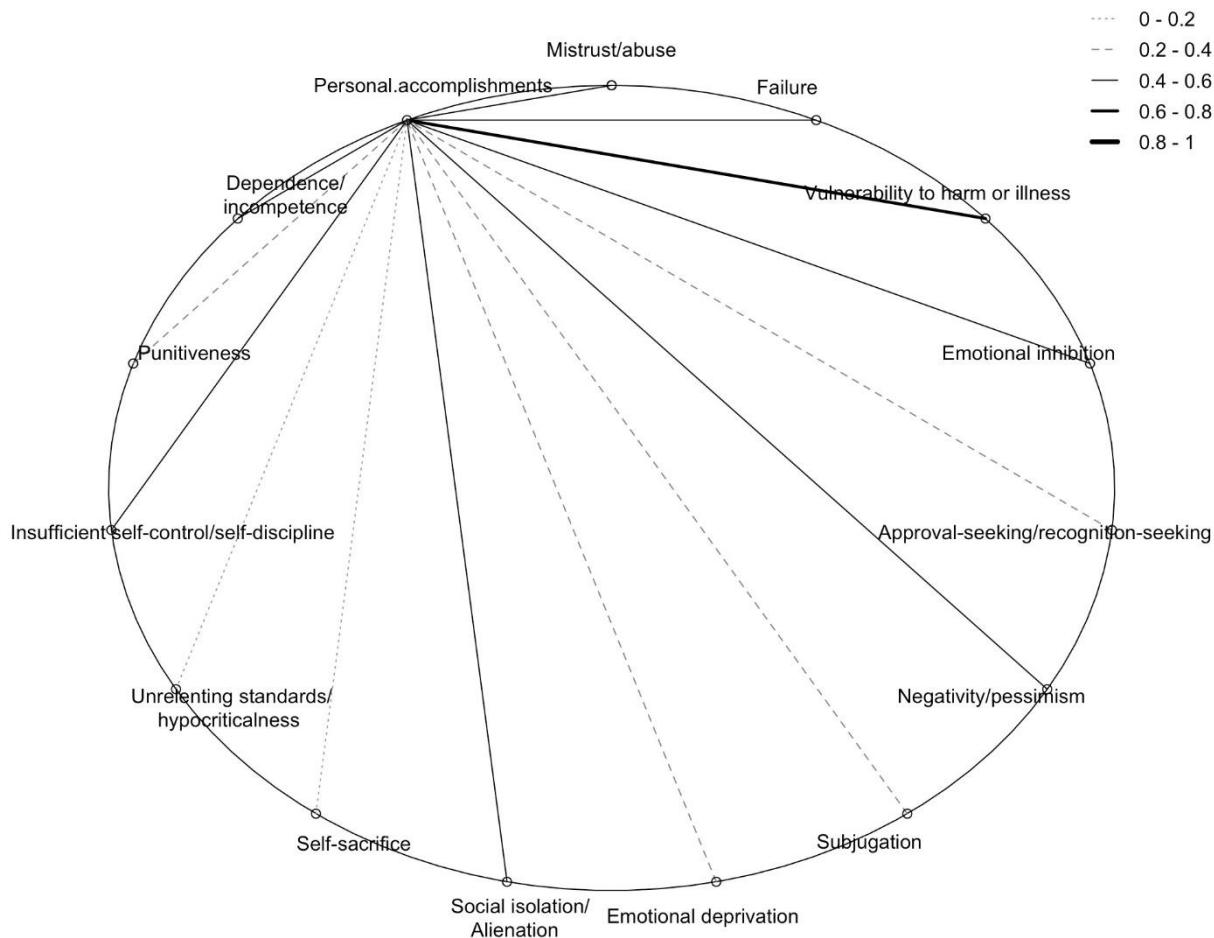


Figure 3. The correlation pleiad of interrelations between the indicators of personal achievement reduction and EMS

Note: The range of correlation meanings and its graphical image is given on the picture. The stronger is the correlation, the thicker is the line

When scores on these maladaptive schemas increase, extreme psychologists have lower scores on the “Personal Achievement” scale. The higher the scores on this scale, the more satisfied a person is with his or her personal achievements. The higher the scores on EMS, the lower the scores on this scale; here, unlike the previous two scales, the relationship between EMS and burnout is inverse. Low scores on the scale “Personal achievements” are expressed in a decrease in satisfaction in their professional and personal qualities. It can also be expressed in low self-esteem, alienation from other people and avoidance of work. The similar findings have been reported in studies with samples from other professional communities. For example, a study by M. Bamber and colleagues

examined health care workers. All EMS they found were negatively related to the “Personal Achievement” scale [13]. If schemas are maladaptive, they increase the experience of stress. The associated negative emotions affect the evaluation of one’s professional competencies, and personal achievements may be devalued. This may explain the inverse relationship between EMS and personal achievement.

So, the most significant number of positive correlations was found between the “Emotional exhaustion” scale and ten EMS, the list of which includes “Unrelenting standards/hypercriticalness” and “Self-sacrifice”. However, at the same time, no correlation was found between these two EMS and other burnout scales i.e., depersonalization and personal achievement. The significant correlation of these EMS with the “Emotional Exhaustion” scale can also be explained by the fact that these schemes are negatively correlated with the level of psychological well-being. Psychological well-being implies "positive relationships with others, autonomy, environmental control, personal growth, having a purpose in life, and self-acceptance" [7]. With emotional exhaustion, a person’s ability to maintain and monitor these components decreases. One of the possible explanations for why “Unrelenting standards/hypercriticalness” are not correlated with “Depersonalization” and “Personal Achievement” scales is that, in general, this schema is significantly more expressed in males than in females [2]. The sample of this study, however, is predominantly female.

The obtained results can also be considered in terms of the Schema-Focused Model of Occupational Stress and Labor Dysfunction by M. Bamber [14]. The model postulates that people often “unconsciously seek events, situations, and relationships that trigger their early maladaptive schemas” [13]. The authors write that despite the paradoxical nature of such an assumption, it makes sense. It is so that they can process again the negative experiences that contributed to the development of EMS and learn how to respond optimally. Such a phenomenon is known in the literature as “re-experiencing” and it can be viewed in terms of “a self-healing process aimed at curing one’s own EMS” [22; 28; 38]. This extends to occupational choices as well. In certain occupations, there may be typical situations that will re-activate a person’s EMS. For people with not very ingrained, i.e., conditionally “soft” EMS, there is a chance for their transformation into positive schemas. However, if the schemas are deeply rooted, there is a possibility that work peculiarities and maladaptive coping moduses may only worsen the situation, as they are part of the stress spiral. Based on the schema model of occupational stress and work dysfunction, it can be assumed that there are certain profiles of EMS in different occupations. One of the directions of further research may be the establishment of specific EMS in psychologists of extreme profile and first responders, so far nothing is known about them. The results of this study suggest that these EMS will mostly belong to the domains of “Other-directedness” and “Supervigilance and inhibition”. This assumption is supported by the data of other studies that point to the social desirability of some EMS in the context of certain professions, which is the reason for their prevalence [25; 35].

*The perspectives of the further research* relate to the discovered specificity of distribution by domains of those EMS that are significantly correlated with burnout. In general, the presented results indicate that early maladaptive schemas associated mainly with the domains “Other-directedness” and “Supervigilance and inhibition” affect the level of psychological well-being and self-esteem of psychologists, which may negatively affect their professional effectiveness. As for the remaining EMS, further research with larger samples is needed. However, the data that not all EMS correlating with emotional exhaustion also correlate with all other burnout scales allows us to question the correctness of the approach of previous researchers, who chose this scale as a synonym for burnout. For example, “Self-sacrifice” is related only to emotional exhaustion, and “Emotional deprivation” is related only to the scale “Personal achievement”. Alternative methods for further

research could be, for example, the Burnout Assessment Tool (BAT) [33]. This tool is more modern, it is adapted for the Russian-speaking sample, and, most importantly, it allows to calculate the total burnout score, unlike the method of K. Maslach [33; 5]. This may theoretically allow to clarify how EMS are related to burnout in general, rather than by separate scales. Also, in further research, an adjustment for the age of the respondents can be considered, since, according to a study on a sample of mentally healthy people, the intensity of EMS decreases with age. In other words, the older a person is, the less expressed most (14 out of 18) of the schemas are. The exceptions are early maladaptive schemas such as “Emotional deprivation”, “Social Isolation/alienation”, “Subjugation”, and “Self-Sacrifice”. Burnout is not a disease, so such data may be relevant in further research [2].

The obtained results may have practical importance in the context of providing psychological assistance to extreme profile psychologists. To date, schema therapy has not been widely used in the prevention of professional burnout at the organizational level. In case of additional research there could be enough evidence for wide use of schema therapy for burnout prevention both in ordinary organizations and in security forces which include, in particular, the Ministry of Emergency Situations, since schema therapy aims to formation of more adequate protective reactions in patients, reducing the impact of EMS on cognitive, emotional and behavioral spheres.

### Conclusions

A review of foreign and Russian researches dedicated to the study of professional burnout and early maladaptive schemes (EMS) was conducted. among some socioeconomic professions, in particular, psychologists, psychology students and medical workers was conducted. Based on the results of the respondents’ testing, there were obtained findings that support the proposed hypothesis of a significant positive correlation between the burnout (especially the “Emotional Exhaustion” scale) and such EMS as “Self-Sacrifice”, “Unrelenting Standards”, “Negativity/pessimism”, “Punitiveness”, and “Approval Seeking/recognition-seeking”. However, it was also found that almost all EMS (13 out of 18) correlated with some scales of the MBI questionnaire. The most correlates found in the domains of “Other-directedness” and “Supervigilance and inhibition”.

Further examination of studies on this topic showed that the model of occupational stress and labor dysfunction, which assumes certain profiles of EMS in different professions, can be used as an explanation. These findings allowed us to propose an additional hypothesis about a possible characteristic profile of EMS in extreme psychologists, which is mostly represented by the above-mentioned domains, but further research on larger samples is needed to confirm it.

### References

1. Vodopyanova N.E., Starchenkova E.S., Nasledov A.D. Standartizirovannyi oprosnik “professional’noe vygoranie” dlya spetsialistov sotsionomicheskikh professii [The Standardized Questionnaire “Professional Burnout” for Specialists of Socioeconomic Professions]. *Vestnik Sankt-Peterburgskogo universiteta. Seriya 12. Psikhologiya. Sotsiologiya. Pedagogika = Vestnik of Saint Petersburg University. Series 12. Psychology. Sociology. Pedagogy*, 2013, no. 4, pp. 17–27 (In Russ.).
2. Galimzyanova M.V., Kasyanik P.M., Romanova E.V. Vyrazhennost’ rannikh dezadaptivnykh skhem i rezhimov funktsionirovaniya skhem u muzhchin i zhenshchin v period rannei, srednei i pozdnei vzroslosti [Early Maladaptive Schemas and Schema Modes of Men and Women in Different Stages of Adulthood] [Elektronnyi resurs]. *Vestnik Sankt-Peterburgskogo universiteta. Psikhologiya = Vestnik of Saint Petersburg University. Psychology*, 2016. no. 3, pp. 109–125. URL:

[https://psyjournals.ru/journals/vspu\\_psychology/archive/2016\\_n3/Galimzyanova\\_et\\_al](https://psyjournals.ru/journals/vspu_psychology/archive/2016_n3/Galimzyanova_et_al) (Accessed 01.02.2024). (In Russ., abstr. in Engl.)

3. Dotsenko O.N. Emotsional'naya napravlennost' kak faktor "vygoraniya" u predstavitelei sotsionomicheskikh professii [Emotional orientation as a factor of "burnout" in socioeconomic professions representatives]. *Psikhologicheskii zhurnal = Psychological Journal*, 2008, Vol. 29, no. 5, pp. 91–100. (In Russ.).

4. Kasyanik P.M., Romanova E.V. Diagnostika rannikh dezadaptivnykh skhem. Saint Petersburg: Izdatel'stvo Politekhnicheskogo universiteta, 2016. 152 p. (In Russ.).

5. Kolachev N.I., Osin E.N., Schaufeli W., Desart S. Lichnostnye resursy i vygoranie u sotrudnikov bibliotek Moskovskoi oblasti [Personal Resources and Burnout: Evidence from a Study among Librarians of Moscow Region]. *Organizatsionnaya psikhologiya = Organizational Psychology*, 2019. Vol. 9, no. 2, pp. 129–147. (In Russ.).

6. Kulakova S.V. Spetsifika proyavlenii sindroma professional'nogo vygoraniya u praktikuyushchikh psikhologov [The specificity of manifestations of the professional burnout syndrome in practicing psychologists] [Elektronnyi resurs]. *Psikhologiya i pravo = Psychology and Law*, 2015. Vol. 5, no. 1, pp. 80–89. URL: [https://psyjournals.ru/journals/psylaw/archive/2015\\_n1/76155](https://psyjournals.ru/journals/psylaw/archive/2015_n1/76155) (Accessed 10.02.2024). (In Russ., abstr. in Engl.).

7. Lozinskaya E. I., Lutova N. B., Vid V. D. Sistemnyi indeks sindroma peregoraniya (na osnove testa MBI): Metodicheskie rekomendatsii. Saint Peterburg: Sankt-Peterburgskii nauchno-issledovatel'skii psikhonevrologicheskii institut imeni V.M. Bekhtereva Publ., 2007. 19 p. (In Russ.).

8. Myagkikh N.I., Larina N.I. Teoriya i praktika psikhologii krizisnykh situatsii [Theory and Practice of Crisis Situations] [Elektronnyi resurs]. *Psikhologiya i pravo = Psychology and Law*, 2011. Vol. 1, no. 2. URL: [https://psyjournals.ru/journals/psylaw/archive/2011\\_n2/40903](https://psyjournals.ru/journals/psylaw/archive/2011_n2/40903) (Accessed 05.02.2024). (In Russ., abstr. in Engl.).

9. Shoigu Yu.S. Organizatsiya deyatelnosti psikhologicheskoi sluzhby MChS Rossii [Organization of the Russian Emergencies Ministry psychological services]. *Natsional'nyi psikhologicheskii zhurnal = National Psychological Journal*, 2012, no. 1, pp. 131–133. (In Russ.).

10. SKHEMY: dezadaptivnye i pozitivnye [Elektronnyi resurs]. *Moskovskii Institut shema-terapii*. URL: <https://schema-therapy.ru/schemes> (Accessed 15.10.2023). (In Russ.).

11. Tikhomirova M.A., Grishina N.V. Rannie dezadaptivnye skhemy v kontekste psikhologicheskogo blagopoluchiya [Early Maladaptive Schemas within the Framework of Psychological Well-Being]. *Peterburgskii psikhologicheskii zhurnal = Peterburgskii psikhologicheskii zhurnal*, 2016, no. 16, pp. 83–102. (In Russ.).

12. Bach B., Lockwood G., Young J. E. A new look at the schema therapy model: organization and role of early maladaptive schemas. *Cognitive Behaviour Therapy*, 2017, Vol. 47, no. 4, pp. 328–349. doi:10.1080/16506073.2017.1410566

13. Bamber M., McMahon R. Danger—Early Maladaptive Schemas at Work!: The Role of Early Maladaptive Schemas in Career Choice and the Development of Occupational Stress in Health Workers. *Clinical Psychology and Psychotherapy*, 2008, Vol. 15, no. 2, pp. 96–112. doi:10.1002/cpp.564

14. Bamber M.R. CBT for Occupational Stress in Health Professionals: Introducing a Schema-Focused Approach. London: Routledge, 2006, pp. 204–206. doi:10.4324/9780203966037

15. Barnett J.E., Baker E.K., Elman N.S., Schoener G.R. In pursuit of wellness: The self-care imperative. *Professional Psychology: Research and Practice*, 2007, Vol. 38, no. 6, pp. 603–612. doi:10.1037/0735-7028.38.6.603

16. Beck A.T. Cognitive therapy: past, present, and future. *Journal of Consulting and Clinical Psychology*, 1993. Vol. 61, no. 2, pp. 194–198. doi:10.1037/0022-006x.61.2.194
17. Brown M.-E. Hazards of Our Helping Profession: A Practical Self-Care Model for Community Practice. *Social Work*, 2019, Vol. 65, no. 1, pp. 38–44. doi:10.1093/sw/swz047
18. Burn-out an “occupational phenomenon”: International Classification of Diseases [Electronic resource]. *World Health Organization*. URL: <https://www.who.int/news/item/28-05-2019-burn-out-an-occupational-phenomenon-international-classification-of-diseases> (Accessed 18.08.2023).
19. Calvete E. Emotional abuse as a predictor of early maladaptive schemas in adolescents: Contributions to the development of depressive and social anxiety symptoms. *Child Abuse & Neglect*, 2014. Vol. 38, no. 4, pp. 735–746. doi:10.1016/j.chiabu.2013.10.014
20. Chen H., Richard O.C., Dorian Boncoeur O., Ford D.L. Work engagement, emotional exhaustion, and counterproductive work behavior. *Journal of Business Research*, 2020. Vol. 114, pp. 30–41. doi:10.1016/j.jbusres.2020.03.025
21. Cushway D., Tyler P.A. Stress and coping in clinical psychologists. *Stress Medicine*, 1994. Vol. 10, no. 1, pp. 35–42. doi:10.1002/smi.2460100107
22. Freud S. Remembering, repeating, and working-through. In Lemert Ch. (Ed.). *Social Theory. The Multicultural and Classic Readings, Boulder etc.* Westview Press. 1993, pp. 150–154.
23. Garden A.M. Depersonalization: A Valid Dimension of Burnout? *Human Relations*, 1987. Vol. 40, no. 9, pp. 545–560. doi:10.1177/001872678704000901
24. Hewitt D.B., Ellis R.J., Hu Y.-Y., Cheung E.O., Moskowitz J.T., Agarwal G., Bilimoria K.Y. Evaluating the Association of Multiple Burnout Definitions and Thresholds With Prevalence and Outcomes. *JAMA Surgery*, 2020, Vol. 155, no. 11, pp. 1043–1049. doi:10.1001/jamasurg.2020.3351
25. Kaeding A., Sougleris C., Reid C., Vreeswijk M.F. van, Hayes C., Dorrian J., Simpson S. Professional Burnout, Early Maladaptive Schemas, and Physical Health in Clinical and Counselling Psychology Trainees. *Journal of Clinical Psychology*, 2017. Vol. 73, no. 12, pp. 1782–1796. doi:10.1002/jclp.22485
26. Kitaoka-Higashiguchi K., Nakagawa H., Morikawa Y., Ishizaki M., Miura K., Naruse Y., Kido T., Higashiyama M. Construct validity of the Maslach Burnout Inventory-General Survey. *Stress and Health*, 2004, Vol. 20, no. 5, pp. 255–260. doi:10.1002/smi.1030
27. Lee R.T., Ashforth B.E. A Meta-Analytic Examination of the Correlates of the Three Dimensions of Job Burnout. *Journal of Applied Psychology*, 1996, Vol. 81, no. 2, pp. 123–133. doi:10.1037/0021-9010.81.2.123
28. Levy M.S. A helpful way to conceptualize and understand reenactments. *The Journal of Psychotherapy Practice and Research*, 1998, Vol. 7, no. 3, p. 227–235.
29. Maslach C., Jackson S.E. and Leiter M.P. Maslach Burnout Inventory. In Zalaquett C.P., Wood R.J. (Eds.). *Evaluating Stress: A Book of Resources*. 3rd ed. London: Scarecrow Education, Lanham, 1997, pp. 191–218.
30. Maslach C., Schaufeli W.B. Historical and Conceptual Development of Burnout. In Schaufeli W.B., Maslach C., Marek T. (Eds.). *Professional Burnout. Recent Developments in Theory and Research*. London: Routledge, 1993, pp. 1–16. doi:10.4324/9781315227979-1
31. Rupert P.A., Kent J.S. Gender and Work Setting Differences in Career-Sustaining Behaviors and Burnout Among Professional Psychologists. *Professional Psychology: Research and Practice*, 2007. Vol. 38, no. 1, pp. 88–96. doi:10.1037/0735-7028.38.1.88
32. Rupert P.A., Morgan D.J. Work Setting and Burnout Among Professional Psychologists. *Professional Psychology: Research and Practice*, 2005. Vol. 36, no. 5, pp. 544–550. doi:10.1037/0735-7028.36.5.544

33. Schaufeli W.B., Desart S., De Witte H. Burnout Assessment Tool (BAT)—development, validity, and reliability. *International Journal of Environmental Research and Public Health*, 2020. Vol. 17, no. 24. doi:10.3390/ijerph17249495
34. Schlax J., Wiltink J., Beutel M.E., Münzel T., Pfeiffer N., Wild P., Blettner M., Kerahrodi G.J., Michal M. Symptoms of depersonalization/derealization are independent risk factors for the development or persistence of psychological distress in the general population: Results from the Gutenberg health study. *Journal of Affective Disorders*, 2020. Vol. 273, pp. 41–47. doi:10.1016/j.jad.2020.04.018
35. Simpson S., Simionato G., Smout M., Vreeswijk M.F. van, Hayes C., Sougleris C., Reid C. Burnout amongst Clinical and Counselling Psychologists: The Role of Early Maladaptive Schemas and Coping Modes as Vulnerability Factors. *Clinical Psychology & Psychotherapy*, 2019. Vol. 26, no. 1, pp. 35–46. doi:10.1002/cpp.2328
36. Smout M.F., Simpson S.G., Stacey F., Reid C. The Influence of Maladaptive Coping Modes, Resilience, and Job Demands on Emotional Exhaustion in Psychologists. *Clinical Psychology & Psychotherapy*, 2022. Vol. 29, no. 1, pp. 260–273. doi:10.1002/cpp.2631
37. West C.P., Dyrbye L.N., Satele D.V., Sloan J.A., Shanafelt T.D. Concurrent Validity of Single-Item Measures of Emotional Exhaustion and Depersonalization in Burnout Assessment. *Journal of General Internal Medicine*, 2012. Vol. 27, no. 11, pp. 1445–1452. doi:10.1007/s11606-012-2015-7
38. Young J.E.E., Klosko J.S. *Reinventing Your Life: The Breakthrough Program to End Negative Behavior ... and Feel Great Again*. Penguin Publishing Group, 1994. 384 p.

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Получена 16.02.2024  
Принята в печать 19.04.2024

Received 16.02.2024  
Accepted 17.04.2024