

EXAMINING THE ROLE OF PERCEIVED PARENTAL ACCEPTANCE-REJECTION AND SELF-DIFFERENTIATION ON EMERGING ADULTS' INTERPERSONAL PROBLEMS

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ETHICAL DECLARATION

I hereby declare that I am the sole author of this thesis and that I have conducted my work in accordance with academic rules and ethical behaviour at every stage from the planning of the thesis to its defence. I confirm that I have cited all ideas, information and findings that are not specific to my study, as required by the code of ethical behaviour, and that all statements not cited are my own.

İlayda Büyük 11.07.2023 Signature

ABSTRACT

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Guided by the Interpersonal Acceptance-Rejection Theory and Bowen's Family Systems Framework, the present study aimed to investigate the role of perceived parental acceptance-rejection and self-differentiation on emerging adults' interpersonal problems. The sample consisted of 256 university students (128 females, 128 males) aged between 18 and 29 ($M_{age} = 22.88$, SD = 3.61). To test the hypotheses, Parental Acceptance Rejection Short Form, Self-Differentiation Inventory and Inventory of Interpersonal Problems Short Version IIP-32 were used. Multiple linear regression analyses were conducted to analyze the stated relations. The results of the study revealed that perceived parental rejection and self-differentiation significantly predicted interpersonal problems. Present study highlights the importance of addressing parental rejection while working with interpersonal problems and aiming to enhance self-differentiation in therapy interventions to improve interpersonal functioning. Findings were discussed in light of the literature.

Keywords: parental acceptance-rejection, self differentiation, interpersonal problems

ÖZET

ALGILANAN EBEVEYN KABUL-REDDİ VE BENLİK AYRIMLAŞMASININ BELİREN YETİŞKİNLERİN KİŞİLERARASI PROBLEMLERİ ÜZERİNDEKİ ROLLERİNİN İNCELENMESİ

Büyük, İlayda

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TEZ DANIŞMANI: DR. ÖĞR. ÜYESİ AYLİN KOÇAK

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Bu çalışmanın temel amacı, algılanan ebeveyn kabul-reddi ve benlik farklılaşmasının beliren yetişkinlerin yaşadığı kişilerarası problemler üzerindeki rolünü araştırmaktır. Örneklem 18-29 yaş arası ($Ort_{yaş} = 22.88$, S = 3.61) arasında değişen 256 üniversite öğrencisinden (128 kadın, 128 erkek) oluşmaktadır. Çalışma hipotezlerini test etmek için Ebeveyn Kabul-Red Ölçeği Kısa Formu, Benlik Ayrımlaşması Ölçeği ve Kişilerarası Problemler Envanteri Kısa Formu IIP-32 kullanılmıştır. Belirtilen ilişkileri analiz etmek için çoklu doğrusal regresyon analizleri yapılmıştır. Araştırma sonuçları, algılanan ebeveyn reddi ve benlik ayrımlaşmasının kişilerarası sorunları anlamlı bir şekilde yordadığını ortaya koymuştur. Bu çalışma, terapi müdahalelerinde kişilerarası problemler üzerinde çalışırken ebeveyn reddini ele almanın yanı sıra kişilerarası işlevselliği geliştirmek için benlik ayrımlaşma düzeyini artırmanın önemini vurgulamaktadır. Bulgular ilgili literatür ışığında tartışılmıştır. Anahtar Kelimeler: algılanan ebeveyn-kabul reddi, benlik ayrımlaşması, kişilerarası problemler



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CHAPTER 1: INTRODUCTION

Being accepted is a fundamental need for all human beings and is linked with better mental health (Baumeister and Leary, 1995). Since a child's psychological conditions are closely linked to the quality of their relationships with their parents (Bowlby, 1982), parents hold a unique significance in the child's perception of being accepted. Based on these assumptions, Interpersonal Acceptance-Rejection Theory (IPARTheory) holds that parents are major attachment figures for their children and have a significant impact on their psychological well-being throughout the life cycle (Rohner, 2004).

According to the IPARTheory, when individuals are unable to satisfy the fundamental needs of being accepted and loved by their parents; their psychological functioning will be negatively affected (Khaleque and Rohner, 2012). One of the most important consequences of being rejected by parents is having difficulties in interpersonal relationships (Rohner, 2021). Interpersonal problems refer to persistent challenges in relationships with others and constitute subjective distress in individuals (Horowitz, Rosenberg and Bartholomew, 1993). More specifically, interpersonal difficulties are found to be associated with negative affect and loneliness (Shechtman and Horowitz, 2006), poor adaptation (Critchfield and Benjamin, 2010), higher psychological distress, psychological dysfunctioning (Lo-Coco et al., 2018), poorer therapeutic alliance (Renner et al., 2012), and a wide range of psychiatric disorders (Girard et al., 2017). Therefore, understanding the associates of interpersonal problems is of crucial importance considering the negative outcomes mentioned above. Studies indicate that how parents interact with their children has a significant impact on their psycho-social development and their interpersonal relationships (Laxmi and Kadapatti, 2012; Rohner, 2021) and that having negative experiences in parental relationships, especially parental rejection, is associated with interpersonal problems (Tariq and Kauasr, 2015; Soygüt and Çakır, 2009).

Although some studies examined the role of parental rejection on interpersonal problems within the framework of IPARTheory, they did it with a psychiatric sample and didn't evaluate the impact of different dimensions of parental acceptance-rejection on interpersonal problems (Tariq and Kauasr, 2015; Çini, 2022). Thus, this study will contribute to the limited research being conducted in this area by providing further information using a non-psychiatric sample.

In addition to parental rejection (Çini, 2022), differentiation of self, guided by Bowen's family systems framework (1978), has been also considered as a potential predictor of interpersonal functioning (Skowron, Stanley and Shapiro, 2009). Bowen (1978) defined differentiation of self as the emotional separation from the family of origin and the development of a distinctive self. It has been also defined as living in a balanced state of thoughts and emotions, sticking with one's own beliefs and opinions, as well as maintaining intimate relations with others while keeping autonomy (Skowron, Holmes and Sabatelli, 2003). As self-differentiation contributes to the balance between connectedness and independence of individuals, previous research highlights that it is an important indicator of healthy interpersonal functioning and low levels of it relate to difficulties in interpersonal relationships (Wei et al., 2005; Skowron et al., 2009).

Given that different cultures place varying emphasis on independence, interdependence, personal autonomy, and emotional connectedness (Skowron, Holmes and Sabatelli, 2003), it is crucial to understand how self-differentiation impacts interpersonal functioning among Turkish individuals. To our knowledge, this relationship has not been examined with a Turkish sample yet. Therefore, another purpose of this study is to address this gap by investigating how self-differentiation relates to interpersonal problems among Turkish participants. Additionally, given that developing autonomy and independence from parents, as well as building intimate relationships are particularly important during emerging adulthood, this study will target the population of emerging adults. Consequently, this study will investigate the role of parental acceptance-rejection and self-differentiation on emerging adults' interpersonal problems through an integrative perspective by combining IPARTheory and Bowen's Family Systems Theory.

In the following sections, first, the Interpersonal Theory will be introduced, which provides a framework for understanding interpersonal problems. Following that, the IPARTheory, focusing on parental acceptance-rejection, will be presented to shed light on its relevance to interpersonal problems. Finally, the concept of self-differentiation, guided by Bowen's theory, will be explained in order to better understand interpersonal problems.

1.1. Overview of Interpersonal Theory

The ability to form and maintain interpersonal relationships constitutes the foundation of human adaptation, makes life meaningful, and contributes to fulfillment as well as happiness throughout one's life (Rudolph, Landsford and Rodkin, 2016). From the beginning of human history, humans have been driven by their motivation for relatedness, which manifests itself in the desire to belong, to be affiliated, and to be accepted (Baumeister and Leary, 1995; Rudolph and Bohn, 2013). Since humans are inherently social, the quality and nature of interpersonal relationships exert a significant influence on them (Segrin and Taylor, 2007). Empirical evidence indicates that having a supportive social network and positive relationships are essential for maintaining a healthy life because having positive relationships is strongly associated with better mental and physical health (Turgut and Çınar, 2022). Therefore, most theoretical frameworks are in agreement regarding the importance of relatedness and satisfying interpersonal relationships for healthy functioning and psychological wellbeing (Dawood et al., 2018).

Interpersonal Theory, among others, is a prominent approach that places a great deal of emphasis on interpersonal functioning (Girard et al., 2017). Interpersonal theorists, who have been influenced by the work of Leary (1957) and Sullivan (1953) are in general agreement that personality is best understood as a series of recurring interpersonal dispositions that exhibit certain patterns of interpersonal behavior (Hayden et al., 2017). Therefore, they seek to understand the motives and patterns of behavior that occur when individuals interact with each other. According to Sullivan (1953), the fundamental motivation for interpersonal interaction, in which people influence each other's behavior, arises from a need for self-esteem and security. He also suggests that interactions with others form patterns of interpersonal situations as a result of age-appropriate social learning from infancy throughout the life span. Consequently, as long as a person's needs for security and self-esteem are met, the interactions will be pleasant and the behavior will be reinforced; if they are frustrated, the interaction will be unpleasant and will result in dysregulation, distress, and coping difficulties (Hopwood et al., 2013).

The interpersonal approach integrates elements from other theories as well. That is, in line with the cognitive-behavioral approach, the interpersonal approach stresses the important role that cognitive processes (schemas and cognitive biases) play in shaping one's expectations, and interpretations, as well as strengthening interpersonal motivations and interactions (Horowitz et al., 2006). As with the psychodynamic approach, the interpersonal approach emphasizes motives and attributes significant psychological consequences to frustration resulting from unresolved motivational conflicts (Horowitz et al., 2006). In addition, it converges with Attachment theory on the assumption that the representation of self and others constitute heuristic prototypes that guide social interaction and interpersonal behavior (Blatt, Auerbach and Levy, 1997). Since it is an integrative framework, interpersonal problems will be explained from the perspective of Interpersonal Theory in the present study.

1.1.1. Interpersonal Circumplex Model

Further development of Sullivan's theory was made by Leary, who developed the "interpersonal circumplex" (IPC) as a means of organizing and describing interpersonal functioning (Leary, 1957). Interpersonal circumplex (IPC) has become the most widely used model for assessing interpersonal dispositions in recent decades (Locke, 2006). As well as identifying problem areas for an individual, the model also describes the style of interpersonal interaction that an individual predominantly exhibits. This model is based on the previous IPC models in which agency is located on the vertical axis and communion is located on the horizontal axis. Agency and communion are widely used meta-concepts to describe interpersonal needs (Wiggins, 1991). Based on Sullivan's theory, communion can be understood as a need for security, while the agency can be viewed as a need for self-esteem (Pincus and Hopwood, 2012). More specifically, agency is the state of being a differentiated individual, characterized by a struggle for power and mastery which enable individuals to promote and protect their individuation (Gurtman, 2009). On the other hand, communion involves belonging to a larger social entity and seeking intimacy, union, and solidarity with that entity (Wiggins, 1991). As a result, agency refers to the individuation/differentiation needs through power, status, mastery and control, whereas communion refers to the intimacy needs through love, affiliation, and friendship (Locke, 2006). For healthy interpersonal functioning, achieving a balance between agency and communion needs is necessary (Gurtman, 2009). For instance, individuals who exhibit low levels of communion and high levels of agency may manifest vindictive problems, or the opposite, individuals who have a low level of communion and high level of agency may demonstrate self-sacrificing behaviors (Locke, 2006). (see Figure 1)

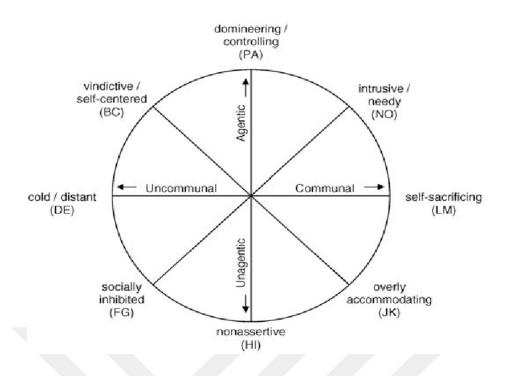


Figure 1. Interpersonal Circumplex Model with Agency and Communion (Source: Locke, 2005)

Instead of agency and communion, Leary (1957) explained interpersonal behavior based on the concepts of affiliation and dominance. According to Leary, an interpersonal behavior can be constructed with two dimensions: The first dimension refers to affiliation (the horizontal axis), ranging from hostile to friendly behavior; the second dimension refers to dominance (the vertical axis), ranging from submissive to dominant behavior (Alden, Wiggins and Pincus, 1990) (see Figure 2). The Interpersonal Circumplex Model identifies eight dysfunctional interpersonal areas "intrusive-needy", "domineering/controlling", "self-sacrificing", "overly accommodating", "nonassertive", "socially avoidant", "cold-distant", and "vindictive/self-centered" and they will be explained one-by-one in the following section (Akyunus, 2012).

First of all, the domineering/controlling area indicates how difficult it is for a person to relax control over others, their degree of controlling/manipulative behavior, their tolerance to lose control, their inability to consider other people's perspectives, and their tendency to engage in disputes with others. Individuals in this area strive for power, control, and influence over other people in interpersonal interactions. Thus, they assert authority, dominate conversations, and manipulate others to achieve their objectives. Moreover, intrusive/needy behaviors are characterized by struggles with friendly dominance, a need to be engaged with others, difficulty with being alone, inappropriate disclosure of self, and poor interpersonal boundaries. Individuals in this area display both warmth and assertiveness in social situations. This combination demonstrates the tendency to be assertive and take charge of social situations while displaying warmth and friendliness at the same time.

Furthermore, self-sacrificing behaviors are characterized by problems with being too willing to serve others, too willing to give, overly caring, generous, trusting, permissive, and difficulty maintaining boundaries in relationships, protective attitudes towards others, and a tendency to place others' needs ahead of one's own.

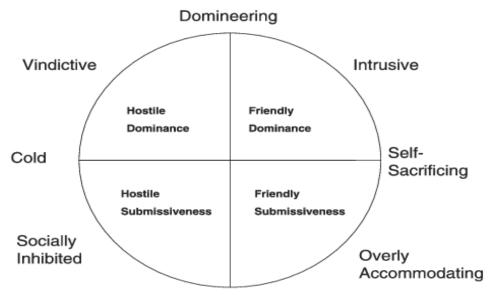
Additionally, overly accommodating behaviors can be described as an excessive degree of friendly submissiveness, a tendency to be inoffensive in order to gain approval from others, an unwillingness to say no, and a reluctance to display feelings of anger. Individuals in this area avoid being assertive and engaging in conflicts in order to maintain relationships.

In addition, nonassertive individuals have a severe lack of self-esteem and selfconfidence, which contributes to their difficulty in asserting themselves. They are often uncomfortable being at the center of attention, avoids socially challenging situations, and refrains from communicating their desires and needs out of fear of disapproval or rejection.

In addition to that, socially avoidant individuals have feelings of anxiety, timidity, or embarrassment when other people are present, as well as difficulty initiating social interactions, joining groups, and expressing their feelings.

Moreover, cold/distant individuals are characterized by having little affection for and connection with other people, difficulties in adhering to long-term commitments, and being unable to offer sympathy, nurturance as well as generosity toward others.

Lastly, vindictive/self-centered is characterized by displaying hostile dominance problems, the manifestation of anger and irritability, and showing distrust and suspicion towards others. Additionally, they lack support and disregard for other individuals' needs and tend to be irresponsible toward others.



Nonassertive

Figure 2. Interpersonal Circumplex Model with Dominance and Affiliation (Source: Ruiz et al., 2004)

According to the Interpersonal Approach, the term "interpersonal" refers to both what occurs between actual people as well as what occurs between mental representations of oneself and others. It is the interpersonal interactions that are believed to be the most important ways in which people express their personalities, therefore, from an interpersonal perspective, it is not what a person is, but what he or she does with other people that determines how a person functions (Hopwood et al., 2013). Given that cognitions affect how interpersonal situations take place, this model can also describe the typical way in which a person encodes new interpersonal information and how they represent themselves and others in their minds (Dawood et al., 2018).

According to the Circumplex Model, two individuals reciprocally influence one another as they interact, and one person's actions invite specific responses from another, known as the "principle of complementarity" (Pincus and Hopwood, 2012). According to that, these responses will be similar along the dimension of affiliation and reciprocal along the dimension of dominance, such that friendly-dominant behavior invites friendly-submissive behavior (Alden et al., 1990). As a result, those who display friendly submissive behaviors are more likely to receive advice and support from others, which reinforces their submissive behaviors (Horowitz, 1996). Such complementary transactions increase the likelihood that typical behavior will be observed in the future, are self-confirming for each individual, reduce anxiety, promote relatedness, and increase the likelihood of the relationship being sustained (Kiesler, 1996). Consequently, people get trapped in vicious circles and have interpersonal problems when interacting with others (see Figure 3).



Figure 3. A pair of complementary behaviors (Source: Horowitz et al., 2006).

The concept of "anticomplementary interactions" refers to interactions in which the action on the control dimension is not reciprocal (when dominance meets dominance) and does not correspond to the affiliation dimension (when friendliness is met with hostility) (Horowitz et al., 2006). The unpleasant nature of these situations makes them perceived as aversive and they evoke increased interpersonal stress in interpersonal interactions (Terry, 2010). As such, when individuals interact with each other, they expect to have complementary interactions, which in turn reinforces and sustains their interpersonal styles as well as their interpersonal problems.

1.1.2. Gender Differences in Interpersonal Circumplex Model

Studies that investigate the role of gender on different interpersonal problems indicate that females indicate more problems in the dimension ranging from friendly-submissive and males indicate more problems in the dimension ranging from hostile-dominant (Horowitz et al. 2003; Gurtman and Lee, 2009; Akyunus, Gençöz and Aka, 2019). In traditional, patriarchal cultures, women are expected to behave in warmer, more nurturing, caring, and submissive ways than men (Akyunus et al., 2019). Thus, the differences between subscales differ according to cultural expectations. However, the results of studies indicate that there is no significant gender difference in overall levels of interpersonal problems between men and women. (Çini, 2022; Küçükaltun, 2022; Maden, 2021; Poole et al., 2018).

1.1.3. Interpersonal Problems

Interpersonal problems are recurrent difficulties in relating to other people and constitute subjective distress in individuals (Horowitz et al., 1993). In clinical interviews, they are among the most common complaints reported by patients, and one of the most common reasons why patients seek psychotherapy (Gurtman, 1996). Relevant literature indicates that interpersonal problems are associated with negative affect (Nysæter et al., 2009), poor adaptation (Critchfield and Benjamin, 2010), higher psychological distress and psychological dysfunctioning (Lo-Coco et al., 2018), poorer therapeutic alliance (Renner et al., 2012) and a wide range of psychiatric disorders (Girard et al., 2017). Also, having interpersonal problems result in negative affect, loneliness, and psychological distress (Shechtman and Horowitz, 2006) and makes it difficult to establish and maintain successful intimate relationships. Thus it is important to understand how interpersonal problems occur.

Interpersonal theory assumes that interpersonal behavior is governed by personal goals that individuals developed to meet and protect their agency and communal needs and that interpersonal problems result from perceived differences between the goals of individuals and the consequences of interpersonal interactions (Grosse et al., 2006). In addition, individuals experience problems as a result of the intensity of their goals. Accordingly, interpersonal problems occur when either desired interpersonal behavior is not used sufficiently or unwanted interpersonal behavior is used excessively (Horowitz, et al., 2000). Nonassertive behavior, for example, occurs when one is unable to communicate one's own needs adequately, whereas socially inhibited behavior occurs when one is unable to approach others and join groups. Similarly, strong goals can also create interpersonal problems since they may go beyond what is socially acceptable, resulting in negative reactions from others (Kiesler, 1996). For example, a tendency to be overly generous and caring towards others leads to problems of self-sacrificing, while an excessive tendency to be controlling leads to problems of domineering.

Individuals develop approach goals to meet their psychological needs, such as intimacy, affiliation, recognition, status, and control, while also forming avoidance goals to prevent the frustration of needs, including separation, humiliation, failure, vulnerability, and accusation (Gable and Impett, 2012). Consequently, people's behaviors are guided and organized by approach and avoidance goals. Holtforth et al. (2007) demonstrated that both strong approach goals (which involve satisfying needs)

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and strong avoidance goals (which prevent need frustration) are associated with interpersonal problems. Specifically, an excessive motivation to achieve recognition is associated with being overly accommodating, an excessive motivation to achieve intimacy is associated with being self-sacrificing, whereas an excessive motivation to achieve status is associated with being domineering (Holtforth et al., 2007). On the other hand, a strong motivation to avoid vulnerability is associated with being socially avoidant and nonassertive, a strong motivation to avoid accusations is associated with being nonassertive, and a strong motivation to avoid separation or deprecation is associated with being exploitable and overly nurturing (Holtforth et al., 2007). This is because they are directly concerned with preventing conflict, depreciation, humiliation, or rejection. Furthermore, even though strong avoidance goals prevent undesired consequences, they create an incongruity between the intended and the subsequent behavior (Thomas et al., 2012). The reason for this is that even if one has an approach goal, such as getting to know someone better; an avoidance goal, such as avoiding rejection, may prevent one from taking action. Therefore, strong avoidance goals prevent the satisfaction of adaptive approach goals and the chronic frustration of approach goals leads to interpersonal problems (Holtforth et al., 2006).

Similarly, Horowitz suggested that (1996), interpersonal problems in many instances are caused by a conflict between the individual's desire to engage in a particular behavior and his fear of the consequences of such behavior. If, for example, a person desires to become closer to another individual but is afraid to be humiliated due to unpleasant past relationships, he may not be able to do so. Although a person requires bonding, s/he may show ambiguous behavior to observers (e.g. overly withdrawing, submissive behavior) due to fears of abandonment, conflict, or depreciation (Thomas et al., 2012). As a consequence, s/he may invite others to react in a domineering rather than affiliating manner. Consequently, conflicting goals can result in ambiguous behavior, which in turn leads to dissatisfaction with interpersonal goals (Thomas et al., 2012). Horowitz (1996) suggested that conflicts between the desired behavior and the failure to attempt it arise as a result of the individuals' interpersonal learning history, which can be observed to some extent in their earlier interactions with attachment figures. This is because, an individual's interpersonal motivations are shaped by adaptive or maladaptive perceptions of social expectations which are formed as a result of early interactions (Horowitz, 1996). In other words, a caregiver's anticipated negative response may cause conflict between an individual's desire to express certain behaviors, such as seeking support during times of distress, and an individual's anxiety regarding expressing those behaviors (Haggerty, Hilsenroth and Vala-Stewart, 2009). Similarly, if people had disappointing experiences with significant others in the past, they could develop a distrust of others, avoid intimate relationships and refuse to give up control, which may result in problems of hostile dominance; while people who had early experiences that reinforced their incompetence and dependence on others may have difficulties with interpersonal submissiveness (Horowitz, 1996).

Haggerty et al., (2009) conducted a study to investigate the relationship between interpersonal problems and attachment types and found that secure attachment had a negative relationship with dominant, vindictive, cold, socially inhibited, and nonassertive behaviors. Additionally, fearful attachment had a positive relationship with dominant, vindictive, cold, socially inhibited, and non-assertive behaviors. Finally, dismissive attachment had a positive relationship with dominant behaviors (Haggerty et al., 2009). Moreover, in a systematic review of attachment styles and interpersonal problems, it was demonstrated that individuals with anxious attachments, who are excessively concerned about their loved ones, tend to display friendly-submissive behaviors; whereas those with attachment avoidance, who deny dependence and favor self-reliance, are more likely to be involved in hostile interpersonal situations (Hayden, Mullauer and Andreas, 2017). Also, it has been demonstrated by Dykas and Cassidy (2011) that people process social information based on their earlier experiences with attachment figures. Accordingly, the information is processed in a positively biased manner by individuals with secure attachments, whereas the information is processed negatively biased by individuals with insecure attachments. As a result, it can be said that interpersonal problems reflect frustrations of chronically unsatisfied needs and goals originating from the experiences with significant others in the past.

As mentioned before, Interpersonal theory is congruent with Cognitive-Behavioral and Attachment theories which both point out that individuals develop, maintain, and modify meaning systems (schemas, representation of self and others, or working models) that organize and shape their understanding of themselves in relation to others (Beck 2005; Bowlby, 1982). Therefore, they are in agreement that schemas or models of self and others serve as heuristic prototypes that form the basis of social interaction and interpersonal behavior (Blatt et al., 1997). Accordingly, the cognitive-affective schemas or representations are formed through earlier interactions with attachment figures and act as prototypes that shape individuals' interpersonal motives (Horowitz

et al., 2006), as well as their perceptions about themselves and others (Blatt et al., 1997). Therefore they have a profound impact on the future interpersonal relationships throughout one's lifetime. Accordingly, an individual with healthy personality functioning is capable of organizing and elaborating data about interpersonal interactions accurately and without distortion (Horowitz et al., 2006). Accurate cognitions regarding self and other people are also necessary for the fulfillment and the balance of both agency and communal needs. People are more likely to experience this when their mental representations of interpersonal situations are in alignment with their objective assessments of the interaction; whereas individuals who have chronically distorted representations of themselves and others are unlikely to satisfy their psychological needs (Horowitz et al., 2006). Also, there is a tendency for such individuals to apply these representations in new interpersonal settings which in turn causes disturbances in their ability to interact with other people in a successful manner (Critchfield and Benjamin, 2008). This is because distorted cognitions result in misinterpretations of interpersonal situations, as well as a limited repertoire of social roles (Şimşek, Koçak and Younis, 2021). Indeed, related studies demonstrated that distorted cognitions are positively correlated with the presence of interpersonal problems in adulthood (Akyunus and Akbay, 2022; Mojallal et al., 2014; Janovsky et al., 2020).

According to interpersonal theorists, reenacting maladaptive interpersonal patterns is an effort to maintain a psychological connection with an attachment figure from their past (Critchfield and Benjamin, 2008). Individuals' defensive efforts to prevent anxiety and maintain their self-image result in the repetition of these patterns, regardless of how painful they are (Horowitz, 1996). As a result, a pattern learned in the context of attachment is likely to persist even if it proves to be maladaptive because it maintains psychological connections to early figures and is motivated by a desire to be loved and accepted (Critchfield and Benjamin, 2010). Based on Bowlby's ideas, Benjamin (2003) proposed that early relational patterns are encoded via social learning and replicated so that adult patterns of relationships are directly influenced by the internal representation of those early experiences, whether they are adaptive or maladaptive. Therefore, interpersonal patterns learned in the past are reproduced in current relationships. Related research indicated that a person's past relating patterns with their parents, including maladaptive/hostile and adaptive/friendly ways of relating, are significantly correlated with their relating patterns in the present (Critchfield and Benjamin, 2010). Also, given that parental interactions hold a significant place in past relational patterns, they could have a role in interpersonal problems experienced in the long term. When the literature was examined, related research demonstrated that rejecting, neglecting, and controlling parenting styles are associated with interpersonal problems in adolescence and adulthood (Saleem, Ihsan, and Mahmood, 2019; Petrowski et al., 2006). Thus, past relational patterns can be said to have a profound effect on current styles of relating and difficulties in relationships.

In conclusion, the Interpersonal theory points out the influential role of early relational patterns with significant others in forming stable maladaptive patterns of social interactions and interpersonal problems through cognitive distortions and negative representations that sustain chronically dissatisfied motives. Additionally, perceived parental rejection is closely related to attachment experiences (Hughes et al., 2005; Karaboğa and Eker, 2020), interpersonal cognitive distortions (Epli et al., 2021), and parenting styles (Petrowski et al., 2006). In the light of the Interpersonal Acceptance-Rejection Theory, parental rejection has been considered a possible antecedent of interpersonal problems. Although previous studies investigated the relationship between parental acceptance-rejection and interpersonal problems, they did it with psychiatric patients and didn't include different dimensions of parental rejection in the investigation (Tariq and Kauasr, 2015; Çini, 2022). Therefore, the impact of parental rejection dimensions on interpersonal problems has not been fully understood. Thus, in this study, parental rejection is considered to be one of the predictors of interpersonal problems among a non-psychiatric sample.

1.2. Interpersonal Acceptance-Rejection Theory

According to the majority of theorists, parents play a crucial role in the social and emotional development of their children (Bowlby, 1982; Erikson, 1993). Given that being accepted is a fundamental need, there is a need for parental acceptance among children everywhere (Rohner, 2004). As an evidence-based theory of socialization and lifespan development, Interpersonal Acceptance and Rejection Theory (IPARTheory) aims to explain the causes, consequences, and factors associated with parental acceptance and rejection. When the theory was first introduced in the 1960s, it was called the "Parental Acceptance-Rejection Theory", but later it was renamed the "Interpersonal Acceptance-Rejection Theory" (IPARTheory) to incorporate relationships with other people who are important to the individual (Rohner and Lansford, 2017). While there has been a change in the name, a significant part of the theory remains focused on the consequences, causes, and other associated factors with perceptions children have about the acceptance and rejection of their parents, as well as adults' recollections of their experienced parental acceptance and rejection when they were children (Rohner, 2021).

In terms of emotional and psychological well-being, parents hold a unique significance, since a child's sense of security and other emotional and psychological conditions are closely related to the quality of their relationship with their parents (Bowlby, 1982). In line with that, IPARTheory proposes that parents are major attachment figures for their children and they have a significant impact on their psychological well-being (Rohner, 2004). In the relevant literature, parental acceptance and rejection consistently predict a wide variety of psychological outcomes throughout one's life (Khaleque and Ali, 2017). Accordingly, parental acceptance is associated with less depressed mood, a greater degree of psychological adjustment (Khaleque and Rohner, 2002); life satisfaction, psychological hardiness, emotional security (Ahmed et al., 2010), and better emotional regulation (Faraji, Laçin and Tezcan, 2022). On the other hand, parental rejection has been found to be related to negative outcomes such as externalizing as well as internalizing behaviors, conduct disorders, delinquency, substance abuse (Rohner and Britner, 2002), poor adjustment (Khaleque and Rohner, 2012), and interpersonal problems (Tariq and Kauasr, 2015; Çini, 2022).

IPARTheory makes a strong emphasis on the subjective perception of parenting behaviors on the part of individuals. A child or adult's perception of the acceptance or rejection of a major caregiver's behavior is derived from how children and adults interpret the behaviors of major caregivers through their cultural perspectives (Rohner and Khaleque, 2005). Given that perceived acceptance-rejection is mostly experienced symbolically, culturally different interpretations of love indicators need to be taken into account when describing parental behavior (Rohner and Khaleque, 2010). In line with that, the studies conducted in a variety of different countries indicate that people around the world seek acceptance based on a similar criterion regardless of cultural contexts (Rohner, 2004). In other words, the perceptions of children and adults regarding acceptance-rejection are universally grouped into four categories of behavior namely warmth/affection (or its opposite, coldness/lack of affection), hostility/aggression, indifference/neglect, and undifferentiated rejection. Acceptance and rejection are marked on a continuum which is termed the "warmth dimension".

Therefore, warmth dimension will be explained in a detailed way.

1.2.1. The Warmth Dimension of Parenting

According to the IPARTheory, the warmth dimension represents a bipolar spectrum as an indicator of parental warmth (Rohner, 2004). In the warmth dimension, there are acceptance and rejection, which represent opposing ends of the same continuum (Rohner, 204). Acceptance can be described as warmth, affection, care, comfort, nurturing, support, or simply love expressed to the child, and it is placed on the continuum where everyone receives acceptance to different degrees. On the other hand, rejection can be described as a) the absence or withdrawal of warmth, or affection, b) hostility/aggression, c) indifference/neglect, and d) undifferentiated rejection.

It is possible to demonstrate warmth and affection in a variety of ways, including verbally by praising and complimenting, as well as physically by hugging, kissing, and cuddling. It can be also demonstrated symbolically through such behaviors as showing love, care, affection, nurturing, and support. It is perceived as a rejection by the child when warmth and affection are not expressed by parents in any way. In addition to that, parental rejection may manifest in the form of aggression/hostility, indifference/neglect, or undifferentiated rejection. First, parents' behavior that results from feelings of hostility, anger, or resentment is generally referred to as aggression. Aggression and hostile behavior can take different forms, including verbal (insulting, yelling, teasing, humiliation) or physical (hitting, grabbing), or it can be symbolic (making hurtful or offensive gestures). Therefore aggression can be any behavior that is intended to hurt a child, either physically or emotionally. Second, the behaviors of being different or neglectful include being physically or psychologically unavailable to the child, as well as ignoring the needs of the child. A parent's indifference is defined as a state of mind marked by a lack of concern, interest, and care for their children; whereas parental neglect is defined as an absence of parental attention to the physical, psychological, and social needs of their children (Khaleque, 2015). Neglectful parents rarely pay attention to the needs of their children for comfort, solace, and attention. They also remain inaccessible, unavailable, and unresponsive physically or psychologically (Rohner and Lansford, 2017). Third, undifferentiated rejection is based on the individual's subjective feelings of being unloved, unwanted, or rejected for no apparent reason (Rohner, 2004). Individuals who experience undifferentiated rejection believe that their attachment figures do not actually care about them, even if

there are no obvious signs to indicate that they are aggressive, unaffectionate, or neglectful towards them (Rohner, 2010). As a result of these behaviors, whether real or perceived, children feel rejected or unloved, and are overly focused on their own worth without having the energy to develop their cognitive and emotional skills (Yu et al., 2020).

To sum up, parental rejection can be experienced with one or more of the following behaviors: a) absence or withdrawal of warmth and affection, b) presence of hostility/aggression, c) presence of indifference/neglect, and d) presence of undifferentiated rejection (Rohner and Lansford, 2017). However, an individual cannot be categorized as either accepted or rejected; rather their experience of acceptance or rejection varies according to where they fall on a continuum (see Figure 4).

According to the IPARTheory, the warmth dimension indicates the nature and quality of the relationship between parent and child, that is, how affectionate it is and how strong it is (Khaleque and Rohner, 2012). The quality and nature of the parent-child relationship are of critical importance since they influence people's feelings, thoughts, and perceptions about relationships, and act as a template for future relationships (Ripoll-Nunnez and Carrillo, 2016). Further, it has a significant role in shaping the development of children's personalities and psychological functioning in the long term (Rohner, 2004).

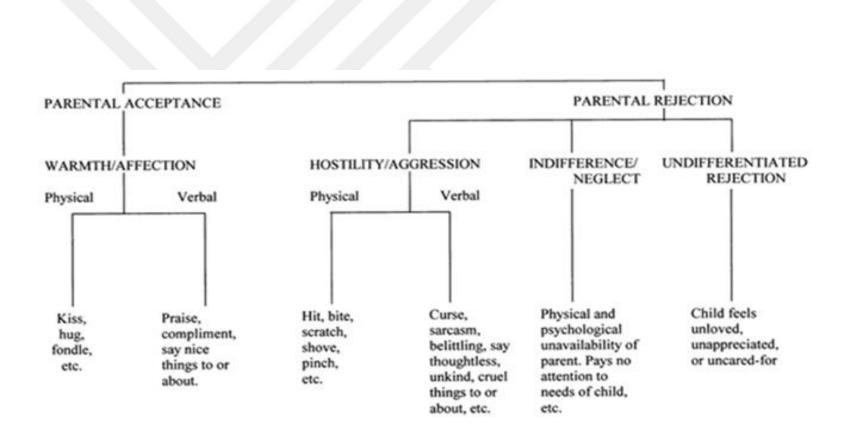


Figure 4. Parenting and its behavioral indicators according to IPARTheory (Source: Rohner, Khaleque and Cournoyer, 2005)

1.2.2. Gender Differences in Parental Acceptance-Rejection

In the literature, there have been mixed results regarding the perceptions of parental acceptance among males and females. Some studies found that females tend to perceive their parents as more accepting compared to males (Chung, Zappulla and Kaspar, 2008), while other studies indicate that males perceive their parents as being more accepting than females (Carter, 1984; Conte, et al., 1996). However, other studies have not found a difference in perceptions of parental acceptance between males and females (Lila, Garcia and Gracia, 2007; Erkan and Toran, 2010).

1.2.3. Subtheories of Interpersonal Acceptance-Rejection Theory

To address and provide answers to different issues IPARTheory is divided into three subcategories, namely "coping subtheory", "sociocultural subtheory" and "personality subtheory" (Rohner, 2021). A major goal of the coping theory is to answer the following general question: How do some individuals and children with rejection experience cope better than others, in other words, which social-cognitive capacities help them cope better with the perceived rejection? (Rohner et al., 2005). Moreover, sociocultural subtheory attempts to explain why some parents are warm and loving and others are cold, aggressive, neglectful, and rejecting of their children (Khaleque and Rohner, 2002). Lastly, personality subtheory addresses whether children with different cultural and sociodemographic backgrounds respond similarly to the acceptance and rejection they perceive by their parents (Rohner, 2021). Another purpose of the personality subtheory is to investigate the impact of societal patterns of parental acceptance and rejection on both the society and the individuals within it (Khaleque and Rohner, 2002). Also, it addresses to what extent childhood acceptance and rejection are carried into adulthood. As the current study examines the extent to which parental acceptance and rejection perceived in childhood influence interpersonal problems of emerging adults, it falls under the domain of personality subtheory. Hence, it will be elaborated more in the following section.

1.2.4. Personality Subtheory

Personality subtheory aims to explain the effects of parental acceptance and rejection on personality, as well as their psychological consequences in the long run (Rohner et al., 2005). Throughout history, humans have evolved a biologically derived need to receive positive responses from attachment figures, including affection, care, comfort, support, nurturance, and acceptance (Rohner, 1975). It is typically parents who can best fulfill these needs for children, but significant others and non-parental attachment figures can also fulfill these needs for adolescents and adults (Rohner, 2008). In a meta-analysis of cross-cultural studies, it has been shown that positive responses from attachment figures are strongly associated with individuals' functioning in the long term (Rohner and Khaleque, 2010). It is important to note that according to IPARTheory attachment, a significant figure can be anyone with whom one has an affectionate relationship and is dependent, at least in part, on feelings of well-being, happiness, and overall sense of security (Rohner et al., 2005). In IPARTheory, a parent can be described as a person who is responsible for the primary care of a child, such as an older sibling or other relatives (Rohner 2021). The significant other is anyone with whom the child maintains a long-term emotional bond, and who is essential for the individual and cannot be replaced (Rohner et al., 2005). Therefore, parents tend to be significant others in this sense, but parents also possess an additional characteristic distinctive from other significant others, that is, the quality of the relationship between parents and children is usually a determining factor in the children's level of emotional security, comfort, and well-being (Rohner, 2021).

Considering how prominent parental interactions are in a child's life, parental approval and rejection play a significant role in the early socialization process, as well as the development of social skills (Faraji et al., 2022). A social skill can be defined as an ability to interact with others, as well as a personality trait that reflects one's psychological well-being (Segrin and Taylor, 2007). Related research has found that less acceptance from mothers was associated with less social skills in children (Peixoto, 2021). Also, studies that focus on the positive outcomes of parental acceptance indicate that parental warmth and affection contribute to less depressed mood in children, adolescents, and adults, as well as buffering adolescents against the detrimental effects of unavoidable stressful events in their lives (Rohner and Britner, 2016; Şahin, 2022). Furthermore, parental acceptance was found to be related to developing more positive mental representations regarding the world and other people, as well as a greater degree of psychological adjustment (Lila et al., 2007; Khaleque and Rohner, 2002). Other benefits associated with parental acceptance are positive life satisfaction, psychological hardiness, emotional security (Ahmed et al., 2010), and better emotion regulation skills (Faraji et al., 2022). However, when children are unable to meet the fundamental needs of being accepted and loved by their parents, they experience insecurity, psychological maladjustment, externalizing - internalizing behaviors, negative personality dispositions, conduct disorders, delinquency, substance abuse (Rohner and Britner 2002; Rohner, 2004) and problems within interpersonal relationships (Tariq and Kauasr, 2015).

According to the IPARTheory, when individuals grow up in stable and loving circumstances, they tend to see others as available and responsive, and themselves as competent and deserving of care (Rohner and Khaleque, 2010). On the contrary, people who perceive that they have been rejected by attachment figures experience anxiety, and insecurity and perceive others as unavailable as well as unresponsive (Rohner, 2004). Based on that, the personality subtheory proposes that individuals who perceive that they have been rejected by attachment figures, particularly children who have experienced parental rejection, are at risk of developing distorted mental representations of themselves, their significant others, and the world in general (Rohner and Khaleque, 2010). Distorted mental representations refer to a set of emotional and cognitive dispositions, also known as personality dispositions, which have been identified by the personality subtheory. Personality is defined by Rohner (2005) as "a combination of internally motivated predispositions (affective, cognitive, perceptual, and motivational dispositions) as well as observable behaviors to a variety of life circumstances. As the central focus within the personality subtheory, personality dispositions are also considered to be an index of psychological adjustment. Psychological adjustment, as measured by the personality dispositions mentioned above, has consistently been associated with parental acceptance-rejection across a variety of countries (Khaleque and Rohner, 2002; Rohner and Britner, 2002; Rohner and Khaleque, 2010; Ali et al., 2019). Moreover, these negative personality dispositions tend to establish a stable pattern, which in turn negatively affects behavioral functioning throughout the lifetime (Rohner, 2004). Individuals who believe they are accepted by attachment figures are more likely to develop the following dispositions: 1) low hostility and aggression, 2) independence, 3) positive self-esteem, 4) positive self-adequacy, 5) emotional stability, 6) emotional responsiveness, and 7) positive worldview, as described by the theory. On the contrary, individuals who believe that they are rejected by attachment figures tend to develop distorted representations given below (Rohner, 2021).

1.2.4.1 Hostility, Aggression, or Difficulty Managing Hostility and Aggression

A parent's negative reactions and feelings, such as anger, hostility, or resentment, often lead to aggression, so a child or adult who has experienced rejection is likely to experience anger, hostility, and other destructive emotions that become increasingly painful (Rohner, 2015). Since rejection is often painful and frustrating, aggression could serve as an effective strategy for regaining control in those individuals (Leary, Twenge ande Quinlivan, 2006). The manifestations may include physical and verbal aggression, or passive-aggressive behaviors such as sulking, stubbornness, or deliberate procrastination in an attempt to irritate or retaliate against another (Rohner, 2015). Problems related to the management of hostility and aggression can also appear in disguised forms, such as concern about the imagined hostility of others; aggressive fantasies; and a strong interest in violent activities (Rohner, 2015). Studies indicate that rejection by parents is associated with aggressive behavior, hostility, criminality, and violence, not only in childhood but also in adolescence and adulthood (Brendgen, et al., 2001; Khaleque and Rohner, 2012; Leary et al., 2006; Rohner, 2016).

1.2.4.2 Dependence or Defensive Independence

IPARTheory views dependence as a continuum, with independence at one end of the spectrum and dependence at the other. Individuals differ considerably in their levels of dependence depending on the degree to which they believe they are accepted or rejected by significant others (Rohner and Khaleque, 2004). There is a need for constant reassurance and emotional support among dependent people, as well as a strong emotional desire for a positive response, which is why they are likely to engage in many behavioral bids (Khaleque and Rohner, 2011). According to Rohner (2021), immature dependence may result from parental warmth and affection combined with intrusive behavioral control, which can reinforce children's dependency needs and discourage them from exploring on their own. By reinforcing infantilizing forms of dependency, the parent may result in the development of fear and emotional dependence in the child (Rohner, 2017). As a result, an overly dependent individual feels insecure and lacks a healthy sense of autonomy.

On the other hand, independent individuals are those who are satisfied with their emotional needs for positive responses, so that they no longer engage in frequent or intense yearning for support, comfort, or care from others (Rohner, 2016). They are emotionally healthy and capable of requesting emotional support occasionally without

feeling overwhelmed by the burden of needing support all the time (Rohner and Khaleque, 2005). As opposed to healthy independence, defensive independence involves craving warmth and support, even though they may deny this need as a result of underlying anger and distrust resulting from chronic rejection (Rohner, 2017). Emotional and behavioral characteristics associated with defensive independence may also result in counter-rejection, in which individuals who feel rejected reject the individuals who reject them (Rohner, 2017). To sum up, accepted individuals will demonstrate interdependence in interpersonal relationships and will be capable of caring for their own needs, while reaching out to others when necessary, on the other hand, rejected individuals are likely to either avoid close relationships altogether or hold on tightly to those around them (Rohner and Khaleque, 2005).

1.2.4.3 Impaired Self-Esteem

A person's sense of self-esteem can be described as an evaluation or appraisal of their own value (Ansari and Qureshi, 2013). According to IPARTheory, children and adults tend to view themselves as their parents or significant others do, hence their sense of self-worth is derived from internalizing the views of others who are significant to them (Rohner, 2004). In other words, if they feel unloved by their attachment figures, they are likely to feel unworthy of love and affection. Individuals with diminished selfesteem have difficulty forming or maintaining warm and intimate relationships with others, which may lead to further devaluation of their self-worth (Ansari and Qureshi, 2013).

1.2.4.5 Impaired Self-Adequacy

Self-adequacy is defined as feeling competent or capable of conducting one's daily activities and fulfilling one's own task-oriented needs (Rohner, 2015). Frequently, rejected individuals experience impaired self-adequacy, which refers to the perception that they are not very good individuals and that they are not competent at meeting their own needs (Rohner, 2021). Furthermore, when individuals do not feel that they are meeting their personal needs adequately, they often come to view themselves in a negative light on a global basis (Rohner, 2017). For example, they may view their achievements as unimportant and inadequate.

1.2.4.6 Emotional Unresponsiveness

Emotional responsiveness is described as being able to express emotions freely and openly (Rohner, 2017; Rohner, 2015). Individuals with emotional responsiveness can respond emotionally to another person with spontaneity and ease, and also they are comfortable establishing intimate, involved, and non-defensive attachments with others (Rohner, 2015). On the contrary, many children and adults who have been rejected tend to shut down emotionally in order to protect themselves from further rejection (Rohner, 2017). In contrast, emotionally unresponsive people are usually emotionally isolated from other people and it is common for them to engage in limited emotional involvement with others, which is often defensive (Rohner, 2017; Rohner, 2015). It is important to note that even if they are friendly, they are unable to have an intimate, involved, non-defensive relationship, and thus their relationships tend to be nonpersonal and emotionally distanced (Rohner, 2015). Also, it is common for them to have difficulty expressing their love and accepting the love of others (Rohner, 2017).

1.2.4.7 Emotional Instability

Emotional stability refers to the ability of an individual to maintain a steady mood in the face of minor setbacks, failures, difficulties, and other stressors, without becoming emotionally disturbed (Rohner, 2015). Emotionally stable individuals tend to maintain a constant basic mood, and they usually return to that level of mood following any instances of considerable stress, but on the other hand, unstable individuals are prone to experience wide, frequent, and unpredictable mood swings (Rohner, 2017; Rohner, 2015). People who feel rejected are more likely to have emotional instability since anger, negative self-feelings, and other consequences of perceived rejection tend to impair rejected individuals' ability to regulate emotions and cope effectively with stress (Khaleque and Rohner, 2011; Faraji et al., 2022).

1.2.4.8 Negative Worldview

Lastly, a person's worldview describes how she or he views life, the universe, or the very nature of existence in general (Rohner, 2015). For those with a positive worldview, life is perceived as essentially good, secure, friendly, or unthreatening, while those with a negative worldview view life as essentially bad, insecure, hostile, or dangerous (Rohner, 2021). IPARTheory posits that rejected individuals tend to develop a negative worldview in which people and the world are seen as unfriendly,

hostile, or dangerous in general (Khaleque, 2012).

1.2.5. The Relationship Between Parental Rejection and Interpersonal Problems

It is a fundamental need of human beings to be socially accepted, and to avoid rejection from others (Baumeister and Leary, 1995). It is of critical importance for individuals to be accepted particularly by their parents since parental interactions play a significant role in their lives (Rohner, et al., 2012). IPARTheory asserts that individuals who have been rejected by their parents tend to develop distorted mental representations and it negatively impacts their ability to establish or sustain positive intimate relationships (Rohner, 2021). The related literature indeed has shown that parental rejection is associated with negative outcomes relating to interpersonal relationships, such as rejection sensitivity (Downey and Feldman, 1996; Ibrahim et al., 2015), fear of intimacy (Rohner et al., 2019), loneliness (Putnick et al., 2019), negative sense of identity (Bilen, 2013), interpersonal cognitive distortions (Epli et al., 2021), bullying/victimization (Stavrinides et al., 2017), social anxiety (Giaouzi and Giovazolias, 2015), interpersonal anxiety (Giotsa, Kyriazos and Mitrogiorgou, 2018), fewer social skills (Peixoto et al., 2022), and dissatisfaction in romantic relationships (Varan, 2014).

According to IPARTheory, people who have been rejected by their attachment figures tend to have difficulties processing social information, and as a result develop negative mental representations (Rohner, 2021). An individual's mental representation consists largely of cognitive generalizations about himself or herself, other individuals, and the experiential world that are derived from emotionally significant past and present experiences (Rohner, 2015). Accordingly, rejected individuals become emotionally unresponsive, meaning that they tend to shut down emotionally in order to protect themselves from further rejection (Rohner, 2017). Therefore, they engage in limited emotional involvement with others, which is often defensive and emotionally distant. Also, parents' negative reactions and feelings, such as anger, hostility, or resentment, often lead to aggression (Rohner, 2015), and thus individuals who have experienced rejection are more likely to exhibit anger and hostility (Rohner et al., 2019). Also rejected individuals are likely to either avoid close relationships altogether or hold on tightly to those around them. In other words, they may become dependent which is characterized by a need for constant reassurance and emotional support, as well as a strong desire for a positive response and behavioral bids (Khaleque and Rohner, 2011). On the other hand, they may become defensively independent which involves denying the need for warmth and support due to chronic rejection (Rohner, 2017). Defensive independence also results in counter-rejection, in which individuals who feel rejected rejected are more likely to have emotional instability since anger, negative self-feelings, and other consequences of perceived rejection tend to impair rejected individuals' ability to regulate emotions and cope effectively with stress (Rohner, 2015). Furthermore, rejected individuals are more likely to have impaired self-esteem and feelings of unworthiness. Hence, they have difficulty forming or maintaining warm and intimate relationships with others (Ansari and Qureshi, 2013). Besides, rejected individuals have an impaired self-adequacy and they view themselves in a negative light on a global basis (Rohner, 2015). Finally, they have a negative worldview, meaning that they tend to view people and the world as unfriendly, hostile, and dangerous in general (Khaleque and Rohner, 2012).

Mental representations influence how individuals perceive, interpret, and react to new experiences, including interpersonal relationships. As a result of their distorted mental representations, rejected individuals have impairments in social cognition, meaning that they have distorted beliefs and expectations about themselves, others, and the world (Rohner, 2021). Also, these negative mental representations are carried over into new interpersonal settings which creates a negative view of interpersonal relationships and disturbances in relating with others (Blatt et al., 1997). This is also congruent with the Interpersonal Theory which suggests that individuals who have chronically distorted representations of themselves and others are unlikely to satisfy their psychological needs in interpersonal relationships and that distorted cognitions result in misinterpretations of interpersonal situations, as well as a limited repertoire of social roles (Horowitz et al., 2006; Şimşek et al., 2021). As a result, distorted representations disrupt the ability to successfully interact with others (Critchfield and Benjamin, 2008). However, it is imperative to organize and elaborate data on interpersonal interactions accurately and objectively to maintain healthy interpersonal relationships (Horowitz et al., 2006). According to the IPARTheory, rejected individuals are unable to do that (Rohner, 2021).

Empirical evidence indicates that rejected individuals often seek, create, interpret, or perceive situations and relationships that correspond to their distorted mental representations, and tend to avoid situations that contradict their mental representations (Baldwin, 1992). For instance, rejected individuals are susceptible to perceiving hostility where none exists, to interpreting unintended acts of others as deliberate rejection, or to devaluing their self-worth despite opposite information (Rohner, 2021). In parallel with that, parental rejection was found to be associated with being sensitive to rejection in adulthood (Rohner et al., 2015). This is because individuals who have been rejected by their parents tend to develop rejection sensitivity, meaning they are disposed to anticipate rejection anxiously and angrily, perceive it readily, and overreact to it in ways that disturb their interpersonal relationships (Epli et al., 2021). In the literature, people with rejection sensitivity were found to exhibit affective and behavioral overreactions, including anger and hostility, withdrawal of support, jealousy, and inappropriate attempts to exert control over other people (Downey and Feldman, 1996). Additionally, people with rejection sensitivity respond to rejection in two different ways. If rejection-sensitive individuals perceive themselves as the source of rejection they have anxious rejection sensitivity, meaning that they display inward reactions such as anxiety and withdrawal in response to rejection; on the other hand, individuals who see others as the source of rejection, exhibit aggression, and anger when rejected (Aydu, Downey and Kim, 2001). In a study addressing the relationship between rejection sensitivity and interpersonal problems, it was found that rejection sensitivity with high anxious type was associated with socially avoidant and submissive interpersonal problems, whereas rejection sensitivity with high anger was associated with vindictive and domineering interpersonal problems (Cain et al., 2017). Rejection sensitivity has other negative relational implications, such as loneliness, low self-esteem, disruption of interpersonal relationships (Ibrahim et al., 2015), and separation anxiety, which is characterized by anxiety over separation from significant others, and timidity, which is characterized by a lack of assertiveness for fear of offending others (Otani et al., 2009). More specifically, in a multicultural study involving 13 countries, Rohner et al., (2019) found that adults' memories of both maternal and paternal rejection in childhood predicted their fear of intimacy and that distorted mental representations partially mediated the relationship between parental rejection and adult fear of intimacy (Rohner et al., 2019). The results of other relevant studies demonstrated that individuals with a fear of intimacy had difficulty sharing personal information, intimate feelings, or distressing emotions, which make it difficult for them to form close and intimate relationships with other people (Emmons and Colby, 1995; Pedro

and Emilia, 2015).

In another study, parental rejection was found to be positively correlated with loneliness, and distorted mental representations were found to mediate the relationship between parental rejection and loneliness (Putnick et al., 2019). Furthermore, a study conducted by Giotsa et al., (2018) examined the relationship between parental rejection and interpersonal anxiety. Results revealed that all parental rejection scores (hostility/aggression, indifference/neglect, and undifferentiated rejection by parents) were positively correlated with participants' total interpersonal anxiety score; on the other hand, the parental acceptance scale (warmth/affection by parents) was negatively correlated with their total interpersonal anxiety score. Consequently, they found that parental rejection was found to be positively associated with interpersonal anxiety in adult life.

Also, a study conducted by Saleem et al., (2019) investigated the relationship between parental rearing practices, interpersonal problems, and mental health among college students whose ages range between 15 and 20 years old. Researchers found that parental rejection was associated with mental health problems and that students' interpersonal difficulties mediated this relationship. Similarly, Petrowski et al., (2006) examined the effects of parental rearing behaviors on interpersonal problems among a general population whose ages range from 18 to 92. Results revealed a positive association between rejecting and controlling parental styles and interpersonal problems among participants. In addition, rejecting parental style was associated with all types of interpersonal problems including being vindictive, cold, socially avoidant, nonassertive, self-sacrificing, overly accommodating, intrusive, and domineering.

In another study, Paradis and Boucher, (2010) examined the relationship between child maltreatment and interpersonal problems in adult couple relationships. Researchers have found that females with a history of emotional neglect have couple intercouple problems including being nonassertive, distant, and self-sacrificing. Also, a history of physical abuse in men and a history of emotional abuse in females was found to be related to having intercouple problems including control, manipulation, aggression, and attempts to change partners. Furthermore, a study was conducted to investigate the mediating role of mentalization and emotion regulation difficulties in the relationship between parental acceptance-rejection and interpersonal problems among participants whose age ranges from 18 to 35 (Çini, 2022). Results indicated that maternal rejection and interpersonal difficulties were partially mediated by mentalization and fully

mediated by emotion regulation difficulties.

Lastly, another study investigated the relationship between parental acceptancerejection and interpersonal problems within the framework of IPARTheory among 51 patients with conversion disorder and 50 patients with general medical conditions (Tariq and Kauasr, 2015). The findings of the research have shown that patients with conversion disorder significantly had more interpersonal problems than those with general medical conditions. The results also indicated that perceived coldness/lack of affection was significantly correlated to nonassertive and cold/distant behaviors; perceived indifference/neglect was significantly correlated to dominating and selfsacrificing behaviors; perceived aggression/hostility was significantly correlated to dominating behaviors, and perceived undifferentiated rejection was significantly correlated to domineering and self-sacrificing behaviors in patients with conversion disorder. It is, however, necessary to obtain information regarding the non-clinical sample as the previous study used a psychiatric sample.

In addition to parental rejection (Tariq and Kauasr, 2015; Çini, 2022), selfdifferentiation has also been found to be related to interpersonal problems in the literature (Skowron et al., 2009). As a fundamental concept in Bowen's Family Systems Theory, self-differentiation will be discussed in the following section.

1.3. Differentiation of Self

Bowen's Family Systems theory (1976) is one of the most widely used approaches in the field of family therapy. From a systemic and multigenerational perspective, the Bowen Family Systems theory provides a comprehensive explanation of individual functioning (Skowron, 2000). The central premise of the Family Systems theory is that psychological health and emotional maturity are achieved through the resolution of all emotional issues within the family of origin (Calatrava et al., 2021). Accordingly, the family is an emotional system characterized by varying levels of emotional attachments that influence the functioning of an individual across generations (Hosseinizadeh, 2014). In other words, patterns of social interaction and adjustment are passed down from generation to generation, and children's social, emotional, and cognitive development is influenced by the relationship pattern of their parents (Lampis et al., 2019). Family system patterns illustrate the extent to which intimacy between members and the development of individuality is encouraged. Accordingly, optimal family differentiation is associated with a high level of tolerance of individuality and intimacy, whereas a family differentiated poorly is associated with a low degree of tolerance of individuality and intimacy (Lawson and Brossart, 2001; Lampis et al., 2019).

Differentiation of the family has also a strong influence on the individuals' selfdifferentiation, which is a universal requirement and essential to the development of a distinct self (Knerr and Bartle-Haring, 2010). Thus, one of the most important patterns for determining the quality of family functioning and passing down from generation to generation is the differentiation of self (Rovers and Psych, 1998; Lawson and Brossart, 2001). Self-differentiation is more likely to occur in a family where low anxiety is present, differentiation among family members is evident, and family connections are strong (Kerr and Bowen, 1988). However, if family members are not able to regulate their anxiety and project it onto their children, it results in lower levels of self-differentiation and poor functioning. Therefore, an individual's ability to differentiate is greatly influenced by how their nuclear families manage anxiety associated with the balance between separateness and togetherness (Bowen, 1978). It is known that warmth-communication forms of parenting are positively related to the self-differentiation of parents, whereas criticism-rejection forms of parenting were negatively related to the self-differentiation of parents (Mozas-Alonso, Oliver and Pedro, 2022). Also, it is demonstrated that how parents handle their own emotions in interactions with their children influences children's levels of self-differentiation (Schwartz, Thigpen and Montgomery, 2006). Accordingly, the emotion-coaching style which enables children to express their emotions and learn to manage them was associated with higher levels of self-differentiation among participants; whereas disapproving parenting style, which involves punishing children for expressing their emotions, was associated with lower levels of self-differentiation among participants (Schwartz et al., 2006). On the other hand, an open family environment that fosters self-expression and emotional closeness facilitates the development of selfdifferentiation (Freeman and Almond, 2012). In order words, individuals who consider their parents to be accessible, responsive, and non-judgmental are more likely to be comfortable sharing their opinions within the family as well as in other social settings which in turn facilitate the development of a healthy ego and independent thinking (Freeman and Almond, 2012). On the contrary, lower levels of differentiation result in anxiety caused by fear of evaluation within the family and in social situations (Peleg, 2002).

As a fundamental concept in Bowen's theory, differentiation of self indicates selffunctioning in which individuals are capable of developing a degree of independence appropriate to their age and of forming satisfying relationships with others (Lampis et al, 2019). And the process of differentiation is typically completed by early adulthood when an individual has left their family of origin (Kerr and Bowen, 1988). The concept of self-differentiation is based on the premise that the capacity for autonomy, as well as emotional connection, are necessary components of personal adjustment and maturation (Jenkins et al., 2005). Since everyone requires both individuality and togetherness, the respective processes of autonomy and interdependence are crucial to the development of individuals. Additionally, the ability to balance them depends on self-differentiation (Skowron et al., 2009).

1.3.1. Gender Differences in Self-Differentiation

In studies comparing the levels of differentiation between men and women, results have been inconsistent. Some studies indicate that there are no gender differences in self-differentiation levels (Alaedein, 2010; Elieson and Rubin, 2001), while other studies indicate that females have lower levels of differentiation than males (Oliver, Aries and Batgos, 1989; Sadeghi, Barahmand and Rosannia, 2020). Gender differences found in some studies may be a reflection of parenting practices based on gender roles, in which girls are raised to be more relationship-oriented, while boys are raised to be more independent. As a result, boys are encouraged to develop their identities, to stand up for themselves, and to fight for their rights with greater assertiveness, while girls are encouraged to maintain close emotional bonds with their families (Sadeghi et al., 2020). It may also be due to the greater involvement and intrusion of mothers into the lives of their daughters as opposed to their sons (Olver, Aries and Batgos, 1989). It is because daughters are easier for mothers to identify with than sons, since sons are perceived to be the male opposites. As a result of the disidentification between mothers and boys, boys are encouraged to establish more rigid ego boundaries (Olver et al., 1989).

1.3.2. Subcomponents of Self-Differentiation

In the literature, self-differentiation is conceptualized as a combination of intrapsychic and interpersonal traits. At the intrapsychic level, differentiation of self refers to the ability to differentiate between thinking and feeling systems and to function on an emotional-rational level in a balanced manner; at the interpersonal level, it refers to the ability to form intimate emotional relationships with others while also maintaining some level of autonomy (Skowron et al., 2003).

The intrapsychic dimension has two subcomponents namely "emotional reactivity" and "taking I-position". Emotional reactivity refers to the tendency to respond emotionally under stressful conditions (Choi and Murdock, 2017). Individuals with a high degree of differentiation are less emotionally reactive; meaning, when stressful events occur, they can control their emotions, shift their attention, and think logically to cope with them (Kerr and Bowen, 1988). In contrast, individuals with poor differentiation tend to operate primarily on an emotional level; their thoughts are often influenced or determined by their emotions and a high level of anxiety and stress tends to accompany their reactions (Kerr and Bowen, 1988). Also, poorly differentiated individuals devote much of their energy to experiencing and expressing their emotions, and as a result, they have difficulty remaining calm in the face of other people's emotions (Peleg, 2002). Emotional reactivity can also be regarded as a maladaptive affective regulation in which individuals are exaggerating negative feelings in order to gain support from others and ensure their accessibility (Wei et al., 2005).

Another subcomponent of the intrapsychic dimension is taking I-position which refers to the capacity to develop a clear sense of self and stick with one's own opinions and convictions (Choi and Murdock, 2017). Individuals with a high degree of differentiation can adopt an I-position, which means that they stick to their own opinions and values regardless of external pressure, display healthy independence, and keep an inward focus (Tuason and Friedlander, 2000). On the other hand, individuals with low differentiation may struggle to separate themselves from other people, and they often seek the perspective of others to define their feelings, interpret their experiences, and formulate their opinions about issues (Choi and Murdock, 2017). Therefore, less differentiated individuals are highly dependent on others emotionally and are unable to think, feel, and act independently (Bowen, 1978). On the contrary, those who are more differentiated are capable of taking the 'I-position' in relationships (Bowen, 1978). Also, individuals who take an I-position can experience emotional intimacy without being afraid of conflation (Skowron and Friedlander, 1998). Furthermore, individuals who adopt an I-position are capable of remaining calm in social and interpersonal conflicts and resolving disputes effectively, whereas poorly differentiated individuals are prone to overreacting in those situations (Lampis et al, 2017).

The second dimension of self-differentiation is the interpersonal dimension. The interpersonal dimension has two subcomponents namely "emotional cut-off" and "emotional fusion". Low-differentiated individuals tend to fuse with or cut off from others. Fusion with others is defined as being overly emotionally involved in significant relationships (Lampis et al., 2017). Fused individuals are unable to establish clear boundaries with others, are incapable of making decisions, are unwilling to accept different viewpoints, and have difficulty exchanging self with others (Skowron et al., 2003). There is a tendency for them to become overwhelmed when they experience separation from significant others, either real or perceived (Bowen, 1978). To cope with relationship anxiety, fused individuals adopt other people's values, and attitudes, and also try to meet other people's needs to the extent that they sacrifice their own needs and desires (Skowron and Schmitt, 2003). Also, they tend to be preoccupied with receiving approval and acceptance from others (Skowron et al., 2003). Consequently, they are dependent on others emotionally and are unable to think, feel, and act independently (Bowen, 1978).

Another subcomponent of the interpersonal dimension is emotional cutoff which is characterized by the tendency to suppress feelings and maintain a psychological distance in order to cope with relationship anxiety (Wei et al., 2005). It also indicates a tendency to reject any emotional attachment to the family or partners due to fear of engulfment (Wei et al., 2005). The emotional cut-off can be regarded as a form of maladaptive emotional regulation, which involves suppressing negative emotions and increasing distance from people to avoid anxiety triggered by their proximity (Choi and Murdock, 2017). It also indicates a refusal to resolve an unresolvable issue regarding parental attachment (Kerr and Bowen, 1988). Additionally, there is an exaggerated sense of independence and autonomy displayed by those who are emotionally cut-off which is because they tend to get anxious when they are emotionally close to someone important to them (Skowron et al., 2003). On the contrary, highly differentiated individuals are comfortable with intimacy while maintaining their independence, and they do not rely on using fusion or cut-off as methods of regulating their anxiety in relationships (Skowron et al., 2003). To sum up, the interpersonal dimension enables individuals to experience greater emotional intimacy without being afraid of abandonment or being fused with others (Skowron and Friedlander, 1998).

According to Bowen (1978), differentiation of self is very critical to the healthy

functioning of individuals. In the related literature, studies indicate that higher levels of self-differentiation are associated with fewer psychological symptoms and distress (Miller, Anderson and Keala, 2004), higher psychological well-being (Karababa, Mert and Çetiner, 2018), better coping (Murdock and Gore, 2004), better social problemsolving (Skowron, Wester and Azen, 2004), better adjustment to the university life (Mert and Çetiner, 2018; Skowron et al., 2004), better social adjustment (Hosseinizadeh, 2014; Jenkins et al., 2005), higher levels of self-esteem (Chung and Gale, 2006), better mental health (Sandage and Jankowski, 2010), greater interpersonal health and less interpersonal problems (Skowron et al., 2009; Wei et al., 2005). However, there have not been too many studies that have examined the impact of self-differentiation on interpersonal problems. Therefore, as part of this study, how self-differentiation impacts interpersonal problems will be examined, and their relationships will be elaborated further in the following section.

1.3.4. The Relationship Between Self-Differentiation and Interpersonal Problems

Healthy relationships with others are characterized by having a satisfying relationship with them as well as the ability to establish intimacy with them (Segrin and Taylor, 2007). According to Bowen (1978), differentiating oneself from one's family of origin is crucial for maintaining intimate and mature relationships **b**ecause an individual's level of maturity and independence plays an important role in maintaining intimacy as well as autonomy within interpersonal relationships.

Self-differentiation enables individuals to reach an optimal level of intimacy and independence and maintain a balance between separateness and connectedness (Skowron et al., 2009). Thus, it is important for developing intimate relationships while sustaining independence. Accordingly, self-differentiated individuals can establish close connections with other people without difficulty, on the contrary, undifferentiated people tend to feel anxiety and discomfort in intimate relationships, which makes it difficult for them to engage in close emotional relationships with other people and demonstrate empathy and altruism (Johnson and Smith, 2011).

Furthermore, self-differentiated people are able to set clear boundaries with others, have a clear sense of self, and stick to their own opinions and beliefs even under pressure (Tuason and Friedlander, 2000). Therefore, they are less likely to compromise their own needs and desires in order to satisfy other people (Skowron and Schmitt, 2003) and they are less dependent on the approval of others (Skowron et al., 2003).

On the other hand, people who have difficulty setting or maintaining boundaries with others may not be able to communicate their needs and desires or prioritize them over those of others (Gurtman, 1996). Individuals with lower levels of differentiation also struggle to adopt a sense of self within their relationships and they rely on the opinions and values of others in order to make sense of the world (Choi and Murdock, 2017). Besides, individuals who have such difficulties experience interpersonal problems including being intrusive/needy, self-sacrificing, and overly accommodating (Akyunus, 2012).

Furthermore, differentiated people are able to regulate their emotions, remain calm in interpersonal conflicts, and solve disputes in an effective way. In contrast, when faced with emotional distress, undifferentiated people tend to fuse with others, emotionally cut them off from others, or display emotionally reactive responses toward them. As a result, they have difficulties regulating their emotions which in turn negatively impacts their interpersonal relationships (Güler and Karaca, 2020; Choi and Murdock, 2017). In the related literature, studies indicate that lower levels of self-differentiation are related to both individual and interpersonal functioning including codependency (Lampis et al., 2017), separation anxiety (Peleg and Yitzhag, 2011), social anxiety (Peleg and Zoabi, 2014), rumination and emotion regulation difficulties (Çiğdem and Karaca, 2020), trait and state anxiety (Duch-Ceballos, Pece and Skowron, 2020), relationship violence (Skowron and Platt, 2005), interpersonal conflict, depression (Choi and Murdock, 2017), marital dissatisfaction (Peleg, 2008), maladaptive schemas (Langroudi, Bahramizadeh and Mehri, 2011), interpersonal problems (Wei et al., 2005; Skowron et al., 2009; Idrees and Malik, 2022).

Even though the studies above examined the relationship between self-differentiation and a variety of interpersonal outcomes, very few of them focused on the role of selfdifferentiation in interpersonal problems. A relevant study investigated the mediating role of emotional reactivity and emotional cutoff among attachment, negative mood, and interpersonal problems among college students (Wei et al., 2005). The findings revealed that emotional reactivity was the mediator of the relationship between attachment anxiety, negative mood, and interpersonal problems, whereas emotional cutoff was the mediator of the relationship between attachment avoidance, negative mood, and interpersonal problems. Also, emotional reactivity and emotional cutoff accounted for 36% of the variability in negative mood; while attachment, emotional reactivity, and emotional cutoff accounted for 75% of the variability in interpersonal problems (Wei et al., 2005). Similarly, A more recent study investigated the mediating role of emotional reactivity and emotional cutoff in the relationship between attachment styles and interpersonal problems (Idrees and Malik, 2022). The results of the study revealed that emotional reactivity positively correlated with nonassertiveness and emotional cutoff positively correlated with being nonassertive, cold, self-sacrificing, and intrusive/needy. Also, emotional cutoff and emotional reactivity mediated the relationship between attachment styles and interpersonal problems (Idrees and Malik, 2022).

Another study conducted by Skowron et al., (2009) examined the long-term relationship between differentiation of self, and psychological and relational wellbeing in a sample of college students ranging in age from 18 to 22. It was found that those with greater differentiation of self, characterized by lower emotional reactivity, less emotional cut-off, lower fusion with others, and better capacity to take an Iposition were less likely to experience psychological symptoms and interpersonal problems until the end of the semester than those with lower differentiation of self. More specifically, it was found that participants who were emotionally cutoff from others were more likely to try to control others or to remain distant and aloof, and have difficulty maintaining long-term relationships with them. Also having greater emotional reactivity was associated with greater aggression and insensitivity in relationships, characterized by irritability, anger, and little concern for other people's well-being. Finally, participants with higher levels emotional reactivity and fusion with others displayed difficulties in keeping healthy relationship boundaries, intrusiveness, neediness, and found it difficult to spend time alone (Skowron et al., 2009).

Additionally, Choi and Murdock (2017) conducted a study in which they examined the relationship between anger expression and dimensions of differentiation of self, including emotional reactivity, and emotional cutoff, as well as interpersonal conflict and depression, using a sample of college students. The findings revealed that students who experience difficulty regulating their emotions tend to express anger toward other people and report more conflict with them than those with lower levels of emotional reactivity. As a result, anger expression-out was found to mediate the relationship between emotional reactivity and interpersonal conflict. Additionally, it was found that anger expression-in mediated the relationship between depression and emotional cutoff. Lastly emotional cut-off and taking the I-position were the most powerful predictors of students' well-being (Choi and Murdock, 2017). Even though several studies examined the impact of self-differentiation on interpersonal problems, only one study directly addressed the role of all self-differentiation dimensions (i.e., emotional reactivity, I-position, fusion, and emotional cutoff) in interpersonal problems (Skowron et al., 2009). Therefore, more information is needed regarding the impact of all self-differentiation dimensions on interpersonal problems.

1.4. Importance of the Present Study

Having healthy intimate relationships play an important role in the well-being of individuals (Rudolph et al., 2016). As a person moves from adolescence into adulthood, establishing intimate and mature relationships becomes especially important (Skowron et al., 2009). However, having interpersonal difficulties has a negative effect on establishing and sustaining healthy relationships and constitutes subjective distress in individuals. Given that emerging adults represent a critical developmental stage during which intimate relationships become increasingly important, this research will shed light on how parental acceptance-rejection and selfdifferentiation contribute to the interpersonal functioning of emerging adults. Even though some studies investigated the role of self-differentiation on interpersonal problems (Skowron et al., 2009), to our knowledge, this relationship has not been examined with a Turkish sample yet. Given that different cultural values place varying emphasis on independence, interdependence, personal autonomy, and emotional connectivity (Skowron et al., 2003) it is imperative to understand how selfdifferentiation impacts the interpersonal problems of individuals within a Turkish sample. Therefore, this study addresses a notable gap in the literature. Besides, even though some studies investigated the relationship between parental rejection and selfdifferentiation on interpersonal problems within IPARTheory, they did it with a psychiatric sample and didn't evaluate the impact of different dimensions of parental rejection on interpersonal problems (Tariq and Kauasr, 2015; Çini, 2022). Thus, this study will contribute to the limited research being conducted in this area by providing further insight into how each dimension of parental rejection independently contributes to interpersonal problems. Consequently, this study might provide a contribution to further strengthening the foundations of IPARTheory and Bowen's Theory as they both suggest that the human mind is the result of a matrix of relationships within the family and that interpersonal problems result from disturbances in these relationships. Lastly, to our knowledge, these three variables,

which are parental rejection, self-differentiation, and interpersonal difficulties, have not been examined together before.

1.5. Aim and Hypotheses of the Present Study

Based on all the above, the purpose of this study is to investigate the role of perceived parental acceptance-rejection and self-differentiation on emerging adults' interpersonal problems in the light of the IPARTheory and Bowen's Family Systems Theory. The hypotheses were stated as follows:

Hypothesis 1: It was hypothesized that total parental rejection would positively predict interpersonal problems.

Hypothesis 2: It was hypothesized that parental rejection subscales which are (a) coldness/lack of affection, (b) hostility/aggression, (c) perceived neglect/indifference, and (d) undifferentiated rejection from parents would positively predict interpersonal problems.

Hypothesis 3: It was hypothesized that total self-differentiation would negatively predict interpersonal problems.

Hypothesis 4: It was hypothesized that self-differentiation subscales which are (a) emotional reactivity, (b) emotional cutoff, (c) fusion with others would positively, and (d) I-position would negatively predict interpersonal problems.

CHAPTER 2: METHOD

2.1. Participants

The sample of the present study consisted of 256 participants. Specifically, 128 participants (50.0%) were females, and 128 participants (50.0%) were males. The ages of these participants ranged from 18 to 29 ($M_{age} = 22.88$ years, SD = 3.61). Moreover, 152 participants (59.4%) were bachelor's students, 92 participants (35.9%) were master's students, and 12 participants (4.7%) were PhD students. As for where they live, 155 (60.5%) participants reported that they were living with their parents, and 101 (39.5%) participants reported that they were not living with their parents at the time of data collection. Regarding income levels of the participants, 70 participants (27.3%) reported having a low level of income, 128 participants (50%) reported having a middle level of income, and 58 participants (22.7%) reported having a high level of income. As for relationship status, 15 participants (5.9%) were married, 89 participants (34.7%) had a romantic relationship, and 152 participants (59.4%) had no romantic relationship during the period of data collection. Concerning sibling numbers, 31 participants (12.1%) were the only-child, 130 participants (50.8%) had one sibling, 49 participants (19.1%) had two siblings, and 46 participants (18%) had three or more siblings. Regarding the relationship status of participants, 15 participants (5.9%) were married, 89 participants (34.7%) had a romantic relationship, and 152 participants (59.4%) had no romantic relationship during the period of data collection. Regarding participants' parents' education levels, 59 of the mothers (23%) were illiterate, 93 (36.13%) graduated from elementary/secondary school, 40 (15.6%) graduated from high school, 10 (3.9%) graduated from university 64 (25%). As for fathers, 4 of them (1.6%) were illiterate, 85 of them (33.2%) graduated from elementary/secondary school, 70 of them (27.3%) graduated from high school, and 97 of them (37.9%) graduated from university. The demographic characteristics of the participants was provided in Table 1.

Variables	Levels	Ν	%	М	SD
Age				22.88	3.61
Gender	Female	128	50.0		
	Male	128	50.0		
Grade	Bachelor's Students	152	59.4		
	Master's Students	92	35.9		
	PhD Students	12	4.7		
People Living with	Family	155	60.5		
	Other than family	101	39.5		
Socioeconomic Status	Low	70	27.3		
	Middle	128	50.0		
	Upper	58	22.7		
Number of Siblings	Only child	31	12.1		
	One sibling	130	50.8		
	Two siblings	49	19.1		
	Three or more siblings	46	18		
Father Education	Illiterate	4	1.6		
	Elementary/Secondary	85	33.2		
	High School	70	27.3		
	University	97	37.9		
Mother Education	Illiterate	59	23		
	Elementary/Secondary	93	36.1	3	
	High School	40	15.6		
	University	64	25.0		
Relationship Status	Married	15	5.9		
	Currently in	89	34		
	a romantic relationship				
	Currently not in	152	59		
	a romantic relationship				

Table 1. Demographic Characteristics of the Participants

2.2. Measures

In the present study, the Demographic Information Form (see Appendix C), Parental Acceptance Rejection Short Form (PARQ; see Appendix D), Inventory of Interpersonal Problems Short Version (IIP-32; see Appendix F), and Self-Differentiation Inventory (DoS; see Appendix G) were used.

2.2.1. Demographic Information Form

Demographic questions include gender, age, grade level, number of siblings, relationship status, perceptions of socioeconomic level, educational level of their parents, whether the individual lives with their parents or not, whether they have experienced a loss of a parent, whether their parents are divorced or married, whether they receive psychotherapy, and whether they have a psychiatric diagnosis.

2.2.3. Parental Acceptance Rejection Questionnaire (PARQ-Short Form)

The Parental Acceptance Rejection Questionnaire (PARQ) was developed by Rohner (1978) as a self-report instrument to assess individuals' perceptions of how much they experienced parental acceptance or rejection during their childhood. It is a short form of the Adult Parent Acceptance-Rejection Scale, which originally had 60 items. To use this scale, the relevant permissions were obtained from the Rohner Research Center (see Appendix D for Copyright Statement).

The responses are taken over a four-point Likert-type scale ranging from 1 to 4 (1 for "Never true" and 4 for "Almost always true"). In its short form, the scale consists of 48 items: 24 for the mother's form and 24 for the father's form. The scale has four subscales namely warmth/affection (e.g., "Was really interested in what I did" (warmth/affection), indifference/neglect (e.g., "S/he used to ignore me when I asked for her help"), hostility/aggression (e.g., "Punished me severely when s/he was angry"), and undifferentiated rejection ("S/he made me feel unloved when I misbehaved"). To determine the total rejection score, the warmth/affection scale score is reversed and all scores are summed together. In order to obtain a measure of parental rejection, the maternal and paternal rejection from parents, with possible scores ranging from 24 (extreme perceived acceptance) to 96 (extreme perceived rejection). In the original scale, both mother and father forms of PARQ had high internal reliability, with Cronbach's alpha coefficients ranging from 0.86 to 0.99. An adaptation

of the short form of the scale in Turkish was made by Dedeler et al., (2017). For the mother form, the internal consistency ranged from 0.75 to 0.88, while for the father form, it was between 0.85 and 0.95. As a whole, the internal consistency of the scale was 0.92. The test-retest reliability for the mother form was 0.78, while the test-retest reliability for the father form was 0.95. In this study, the overall Cronbach's alpha coefficient was found as 0.94 both for the mother and the father forms. Specifically, the internal consistency of the subscales of the mother form was found to be 0.81 for Hostility/Aggression, 0.79 for Indifference/Neglect, 0.83 for Undifferentiated Rejection, and 0.89 for Warmth/Affection. Moreover, the internal consistency of the subscales of the father form was found to be 0.85 for Hostility/Aggression, 0.85 for Indifference/ Neglect, 0.85 for Undifferentiated Rejection, and 0.90 for Warmth/Affection.

2.2.4. Inventory of Interpersonal Difficulties (IIP-32)

Interpersonal Difficulties Inventory (IIP; Horowitz et al., 2000) is a 32-item self-report instrument that measures interpersonal problems and interpersonal distress. Participants respond to each item using a 5-point Likert-type scale ranging from 1 (not at all) to 5 (extremely). High scores on the total scale and subscales indicate increased levels of interpersonal distress and certain interpersonal difficulties. IIP was initially a 127-item scale developed by (Horowitz et al., 1988) with the participation of individuals seeking psychotherapy. Later, it was revised, and the number of items was reduced to 64 items (Alden et al., 1990). The short version of the inventory (IIP-32) was constructed by Horowitz et al., (2003) to reduce the burden of time while maintaining its psychometric structure. Also, IIP has circumplex properties that explain interpersonal behavior along the dimension of affiliation or nurturance and the dimension of control or dominance. Items are corresponding to interpersonal excesses (i.e., behaviors that "you do too much") and inhibitions (i.e., behaviors that are "hard for you to do"). It has an overall score as well as eight subscale scores: Domineering/Controlling (i.e., overly controlling or manipulative in interpersonal interactions), Vindictive/ Self-Centered (i.e., frequently being egocentric and hostile towards others), Cold/ Distant, (i.e., showing little affection toward others or having little connection with them); Socially Inhibited/Avoidant, (i.e., being socially avoidant and anxious, as well as finding it difficult to approach others); Nonassertive, (i.e., difficulty communicating one's needs to other people); Overly having

Accommodating/Exploitable (i.e., being gullible and easily exploitable by people); Self-sacrificing/ Overly Nurturant, (i.e., being overly generous, trusting, caring, and permissive toward others); and Intrusive/Needy, (i.e., being imposing one's needs on other people and having difficulty respecting the personal boundaries of them). The Cronbach's alpha coefficient of the original scale was 0.93 and the test-retest reliability was 0.78. Additionally, the internal consistency of the subscales ranges from 0.68 to 0.87 (Horowitz et al., 2003). The Turkish adaptation of the scale was made by Akyunus and Gençöz (2016), and it was determined that the Turkish version had the same item number and factor structure as the original version. The internal consistency coefficient for the total Turkish form was 0.86 and the test-retest reliability was 0.78. The internal consistency values of the subscales in the Turkish form were 0.70 for Domineering/Controlling, 0.69 for Intrusive/Needy, 0.76 for Self-Sacrificing, 0.66 for Overly Accommodating, 0.76 for Non-Assertive, 0.84 for Socially Avoidant, 0.69, 0.78 for Cold-Distant, and 0.78 for Vindictive/Self-Centered (Akyunus and Gençöz, 2016). In this study, Cronbach's alpha coefficient was found as 0.88 for the total scale. The internal consistency values of the subscales were 0.67 for Overly Accommodating, 0.86 for Socially Avoidant, 0.71 for Intrusive/Needy, 0.79 for Vindictive/Self-centered, 0.79 for Non-assertive, 0.80 for Cold/Distant, 0.77 for Self-Sacrificing, and 0.74 for Domineering/Controlling.

2.2.5. Differentiation of Self-Inventory (DoS)

The Differentiation of Self Inventory was developed by Skowron and Friedlander (1998) and adapted to Turkish by Işık and Bulduk (2015). It is a measure of differentiation from the family of origin. It is based on a 6-point Likert-type scale ranging from 1 to 6 (1 for not at all characteristic of me and 6 for extremely characteristic of me). It consists of 20 items and four subscales namely emotional reactivity, emotional cutoff, I-position, and fusion with others. Higher self-differentiation is characterized by lower emotional cutoff, emotional reactivity, fusion with others; and higher I-position. Reverse-coding is performed on 14 items (items 1, 2, 3, 4, 5, 7, 8, 9, 14, 15, 16, 17, 18, and 20) and all the items are summed to obtain the total differentiation score of the participants. Higher scores in all subscales and the total score indicate higher levels of self-differentiation.

In the Turkish adaptation study conducted (Işık and Bulduk, 2015), Cronbach's alpha internal consistency coefficient was found as 0.81 for the whole scale, 0.78 for the

emotional reactivity subscale, 0.75 for the I-position subscale, 0.74 for the emotional cutoff subscale, and 0.77 for the fusion with others subscale. In the present study, Cronbach's alpha coefficient of 0.83 was found for the whole scale, 0.80 for the emotional reactivity subscale, 0.73 for the I-position subscale, 0.72 for the emotional cutoff subscale, and 0.78 for the fusion with others subscale.

2.3. Procedures

The study was approved by the ethical committee of the Izmir University of Economics before the data collection period (see Appendix A). The online questionnaires were prepared using an online survey website (Google Forms) after approval. Then the link for the survey was shared via social media platforms such as Instagram, Telegram, and WhatsApp. The first step in collecting data was to ask participants to approve their informed consent (see Appendix B), which includes the objective of the study, the procedures of the study, a statement about voluntary participation, as well as an explanation of their right to withdraw from the study at any time. Those participants who affirmed voluntary participation completed the Demographic Information Form, Parental Acceptance-Rejection Scale (PARQ) - Short Form, Interpersonal Problems Scale (IIP-32), and Self-Differentiation Scale (DoS). Following the completion of the questionnaire, participants were informed about the details of the study and the e-mail address of the researcher was provided for their further questions. The questionnaire took approximately 17 minutes to complete.

2.4. Statistical Analysis

IBM SPSS Statistics 25 was used in the statistical evaluation of the data. First of all, the data collected from the participants were coded and entered into the SPSS program. In the beginning, data was collected from a total of 336 participants. However, there were exclusion criteria including being younger than 18 years old or older than 29 years old, having divorced parents, having experienced a parent loss, having a psychiatric diagnosis, and taking psychotherapy. Consequently, 10 participants who have experienced a loss of a parent, 8 participants who did not meet the age criteria, 16 participants whose parents are divorced, and 34 participants who have a psychiatric diagnosis and receive psychotherapy were excluded from the study. Additionally, 12 participants were identified as outliers and excluded from the study. As a result, 256 participants were included in the final analysis. Data obtained from 256 participants were examined for normality assumptions by calculating skewness-kurtosis

coefficients. The results revealed that the skewness and kurtosis coefficients ranged from -2.0 to +2.0. Therefore, it was determined that variables were not deviating from the normal distribution (Field, 2009). The results were reported in the results section. Before the analysis process, scale and subscale scores were created by performing the necessary reverse coding. The Independent Samples *t*-test was performed to evaluate whether parental rejection, interpersonal problems, and self-differentiation differed according to gender and living arrangement. Given that the study variables indicate a normal distribution, Pearson Product Moment Correlation Coefficients were performed to examine the relationship between parental rejection, interpersonal problems, self-differentiation, and the age of the participants Lastly, Multiple Linear Regression Analyses were conducted to examine the role of parental rejection and self-differentiation on interpersonal problems.

CHAPTER 3: RESULTS

This chapter contains the findings obtained from the statistical analyses carried out within the scope of the study's objectives. The first step will be to present the normality assumptions and descriptive statistics of the study variables. After that, the demographic analysis of the study variables will be presented. This will be followed by an analysis of the bivariate correlations among those variables. In the final step, as a main analysis, a multiple regression analysis, which examines the effect of parental rejection and self-differentiation on the interpersonal problems of participants, will be presented.

3.1. Preliminary Analysis

3.1.1. Normality Assumptions of the Study Variables and Descriptive Statistics of the Scales

Firstly, skewness-kurtosis coefficients were calculated to test the normality assumptions. The results were presented in Table 2.

Variables	Skewness	Kurtosis
1. Parental Rejection	1.050	.842
2. Self-Differentiation	362	.114
3. Interpersonal Problems	.354	.132

Table 2. Normality Assumptions Regarding the Total Scores of the Study Variables

As shown in Table 2, the skewness-kurtosis coefficients, which were used as statistical indexes to test whether the variables in the study were normally distributed (ranged between -2.0 and +2.0 for each of the studied variables). Therefore, the values within the range of ± 2.0 provided an acceptable assumption of normality (Field, 2009). To ensure that the fundamental assumptions of linearity and homoscedasticity were met for regression analysis, the linearity assumption was evaluated through scatter plots of the variables, and the homoscedasticity assumption was assessed using scatter plots of residuals. It was concluded that both assumptions of linearity and homoscedasticity were met, suggesting a linear relationship between the dependent variable and each independent variables. Additionally, means and standard deviations were calculated for study variables: Parental rejection (with its subscales including coldness, hostility,

neglect, and undifferentiated rejection), self-differentiation (with its subscales including emotional reactivity, I-position, fusion with others, emotional cutoff), and interpersonal problems (see Table 3).

Variables	Ν	M	SD	Min.	Max.	
1. Parental Rejection	256	40.27	11.53	24	82.5	
2. Coldness/Lack of Affection	256	15.34	4.84	8	28.5	
3. Hostility/Aggression	256	9.21	3.12	6	21	
4. Neglect/Indifference	256	10.16	3.19	6	20	
5. Undifferentiated Rejection	256	5.55	2.12	8	27	
6. Self-Differentiation	256	78.76	15.47	33	114	
7. Emotional Reactivity	256	19.06	6.18	5	30	
8. I-Position	256	19.13	5.71	5	30	
9. Fusion with Others	256	13.61	5.65	5	30	
10. Emotional Cutoff	256	12.62	5.27	5	29	
11. Interpersonal Problems	256	72.99	17.57	32	132	

Table 3. Descriptive Statistics of the Study Variables

3.1.2. Findings Regarding the Analysis of the Study Variables According to Gender An independent samples *t*-test was conducted to determine whether there were significant gender differences in the mean scores of participants' interpersonal problems, self-differentiation, and perceived rejection from their parents. The results were presented in Table 4.

Table 4. *t*-test Results for the Analysis of the Total Scores of Variables Considered in the Study According to the Gender

		N M		SD	df	t	р
Interpersonal	Female	128	73.296	16.099	254	0.277	.782
Problems							
	Male	128	72.687	18.99			
Parental	Female	128	81.132	24.201	254	0.403	.687
Rejection							

Table 4 (Continued). *t*-test Results for the Analysis of the Total Scores of Variables Considered in the Study According to the Gender

	Male	128	79.968	21.965		
C - 16	E 1 .	100	74.402	15 270	254 4.502	. 001***
Self-	Female	128	74.492	15.378	254 -4.593	<.001***
Differentiation						
	Male	128	83.046	14.407		

Note. * p < .05, ** p < .01, *** p < .001

As can be seen in Table 4, the interpersonal problems of the participants didn't show a statistically significant difference according to gender, t(254) = -0.277, p = .782. Also, there was no statistically significant difference between the parental rejection levels of the participants according to gender, t(254) = -0.403, p = .687. However, the self-differentiation levels of the participants showed a statistically significant difference according to gender, t(254) = -4.593, p = .001. When the mean scores were evaluated to see the source of the significant difference, it was seen that the selfdifferentiation levels of males (M = 83.04, SD = 14.40) were higher than females (M= 74.49, SD = 15.37). The results indicated that males reported higher levels of selfdifferentiation than females, whereas there was no difference in terms of their reports on interpersonal problems as well as their perception of parental rejection. Given that previous research indicated no difference between males and females in terms of total interpersonal problems scores (e.g., Poole, Dobson, and Pusch, 2018) which was our outcome variable, and we did not find any significant difference of gender on interpersonal problems in our study either, we did not include gender as an additional predictor or a control variable to our main regression analysis.

3.1.3. Findings Regarding the Analysis of the Study Variables According to Living Arrangement

An independent samples *t*-test was conducted to determine whether there were significant differences in the mean scores of participants' interpersonal problems, self-differentiation, and perceived rejection from their parents according to their living arrangements. The results were presented in Table 5.

		Ν	М	SD	df	t	р
Interpersonal	Living	155	74.09	17.184	254	1.247	.534
Problems	with						
	Family						
	Other	101	71.29	18.107			
	than						
	Family						
Parental	Living	155	80.21	23.081	254	-0.290	.801
Rejection	with						
	Family						
	Other	101	81.06	23.165			
	than						
	Family						
Self-	Living	155	77.61	16.368	254	-1.476	.075
Differentiation	with						
	Family						
	Other	101	80.53	13.893			
	than						
	Family						

Table 5. *t*-test Results for the Analysis of the Total Scores of Variables Considered in the Study According to Living Arrangement

Note. * *p* < .05, ** *p* < .01, *** *p* < .001

As can be seen in Table 5, participants' levels of interpersonal problems t(254) = 1.247, p = .534, parental rejection t(254) = -0.290, p = .801.

and self-differentiation t(254) = -1.476, p = .075 didn't show a statistically significant difference according to their living arrangements. Therefore, living arrangement was not added to the main regression analysis.

3.1.4. Correlation Analysis

Pearson Product Moment Correlation Coefficients were calculated to determine the relationships between parental rejection (coldness/lack of affection, hostility/aggression, neglect/indifference, undifferentiated selfrejection), differentiation (emotional reactivity, I-position, fusion with others, emotional cutoff), and interpersonal problems. Given that age was seen as an important variable in the previous studies (e.g., Akyunus et al., 2019) and the age range of the current study was broad, we deemed it important to check the relationship of age with the main study variables. The results of the correlation analysis were summarized in Table 6.

Table 6. Correlations among Study Variables

	1	2	3	4	5	6	7	8	9	10	11
1.Parental Rejection											
2.Coldness/Lack of Affection	.874**										
3.Hostility/Aggression	.844***	.556***									
4.Neglect/Indifference	.893***	.709***	.681***								
5. Undifferentiated Rejection	.854***	.584***	.825***	.726***							
6.Self Differentiation	.389***	354***	345***	329***	304***						
7.Emotional Reactivity	.196**	.163**	.186**	$.188^{**}$.134*	761***					
8.I-Position	211**	216**	180**	146*	169**	.389***	.082				
9.Fusion with Others	.226***	.165**	$.228^{**}$.214**	.195**	849**	.632**	157*			
10.Emotional Cutoff	.442***	.430***	357***	.365***	.346***	710***	.475***	.021	.516***		
11.Interpersonal Problems	.376***	.368***	.298***	.315***	.294***	643***	.478***	231***	.493***	.561***	
12.Participants' Age	.098	.093	.093	.064	.089	072	044	.115	064	077	.030

Note. * *p* < .05, ** *p* < .01, *** *p* < .001

As can be seen in Table 6, when the relationships between the study variables were examined, it was found that parental rejection negatively correlated with self-differentiation (r = -.389, p < .001) and interpersonal problems (r = -.376, p < .001). Thus, it can be interpreted that as participants' levels of parental rejection increase, their levels of self-differentiation as well as interpersonal problems increase, or as participants' levels of parental rejection decrease, their levels of self-differentiation as well as interpersonal problems increase, or as well as interpersonal problems decrease. Moreover, self-differentiation negatively correlated with interpersonal difficulties (r = -.643, p < .001). Thus, it can be interpreted that as participants' levels of self-differentiation negatively correlated with interpersonal problems, or as participants' levels of self-differentiation decrease, their levels of self-differentiation decrease, their levels of self-differentiation decrease, they experience lower levels of interpersonal problems, or as participants' levels of self-differentiation decrease, their levels of self-differentiation decrease, their levels of self-differentiation and total interpersonal problems examined, it was found that interpersonal problems positively correlated with emotional reactivity (r = .478, p < .001), fusion with others (r = 493, p < .001), emotional cutoff (r = 561, p < .001), and negatively correlated with I-position (r = -232, p < .001).

Furthermore, when the relationships of the subscales of parental rejection with other variables were examined, it was found that there were significant positive relationships between emotional reactivity and coldness/lack of affection (r = .196, p < .001), hostility/aggression (r = .335, p < .001), neglect/indifference (r = .293, p < .001), and undifferentiated rejection (r = .134, p < .005). Similarly, it was found that there were significant negative relationships between the I-position and coldness/lack of affection (r = .216, p < .001), hostility/aggression (r = .18, p < .001), neglect/indifference (r = .216, p < .001), hostility/aggression (r = .18, p < .001), neglect/indifference (r = .146, p = .020, and undifferentiated rejection (r = .169, p = .007). Additionally, significant positive relationships were found between fusion with others and coldness/lack of affection (r = .165, p < .001), hostility/aggression (r = .228, p < .001), neglect/indifference (r = .214, p < .001), and undifferentiated rejection (r = .195, p < .001). Finally, emotional cutoff demonstrated a significant positive relationship with coldness/lack of affection (r = .430, p < .001), hostility/aggression (r = .430, p < .001), neglect/indifference (r = .357, p < .001), and undifferentiated rejection (r = .346, p < .001).

In terms of the age, the participants' age did not significantly correlate with any other study variables. Therefore, even though it was seen as a vital variable in the previous literature (Akyunus et al., 2019), given that it did not yield a significant correlation with any of the variables, age was not included in the main regression models.

3.3. Multiple Linear Regression Analysis

In this step, a multiple linear regression analysis was conducted to determine the level of prediction of the participants' interpersonal problems by main study variables including parental rejection and self-differentiation. A total of three regression analyses were performed. In the first regression analysis, a multiple regression model was created using the total scores of the parental rejection and self-differentiation scales as predictor variables. Findings regarding the prediction of interpersonal problems by the total scores of parental rejection and self-differentiation were presented in Table 7.

In addition to the total scores, as a further examination, the subscales of parental acceptance-rejection and self-differentiation were tested. Given that the subscales of parental rejection had not been previously examined in relation to interpersonal problems using regression analysis, two separate regression analyses were conducted to evaluate unique contributions of parental rejection and self-differentiation subscales. Therefore, in the second regression analysis, the model was constructed by using the scores of the parental rejection subscales, which include coldness/lack of affection, hostility/aggression, neglect/indifference, and undifferentiated rejection. In the third regression analysis, the model was constructed by using the scores of the self-differentiation subscales, which include emotional reactivity, I-position, fusion with others, and emotional cutoff. Findings regarding the prediction of interpersonal problems by subscales of parental rejection and self-differentiation were presented in Table 8 and Table 9.

3.3.1. Multiple Linear Regression Findings for Predictive Role of Total Scores of Parental Rejection and Self-Differentiation on Interpersonal Problems

Table 7 presents the results of the Multiple Linear Regression analysis performed to determine whether the total score of the parental rejection and total score of the self-differentiation would significantly predict participants' interpersonal problems. As can be seen in Table 7, the VIF values of the variables were determined to be lower than 10, and the tolerance values of the variables were determined to be higher than 0.20. When Table 7 was evaluated in a detailed way, it was concluded that there was no multicollinearity between variables (Tabachnick and Fidell, 2007).

Table 7. Multiple Linear Regression Analysis Results Regarding the Prediction of Interpersonal Problems by Total Parental Rejection and TotalSelf-Differentiation Scores (N = 256)

Variables	В	SE	ß	t	%95 Lower	5 CI Upper	- р	VIF	Tolerance
Constant	116.258	6.561		17.721	103.34	129.18	<.001		
Parental Rejection	.226	.078	.149	2.889	0.36	.190	<.01	1.18	.85
Self-Differentiation	665	.058	586	-11.394	780	550	<.001	1.18	.85

Note. R = .658, $R^2 = .433$, F = 96.480, * p < .05, ** p < .01, *** p < .001

As can be seen in Table 7, the overall regression model was statistically significant [R^2 = .433, F(2,253) = 96.480, p < .001], and 43.3% variance in interpersonal problems were explained by the total score of parental rejection and the total score of self-differentiation. The results indicated that parental rejection positively (β = .149, p < .01) and self-differentiation negatively (β = -.536, p < .001) predicted interpersonal problems. Therefore, it means that lower levels of self-differentiation and higher levels of parental rejection are associated with an increase in interpersonal problems.

3.3.2. Multiple Linear Regression Findings for Predictive Role of Parental Rejection Subscales on Interpersonal Problems

Table 8 presents the results of the Multiple Linear Regression analysis performed to determine whether the subscales of parental rejection would significantly predict participants' interpersonal problems. As can be seen in Table 8, the VIF values of the variables were determined to be lower than 10, and the tolerance values of the variables were determined to be higher than 0.20. Therefore, it was concluded that there was no multicollinearity among variables (Tabachnick and Fidell, 2007).

Table 8. Multiple Regression Analysis Results Regarding the Prediction of Interpersonal Problems by Parental Rejection Subscale Scores(N = 256)

Variables	В	SE	β	t	%95 CI		р	VIF	Tolerance
				-	Lower	Upper			
Constant	49.506	3.796		13.040	42.029	56.983	<.001		
Coldness/Lack of Affection	0.985	.303	.272	3.250	0.388	1.582	<.01	2.06	.48
Hostility/Aggression	0.573	.595	.102	0.963	-0.599	1.745	.336	3.29	.30
Neglect/Indifference	0.177	.549	.032	0.323	-0.903	1.258	.747	2.93	.34
Undifferentiated Rejection	0.231	.934	.028	0.248	-1.609	2.071	.805	3.74	.26

Note. R = .386, $R^2 = .149$, F = 10.954, * p < .05, ** p < .01, *** p < .001

As can be seen in Table 8, the overall regression model was statistically significant [R^2 = .149, F(4,251) = 10.954, p < .001]. Results indicated that the 14.9% variance in interpersonal problems was explained by perceived coldness/lack of affection from parents. The results showed that coldness/lack of affection ($\beta = .272$, p < .01) positively predicted interpersonal problems. This means that higher levels of coldness/lack of affection from parents were associated with an increase in interpersonal problems.

3.3.3. Multiple Linear Regression Findings for Predictive Role of Self-Differentiation Subscales on Interpersonal Problems

Table 9 presents the results of the Multiple Linear Regression analysis performed to determine whether the subscales of self-differentiation would significantly predict participants' interpersonal problems. As can be seen in Table 9, the VIF values of the variables were determined to be lower than 10, and the tolerance values of the variables were determined to be higher than 0.20. Therefore, it was concluded that there was no multicollinearity among variables (Tabachnick and Fidell, 2007).

Table 9. Multiple Regression Analysis Results Regarding the Prediction of Interpersonal Problems by Self-Differentiation Subscale Scores (N = 256)

Variables	В	SE	β	t	%95 CI		р	VIF	Tolerance
				-	Lower	Upper			
Constant	53.213	3.945		13.487	45.443	60.984	<.001		
Emotional Reactivity	0.716	.181	.252	3.954	0.359	1.073	<.001	1.83	.54
I-Position	-0.757	.151	246	-5.013	-1.054	-0.459	<.001	1.09	.91
Emotional Cutoff	1.334	.188	.400	7.089	0.964	1.705	<.001	1.44	.69
Fusion with Others	0.276	.207	.184	1.333	-0.132	0.683	.184	2.00	.50

Note. $R = .667, R^2 = .445, F = 50.408, * p < .05, ** p < .01, *** p < .001$

As can be seen in Table 9, the overall regression model was statistically significant [R^2 = .445, F(4,251) = 50.408, p < .001]. Results indicated that the 44.5% variance in interpersonal problems was explained by three subscales of self-differentiation, which were emotional reactivity, I-position, and emotional cutoff. The results showed that emotional reactivity ($\beta = .252$, p < .001) and emotional cutoff ($\beta = .400$, p < .001) positively, whereas taking I-position ($\beta = -.246$, p < .001) negatively predicted interpersonal problems. However, fusion with others did not significantly predict interpersonal problems ($\beta = -.089$, p = .184). The results indicated that higher levels of emotional reactivity and emotional cutoff were associated with an increase in interpersonal problems, whereas higher levels of I-position were associated with a decrease in interpersonal problems.

CHAPTER 4: DISCUSSION

The current study aimed to investigate the predictive role of parental acceptancerejection and self-differentiation on interpersonal problems. As a further examination, the subscales of parental acceptance-rejection and self-differentiation were tested to gain a deeper understanding of how parental acceptance-rejection and selfdifferentiation relate to interpersonal problems. Therefore, three sets of multiple regression analyses were conducted to examine the role of parental acceptancerejection and self-differentiation on interpersonal difficulties. In the following section, the findings of the study will be discussed in line with the study hypotheses and the related literature. Lastly, the limitations of the study will be discussed.

4.1. The Role of Parental Acceptance-Rejection on Interpersonal Problems

The first hypothesis of the study was that parental rejection would positively predict interpersonal problems. Results of multiple linear regression analysis indicated that parental rejection was a significant positive predictor of interpersonal problems. Therefore, the first hypothesis was accepted. This result means that individuals who have experienced rejection from their parents are more likely to have interpersonal problems, or individuals who have experienced more acceptance from their parents are less likely to have interpersonal problems. In the literature, there have been very limited studies examining the relationship between parental rejection and interpersonal problems within the IPARTheory (Cini, 2022; Tariq and Kauasr, 2015). In a study that investigated the relationship between parental acceptance/rejection and interpersonal problems among patients with conversion disorder (Tariq and Kauasr, 2015), it was found that maternal rejection was significantly associated with interpersonal problems in patients with conversion disorder. Additionally, in a study conducted to investigate the mediating role of emotion regulation difficulties and mentalization in the relationship between parental acceptance-rejection and interpersonal problems, it was found that maternal rejection predicted interpersonal problems of participants (Çini, 2022). Given that there are no other studies examining the relationship between parental acceptance-rejection and interpersonal problems in the literature, this finding contributes to the limited knowledge. The findings also strengthen the ground of IPARTheory, which suggests that rejected individuals have an impaired ability to establish and sustain intimate relationships because of disturbances in their relationships with their parents (Rohner, 2021).

Even though studies that examined the relationship between parental acceptancerejection and interpersonal problems within the IPARTheory are very limited, some other studies addressed parental rejection as somehow a type of parental rearing style (Saleem et al., 2019; Petrowski et al., 2006). For example, a study conducted by Saleem et al., (2019) investigated the relationship among parental rearing behaviors, interpersonal problems, and mental health among college students. Researchers found that rejecting parenting style was associated with mental health problems and students' interpersonal difficulties mediated this relationship. Similarly, Petrowski et al., (2006) examined the relationship between parental rearing behaviors and interpersonal problems among a general population whose ages ranged from 18 to 92 years. Results revealed a significant association between rejecting parental style and interpersonal problems among participants.

Additionally, some studies have investigated the predictive role of parental acceptance-rejection on a variety of interpersonal outcomes. Accordingly, parental acceptance is an indicator of more satisfaction in close relationships (Varan, 2005) better psychological adjustment (Khaleque and Rohner, 2012), and positive mental representations (Rohner, 2021). On the other hand, Rohner et al., (2019) demonstrated that parental rejection significantly predicted fear of intimacy in adulthood and cognitive distortions mediated this relationship. It is known that individuals with a fear of intimacy have difficulty sharing personal information, intimate feelings, or distressing emotions, which prevent them from sustaining satisfactory relationships with other people (Emmons and Colby, 1995; Pedro and Emilia, 2015). Additionally, some other studies indicated that parental rejection significantly predicts rejection sensitivity in adulthood (İbrahim et al., 2015; Khaleque et al., 2019). Furthermore, it has been shown that rejection sensitivity is associated with interpersonal problems including social avoidance, submissiveness, vindictiveness, and dominance (Cain et al., 2016), as well as anger, hostility, lack of support, jealousy, and controlling behaviors (Downey and Feldman, 1996). To sum up, the findings of this study contribute to the previous literature and reinforce the assertions made by IPARTheory that parent-child relationships provide a template for social interactions and shape future relationships (Rohner, 2010).

4.2. The Role of Parental Rejection Subscales on Interpersonal Problems

In the second hypothesis, it was assumed that coldness/lack of affection (hypothesis 2a), hostility/aggression (hypothesis 2b), indifference/neglect (hypothesis 2c), and undifferentiated rejection (hypothesis 2d) would positively predict interpersonal problems. Results indicated that only coldness/lack of affection from parents significantly and positively predicted interpersonal problems, thus only supporting hypothesis 2a. Therefore, it can be said that individuals who have experienced coldness/lack of affection from their parents were more likely to experience interpersonal problems, or individuals who have experienced warmth and affection from their parents were less likely to experience interpersonal problems. To our knowledge, only one study examined the relationship between parental rejection subscales on interpersonal problems within a clinical sample but conducting a correlation analysis. In their study, Tariq and Kauasr (2015) found that subscales of parental rejection correlated with different dimensions of interpersonal problems. Specifically, perceived coldness/lack of affection was found to be related to nonassertive and cold/distant behaviors; perceived indifference/neglect was found to be related to dominating and self-sacrificing behaviors; perceived aggression/hostility was found to be related to dominating behaviors and perceived undifferentiated rejection was found to be related to dominating and self-sacrificing problems in conversion patients. Consequently, this study is the first one to investigate the predictive role of parental rejection dimensions on overall interpersonal problems.

While other rejecting behaviors are also significantly correlated with interpersonal problems, the specific impact of others in this study might have been overshadowed by the unique influence of parental coldness/lack of affection. It is important to note that, unlike the other rejection subscales, which focus on negative behaviors exhibited by parents, such as hostility/aggression, indifference/neglect, and undifferentiated rejection, the warmth/affection subscale is reversed to obtain its rejection form, which is characterized by coldness/lack of affection. As a result, the coldness/lack of affection subscale captures the absence of positive parenting behaviors such as the demonstration of warmth, affection, and emotional support, rather than the presence of negative ones. Therefore, the unique impact of parental warmth/affection or coldness/lack of affection on interpersonal problems indicates that due to its direct role in affecting individuals' emotional needs, this dimension of parenting may play a more critical role in shaping individuals' ability to form and maintain healthy relationships.

According to IPARTheory, a parent's warmth/affection can be demonstrated physically by touching, kissing, or verbally by encouraging, giving praises, compliments, or nice comments about the child which creates a sense of recognition and appreciation. Developmental studies suggest that parental warmth enhances a child's social competency by encouraging emotional development through a variety of emotional validation behaviors, such as nurturing, empathizing, and providing support (Skinner, Johnson and Snyder, 2005; Eiden et al., 2009). Additionally, parental warmth has a positive effect on children's socialization skills and their ability to form close relationships (Pettit, Dodge and Brown, 1988). Moreover, it is demonstrated that parental affection is a significant predictor of participants' current positive relations with others (Zhao and Martin, 2015) and interpersonal closeness (Hollender, Duke and Nowicki, 1973b). Conversely, in the absence of parental warmth and affection, individuals experience a lack of emotional validation, physical affection, and parental support. Therefore, emotional distance and detachment in the parent-child relationship may hinder the development of interpersonal skills and adaptive ways of relating to others in the future.

On the other hand, Gökçe and Yılmaz (2017) indicated that the emotional unavailability of parents is linked with a more negative interpersonal style and difficulties in emotion regulation among participants. Furthermore, the results of a meta-analysis conducted by Goagoses et al., (2022) revealed that lack of parental warmth, which is characterized by open expression of affection, and emotional availability, is associated with emotion dysregulation. Therefore, parents who are cold or lacking in affection may not provide a safe and supportive environment for emotional expression and regulation, which may lead to children suppressing or denying their emotions (Rohner, 2015) thereby creating difficulties in understanding and expressing their own emotions. This can result in emotional outbursts, difficulty managing stress, and difficulties communicating emotions to others, which leads to interpersonal problems (Wei et al., 2005; Choi and Murdock, 2017).

Additionally, some studies conducted within the framework of Schema theory have similar findings to the current study. According to IPARTheory, in the absence of love, affection, and care from parents, children perceive it as a rejection and feel unlovable (Rohner, 2004). Similarly, according to the Schema theory, when parents are not emotionally available to their children and do not show affection to them, those children develop a disconnection/rejection schema domain where they hold the belief

that their needs for love will go unmet, and as a result have interpersonal problems within the cold-submissive range (Akyunus and Gültekin, 2021; Akyunus and Akbay, 2022). Thus, it can be said that the lack of warmth, affection, and emotional responsiveness from parents can shape individuals' patterns of relating to others. As a result, the finding of the current study highlights the importance of parental warmth and affection in the development of healthy interpersonal relationships.

4.3. The Role of Self-Differentiation on Interpersonal Problems

In the third hypothesis, it was assumed that self-differentiation would negatively predict interpersonal problems. As a result of the regression analysis, it was found that self-differentiation was a significant negative predictor of interpersonal problems. Therefore, it can be said that highly differentiated individuals were less likely to experience interpersonal problems. Given the limited research on the relationship between self-differentiation and interpersonal problems, the findings of this study are in line with the prior study in this area (Skowron et al., 2009). In their study, Skowron et al. (2009) examined the long-term relationship between differentiation of self, and psychological and relational well-being in a sample of college students. Researchers found that individuals with greater differentiation of self, characterized by lower emotional reactivity, less emotional cut-off, lower fusion with others, and better capacity to take an I-position were less likely to experience psychological symptoms and interpersonal problems by the end of the semester than those with lower differentiation of self. Thus, the current finding is consistent with the previous finding and reinforces the importance of self-differentiation for interpersonal functioning. In addition, it strengthens the ground of Bowen's theory which suggests that differentiation of self enables individuals to form healthy satisfying relationships with others (Lampis et al, 2019). Additionally, self-differentiation promotes autonomy, as well as emotional connection, which are necessary components of mature relationships (Jenkins et al., 2005). Furthermore, since everyone requires both individuality and togetherness, having a capacity for autonomy and emotional connections is crucial to individuals (Peleg, 2002). Therefore, it can be said that highly differentiated individuals possess a greater balance between intimacy and autonomy in interpersonal relationships and have fewer interpersonal problems. It is also known that undifferentiated individuals have poor boundaries, rely on approval and acceptance from others, experience anxiety and discomfort in intimate relationships, and are unable to act independently (Bowen, 1978; Skowron et al., 2009). As a result, they have difficulty developing intimate relationships while maintaining their independence, which contributes to difficulties in sustaining healthy relationships. Therefore, the result of the current study highlights the importance of developing a distinct self from the family of origin for greater interpersonal health.

Additionally, it is known that both being individuated and becoming connected to people are necessary for healthy interpersonal functioning (Horowitz et al., 2006). Therefore, people should have a balance between communal needs such as intimacy, affiliation, and union and agency needs such as power, status, and mastery (Wiggins, 1996). Psychological needs in both domains must be satisfied to form intimate relationships with others and promote individuation, which contributes to a greater degree of interpersonal health (Gurtman, 2009). Given that, self-differentiation also enables individuals to establish intimate relationships and keep their autonomy, it is in line with the assumptions of Interpersonal theory. Hence, in light of the current finding, self-differentiation can be viewed as facilitating individuals' ability to balance agency and communal needs, resulting in fewer interpersonal difficulties.

4.4. The Role of Self-Differentiation Subscales on Interpersonal Problems

In Hypothesis 4a, it was hypothesized that emotional reactivity, which is one of the self-differentiation subscales, would positively predict interpersonal problems. The results of the regression analysis indicated that emotional reactivity was a significant positive predictor of interpersonal problems, and thus hypothesis 4a was accepted. This result means that emotionally reactive individuals are more likely to have interpersonal problems. Other studies also demonstrated that emotional reactivity was a significant predictor of interpersonal problems (Skowron et al., 2009; Wei et al., 2005). Thus, the results of this study support the previous findings. In their study, Skowron et al., (2009) found that emotional reactivity significantly predicted interpersonal problems. Specifically, greater emotional reactivity was associated with greater aggression and insensitivity in relationships, characterized by irritability, anger, and little concern for other people's well-being. Additionally, in their study Wei et al., (2005) investigated the mediating role of emotional reactivity and emotional cutoff among attachment, negative mood, and interpersonal problems among college students, and demonstrated that emotional reactivity was the mediator of the relationship between attachment anxiety, negative mood, and interpersonal problems.

Furthermore, a study conducted by Choi and Murdock (2017) indicated that emotional reactivity was a significant predictor of interpersonal conflicts. Accordingly, they stated that individuals with higher levels of emotional reactivity expressed anger toward other people and reported more conflict with them than those with lower levels of emotional reactivity. Moreover, Bowen's theory suggests that emotionally reactive individuals are often influenced by their emotions and a high level of anxiety and stress accompanies their reactions (Kerr and Bowen, 1988). They respond emotionally under stressful conditions and have difficulty keeping calm and shifting their attention (Choi and Murdock, 2017). Since they are prone to overreacting and devote much of their energy to experiencing their emotions, it is difficult for them to remain calm in interpersonal conflicts and resolve disputes effectively (Peleg, 2002). Thus, emotional reactivity can be regarded as a maladaptive affective regulation that contributes to interpersonal difficulties.

In addition, in Hypothesis 4b, it was hypothesized that I-position would negatively predict interpersonal problems. Results of regression analysis indicated that I-position was a significant negative predictor of interpersonal problems. This means that individuals who have a better capacity to take an I-position are less likely to have interpersonal problems. Therefore, hypothesis 4b is accepted. I-position was also a significant predictor of interpersonal problems in the previous study (Skowron, et al., 2009). It is known that individuals who can adopt I-position more easily set clear boundaries with others, have a clear sense of self, stick to their own opinions even under pressure, and display healthy independence (Tuason and Friedlander, 2000). Therefore, they are less likely to compromise their own needs and desires to satisfy other people, and less dependent on the approval of others (Skowron and Schmitt, 2003). On the other hand, people who have lower levels of I-position struggle to adopt a sense of self within their relationships and rely on the opinions and values of others to make sense of the world (Choi and Murdock, 2017). Thus, they may have difficulty setting limits with others and not be able to communicate their opinions and needs or prioritize them over those of others. As a result, it can be said that taking I-position is an important indicator of interpersonal health.

Additionally, in Hypothesis 4c, it was hypothesized that fusion with others would positively predict interpersonal problems. The results of regression analysis indicated that fusion with others was not a significant predictor of interpersonal problems, leading to the rejection of the hypothesis. Although there are not many studies examining the role of fusion with others on interpersonal problems, in a previous study, fusion with others was found to be a significant predictor of interpersonal problems among a sample of American college students (Skowron, et al., 2009). The inconsistency of results can be attributed to cultural differences between the two samples. Compared to individualistic societies, Turkey exhibits both individualistic and collectivist tendencies, favoring strong family ties and interdependency (Kağıtçıbaşı, 2005). Therefore, it can be said that the cultural values of Turkey promote a higher level of intimacy and interdependence, which may encourage greater fusion with others. Therefore, among Turkish people, fusion with others may be considered as usual and it may not be contributed to significant interpersonal difficulties due to related cultural expectations. Given that there is not much study examining the stated relation neither with other samples with different tendencies nor cross-culturally, these arguments stay as a speculation so more research is needed to conclude in a more precise way.

Lastly, in Hypothesis 4d, it was hypothesized that emotional cutoff would positively predict interpersonal problems. Results of regression analysis indicated that emotional cutoff significantly and positively predicted interpersonal problems, and thus, hypothesis 4d was accepted. This result indicated that individuals who tend to cut off themselves emotionally are more likely to have interpersonal problems. Previous studies also demonstrated consistent findings (Wei et. al., 2005; Skowron et al., 2009; Idrees and Malik, 2022). In their study, Wei et al., (2005) investigated the mediating role of emotional reactivity and emotional cutoff among attachment, negative mood, and interpersonal problems among college students, and found that emotional cutoff was the mediator of the relationship between attachment avoidance, negative mood, and interpersonal problems. Furthermore, Skowron et al., (2009) indicated that individuals who were emotionally cutoff from others were more likely to try to control others or to remain distant and aloof and have difficulty maintaining long-term relationships with them. Additionally, Idrees and Malik, (2022) demonstrated that emotional cutoff mediated the relationship between insecure attachment styles and interpersonal problems. It is known that less differentiated individuals are afraid of engulfment and have unresolvable issues regarding parental attachment (Skowron and Friedlander, 1998). As a result, they are uncomfortable with intimacy, remain distant, and reject any emotional attachment. Therefore, they suppress negative emotions and increase the distance from people for regulating their anxiety triggered by their

proximity (Skowron et al., 2003). In light of these findings, emotional cutoff may prevent individuals from experiencing emotional intimacy with other people and contributes to difficulties within relationships.

4.6. Limitations and Future Suggestions

There are several limitations of the current study. First, the sample size of 256 may be inadequate for the generalization of the findings. In future studies, researchers may sample more participants and they may include both clinical and nonclinical participants to determine how the relationships between study variables differ among these groups. As a second limitation, the study was conducted among emerging adults whose ages range between 18 and 29, which suggests that the results may not be generalizable to other age groups. Therefore, future research should include other age groups as well.

Additionally, the data used in this study was cross-sectional, and thus no firm conclusions can be made regarding the causal relationships among the variables. Also, only self-report measurements were used in the current study, which may be subject to bias in response. For example, on the interpersonal problems scale, participants may provide answers that indicate that they have fewer interpersonal problems. Therefore, future research should include the report of others (mother, father, or partner) or they may include experimental or observational techniques in their studies. In addition, given that the parental acceptance-rejection scale is retrospective, participants may not be able to provide accurate information about their past experiences. Therefore, future research may validate the information provided by participants either through secondary sources or through alternative assessment methods (e.g., in-depth interviews or case studies) that would provide a more detailed information of the perceived parental acceptance and rejection.

CHAPTER 5: CONCLUSION

5.1. Conclusion and Implications

The current research aimed to investigate the role of perceived parental acceptancerejection and self-differentiation on interpersonal problems among emerging adults. As a result of the regression analyses, it was found that perceived parental rejection and self-differentiation significantly predicted the interpersonal problems of participants. These findings provide empirical support for the importance of parental acceptance in fostering healthy interpersonal relationships and highlight the significance of self-differentiation in promoting better interpersonal functioning. Therefore, this study provides a significant contribution to strengthening the ground of IPARTheory and Bowen's theory as they both suggest that interpersonal functioning is the result of a matrix of relationships within the family and that interpersonal problems result from disturbances in these relationships. In accordance with Bowen's theory, the findings supported the assumption that differentiation of self is an important factor in interpersonal functioning. Furthermore, these findings underscore the proposition of IPARTheory that parental acceptance/rejection plays a crucial role in individuals' future relationships with others. Additionally, the present study has some practical implications. Therapists can benefit from these findings by focusing on addressing and resolving issues related to parental rejection and promoting self-differentiation in their therapeutic interventions. By targeting these factors, therapists can help individuals alleviate their interpersonal difficulties which is one of the most common reasons for seeking psychotherapy.

Furthermore, the study revealed that specific dimensions of self-differentiation, including emotional cutoff, emotional reactivity, and taking an I-position significantly predicted interpersonal problems. These findings suggest that working on enhancing emotional connectedness, reducing emotional reactivity, and promoting individuality can have a positive impact on individuals' interpersonal functioning. Besides, the significant prediction of interpersonal problems by the coldness/lack of affection of parents underscores the importance of warm and affectionate parent-child interactions in the development of healthy interpersonal relationships. Thus, therapeutic interventions aimed at addressing the impact of parental coldness and addressing the emotional needs of individuals can be beneficial for individuals struggling with interpersonal problems. In addition, practitioners can emphasize the significance of

parental warmth and affection during parent education programs, providing guidance on how parents can express affection and create nurturing environments for their children. Raising awareness about the potential long-term impact of parental coldness/affection on interpersonal health can help parents prioritize emotional connection with their children.



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APPENDICES

Appendix A. Ethics Committee Approval

SAYI : B.30.2.İEÜ.0.05.05-**020**-249 05.01.2023

KONU : Etik Kurul Kararı hk.

Sayın Dr. Öğr. Üyesi Aylin Koçak ve İlayda Büyük,

"THE EXAMINING THE ROLE OF PERCEIVED PARENTAL ACCEPTANCE-RE JECTION AND SELF-DIFFERENTIATION ON EMERGING ADULTS' INTERPER SONAL PROBLEMS" başlıklı projenizin etik uygunluğu konusundaki başvurunuz sonuçlanmıştır.

Etik Kurulumuz 05.01.2023 tarihinde sizin başvurunuzun da içinde bulunduğu bir gün demle toplanmış ve Etik Kurul üyeleri projeleri incelemiştir.

Sonuçta 05.01.2023 tarihinde **"THE EXAMINING THE ROLE OF PERCEIVED PARENTAL ACCEPTANCE-REJECTION AND SELF-DIFFERENTIATION ON EMERG ING ADULTS' INTERPERSONAL PROBLEMS"** konulu projenizin etik açıdan uygun olduğuna oy birliğiyle karar verilmiştir. Gereği için bilgilerinize sunarım.

Saygılarımla,

Prof. Dr. Murat Bengisu Etik Kurul Başkanı

Appendix B. Informed Consent Form

Bu çalışma, İzmir Ekonomi Üniversitesi bünyesinde, Klinik Psikoloji Tezli Yüksek Lisans programı kapsamında, Dr. Öğr. Üyesi Aylin Koçak danışmanlığında İlayda Büyük tarafından yürütülmektedir. Bu form sizi çalışma koşulları hakkında bilgilendirmek için hazırlanmıştır.

Çalışmanın amacı nedir?

Araştırmanın amacı, 18-29 yaş arası üniversite öğrencilerinin kişilerarası yaşadığı problemler üzerinde benlik ayrımlaşması ile algıladıkları ebeveyn-kabul reddinin rolünü incelemektir. Bu doğrultuda size anne- babanız, kendiniz ve kişilerarası yaşadığınız zorluklarla ilgili sorular sorulacaktır.

Bize nasıl yardımcı olursunuz?

Araştırmaya katılmayı kabul ederseniz, bu aşamada sizden yaklaşık 10-15 dakikanızı alacak anketimizi doldurmanız istenecektir. Soruların doğru ya da yanlış cevapları yoktur. Bundan dolayı soruları kendiniz yanıtlamanız ve size en doğru gelen yanıtları tercih etmeniz araştırmanın doğruluğu ve güvenilirliği açısından önemlidir.

Sizden topladığımız bilgileri nasıl kullanacağız?

Araştırmada kimse sizden kimlik bilgilerinizi ortaya çıkaracak bilgiler istemeyecektir. Verdiğiniz yanıtlar gizli tutulacak, bu bilgilere sadece araştırmacılar ulaşabilecektir. Katılımcılardan elde edilecek bilgiler toplu halde değerlendirilecek, bilimsel yayınlar ve akademik amaçlar için kullanılacaktır.

Katılımınız ile ilgili bilmeniz gerekenler:

Araştırmaya katılım tamamen gönüllülük esasına dayanmaktadır. Çalışma, genel olarak kişisel rahatsızlık verecek sorular içermemektedir. Ancak, katılım sırasında sorulardan ya da herhangi başka bir nedenden ötürü kendinizi rahatsız hissederseniz çalışmaya katılmayı reddedebilir veya cevaplamayı yarıda bırakabilirsiniz.

Çalışmaya katılımınız için şimdiden teşekkür ederiz. Çalışma hakkında daha fazla bilgi almak isterseniz İlayda Büyük ile iletişime geçebilirsiniz.

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Bu çalışmaya tamamen gönüllü olarak katılmayı kabul ediyor ve istediğim zaman yarıda kesip çıkabileceğimi biliyorum. Verdiğim bilgilerin bilimsel amaçlı yayımlarda kullanılmasını kabul ediyorum.

Evet 🗆 Hayır 🗆



Appendix C. Demographic Information Form

01. Cinsiyetiniz: () Kadın () Erkek 02. Yaşınız: 03. Sizle birlikte kaç kardeşsiniz? 04. Kendinizi hangi gelir grubuna ait görüyorsunuz? () Alt () Orta-Alt () Orta () Orta-Üst () Üst 05. Medeni Durumunuz: () Bekar () Evli () Diğer 06. Sinifiniz: () 1. Sinif () 2. Sinif () 3. Sinif () 4. Sinif () Yüksek lisans () Doktora 07. İlişki Durumunuz () Var () Yok 08. Anneniz hayatta mi? () Evet () Hayır Hayatta değil ise, Kaybettiğinizde kaç yaşındaydınız? 09. Babanız hayatta mı () Evet () Hayır Hayatta değilse, Kaybettiğinizde kaç yaşındaydınız? 10. Eğer anne ve babanız hayatta ise; () Birlikteler () Ayrılar 11. Babanızın eğitim durumu: 12. Annenizin eğitim durumu () Okuryazar () Okuryazar () Okuryazar değil () Okuryazar değil () İlkokul mezunu () İlkokul mezunu () Ortaokul mezunu () Ortaokul mezunu () Lise mezunu () Lise mezunu () Üniversite veya yüksek okul mezunu ()Üniversite veya yüksek okul mezunu 12. Anne ve babanızla birlikte mi yaşıyorsunuz? () Evet () Hayır Cevabiniz hayır ise ne kadar süredir ailenizden ayrı yaşıyorsunuz? (yıl olarak yazınız) 13. Şu anda herhangi bir psikolojik/psikiyatrik rahatsızlığınız var mı? () Evet () Hayır 14. Cevabiniz EVET ise, tanisi nedir?: 15. Şu anda herhangi bir psikolojik/psikiyatrik yardım alıyor musunuz? Evet () Hayır 16. Cevabiniz EVET ise, ne tür bir yardım alıyorsunuz? ve ne kadar süredir alıyorsunuz?

- 17. Şu anda herhangi bir psikiyatrik ilaç kullanıyor musunuz?
- Evet () Hayır
- 18. Cevabiniz EVET ise, adı nedir?
- ve ne kadar süredir kullanıyorsunuz?
- 19. Daha önce psikolojik/psikiyatrik bir rahatsızlık geçirdiniz mi?
- () Evet () Hayır
- 20. Cevabiniz EVET ise tanisi nedir?



Appendix D. Adult Parental Acceptance-Rejection Questionnaire – Short Form

Yetişkin EKRÖ: Anne (Kısa Form)

Bu sayfada anne-çocuk ilişkisini içeren ifadeler bulunmaktadır. Her ifadeyi dikkatlice okuyun ve annenizin siz çocukken, size olan davranışlarını ne derece tanımladığını düşünün.

Her ifadeyi okuduktan sonra, o ifadenin annenizin size karşı davranışları konusunda ne kadar uygun olduğunu düşünerek, "Hemen hemen her zaman doğru", "Bazen doğru", "Nadiren doğru" veya "Hiçbir zaman doğru değil" şıklarından birini işaretleyiniz.

	DOĞRU		DOĞRU DEĞİL			
ANNEM	Hemen Her Zaman Doğru	Bazen Doğru	Nadiren Doğru	Hiçbir Zaman Doğru Değil		
İyi davrandığımda bana sarılır ve beni öperdi.	\boxtimes					

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			DOĞRU	J	DOĞRU DEĞİL					
	AN	NEM	Hemen Her Zaman Doğru	Bazen Doğru	Nadiren Doğru	Hiçbir Zaman Doğru Değil				
ĺ	1.	Benim hakkımda güzel şeyler söylerdi.								
	2.	Bana hiç ilgi göstermezdi.								
	3.	Benim için önemli olan şeyleri anlatabilmemi kolaylaştırırdı.								
	4.	Hak etmediğim zaman bile bana vururdu.								
-	5.	Beni büyük bir baş belası olarak görürdü.								
	6.	Kızdığı zaman beni çok kötü cezalandırırdı.								
	7.	Sorularımı cevaplayamayacak kadar meşguldü.								
	8.	Benden hoşlanmıyor gibiydi.								
	9.	Yaptığım şeylerle gerçekten ilgilenirdi.								
	10.	Bana bir sürü kırıcı şey söylerdi.								
	11.	Ondan yardım istediğimde beni duymazlıktan gelirdi.								
	12.	Bana istenilen ve ihtiyaç duyulan biri olduğumu hissettirirdi.								
	13.	Bana çok ilgi gösterirdi.								
	14.	Beni kırmak için elinden geleni yapardı.								
	15.	Hatırlaması gerekir diye düşündüğüm önemli şeyleri unuturdu.								
	16.	Eğer kötü davranırsam, beni artık sevmediğini hissettirirdi.								
	17.	Bana yaptığım şeylerin önemli olduğunu hissettirirdi.								
	18.	Yanlış bir şey yaptığımda beni korkutur veya tehdit ederdi.								
	19.	Benim ne düşündüğüme önem verir ve düşündüklerim hakkında konuşmamdan hoşlanırdı.								

20.	Ne yaparsam yapayım, diğer çocukların benden		
	daha iyi olduğunu düşünürdü.		
21.	Bana istenmediğimi belli ederdi.		
22.	Beni sevdiğini belli ederdi.		
23.	Onu rahatsız etmediğim sürece benimle ilgilenmezdi.		
24.	Bana karşı yumuşak ve iyi kalpliydi.		



Appendix E. Adult Parental Acceptance-Rejection Questionnaire – Short Form

Yetişkin EKRÖ: Baba (Kısa Form)

Bu sayfada baba-çocuk ilişkisini içeren ifadeler bulunmaktadır. Her ifadeyi dikkatlice okuyun ve babanızın siz çocukken, size olan davranışlarını ne derece tanımladığını düşünün.

Her ifadeyi okuduktan sonra, o ifadenin babanızın size karşı davranışları konusunda ne kadar uygun olduğunu düşünerek, "Hemen hemen her zaman doğru", "Bazen doğru", "Nadiren doğru" veya "Hiçbir zaman doğru değil" şıklarından birini işaretleyiniz.

	DOĞRU		DOĞRU DEĞİL			
BABAM	Hemen Her Zaman Doğru	Bazen Doğru	Nadiren Doğru	Hiçbir Zaman Doğru Değil		
İyi davrandığımda bana sarılır ve beni öperdi.	\boxtimes					

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		DOĞRI	J	DOĞRI	J DEĞİL
BA	ABAM	Hemen Her Zaman Doğru	Bazen Doğru	Nadiren Doğru	Hiçbir Zaman Doğru Değil
1.	Benim hakkımda güzel şeyler söylerdi.				
2.	Bana hiç ilgi göstermezdi.				
3.	Benim için önemli olan şeyleri anlatabilmemi kolaylaştırırdı.				
4.	Hak etmediğim zaman bile bana vururdu.				
5.	Beni büyük bir baş belası olarak görürdü.				
6.	Kızdığı zaman beni çok kötü cezalandırırdı.				
7.	Sorularımı cevaplayamayacak kadar meşguldü.				
8.	Benden hoşlanmıyor gibiydi.				
9.	Yaptığım şeylerle gerçekten ilgilenirdi.				
10.	Bana bir sürü kırıcı şey söylerdi.				
11.	Ondan yardım istediğimde beni duymazlıktan gelirdi.				
12.	Bana istenilen ve ihtiyaç duyulan biri olduğumu hissettirirdi.				
13.	Bana çok ilgi gösterirdi.				
14.	Beni kırmak için elinden geleni yapardı.				
15.	Hatırlaması gerekir diye düşündüğüm önemli şeyleri unuturdu.				
16.	Eğer kötü davranırsam, beni artık sevmediğini hissettirirdi.				
17.	Bana yaptığım şeylerin önemli olduğunu hissettirirdi.				
18.	Yanlış bir şey yaptığımda beni korkutur veya tehdit ederdi.				
19.	Benim ne düşündüğüme önem verir ve düşündüklerim hakkında konuşmamdan hoşlanırdı.				

20.	Ne yaparsam yapayım, diğer çocukların benden		
20.	daha iyi olduğunu düşünürdü.		
21.	Bana istenmediğimi belli ederdi.		
22.	Beni sevdiğini belli ederdi.		
23.	Onu rahatsız etmediğim sürece benimle ilgilenmezdi.		
24.	Bana karşı yumuşak ve iyi kalpliydi.		



Appendix F. Inventory of Interpersonal Problems / Kişilerarası Problemler Ölçeği

İnsanlar başkalarıyla ilişkilerinde aşağıda belirtilen problemleri yaşadıklarını ifade etmektedirler. Lütfen aşağıdaki ifadeleri okuyun ve her maddeyi hayatınızdaki herhangi bir önemli kişiyle (aile bireyleri, dostlar, iş arkadaşları gibi) İlişkinizde sizin için problem olup olmadığına göre değerlendirin. Problemin sizin için ne kadar rahatsız edici olduğunu numaralandırılmış daireleri yuvarlak içine alarak belirtiniz.

Aşağıdaki ifadeler başkalarıyla ilişkilerinizde yapmakta	Hiç	Bira	Orta	Old	Faz
ZORLANDIĞINIZ şeylerdir.	değil	z	dere	ukça	asıy
			cede		a
Benim için,					
1. Başkalarına "hayır" demek zordur.	1	2	3	4	5
2. Gruplara katılmak zordur.	1	2	3	4	5
	1	2	3 3	4	5
3. Bir şeyleri kendime saklamak zordur.	-	Ē			-
4. Birine beni rahatsız etmemesini söylemek zordur.	1	2	3	4	5
5. Kendimi yeni insanlara tanıtmak zordur.	1	2	3	4	5
6. İnsanları ortaya çıkan problemlerle yüzleştirmek zordur.	1	2	3	4	5
7. Başkalarına kendimi rahatlıkla ifade etmek zordur.	1	2	3	4	5
8. Başkalarına kızgınlığımı belli etmek zordur.	1	2	3	4	5
9. Başkalarıyla sosyalleşmek zordur.	1	2	3	4	5
10. İnsanlara sıcaklık/ şevkat göstermek zordur.	1	2	3	4	5
11. İnsanlarla anlaşmak/ geçinmek zordur.	1	2	3	4	5
12. Başkalarıyla ilişkimde, gerektiğinde kararlı durabilmek zordur.	1	2	3	4	5
13. Başka birisi için sevgi/ aşk hissetmek zordur.	1	2	3	4	5
14. Başka birinin hayatındaki amaçları için destekleyici olmak zordur.	1	2	3	4	5
15. Başkalarına yakın hissetmek zordur.	1	2	3	4	5
16. Başkalarının problemlerini gerçekten umursamak zordur.	1	2	3	4	5
17. Başkalarının ihtiyaçlarını kendi ihtiyaçlarımdan öne koymak	1	2	3	4	5
zordur.					
18. Başka birinin mutluluğundan memnun olmak zordur.	1	2	3	4	5
19. Başkalarından benimle sosyal amaçla bir araya gelmesini istemek	1	2	3	4	5
zordur.					
20. Başkalarının duygularını incitmekten endişe etmeksizin kendimi	1	2	3	4	5
rahatlıkla ifade etmek zordur.					

	Hiç	Bira	Orta		
Aşağıdaki ifadeler ÇOK FAZLA yaptığınız şeylerdir.	değil	Z	dere	ukça	asıy
			cede		a
21. İnsanlara fazlasıyla açılırım/ içimi dökerim.	1	2	3	4	5
22. Başkalarına karşı fazlasıyla agresifim/ saldırganım.	1	2	3	4	5
23. Başkalarını memnun etmek için fazlasıyla uğraşırım.	1	2	3	4	5
24. Fark edilmeyi fazlasıyla isterim.	1	2	3	4	5
25. Başkalarını kontrol etmek için fazlasıyla uğraşırım.	1	2	3	4	5
26. Sıklıkla (fazlasıyla) başkalarının ihtiyaçlarını kende	i1	2	3	4	5
ihtiyaçlarımın önüne koyarım.					
27. Başkalarına karşı fazlasıyla çömertim	1	2	3	4	5
28. Kendi istediğimi elde edebilmek için başkalarını fazlasıyla	1	2	3	4	5
yönlendiririm.					
29. Başkalarına kişisel bilgilerimi fazla anlatırım.	1	2	3	4	5
30. Başkalarıyla fazlasıyla tartışırım.	1	2	3	4	5
31. Sıklıkla (fazlasıyla) başkalarının benden faydalanmasına izin	1	2	3	4	5
veririm.					
32. Başkalarının ızdırapından/ mağduriyetinden fazlasıyla	1	2	3	4	5
etkilenirim.					

Appendix G. Self Differentiation Scale / Benliğin Ayrımlaşması Ölçeği

Aşağıda kendinizle ve başkalarıyla olan ilişkilerinize yönelik düşünce ve duygularınızı içeren ifadeler yer almaktadır. Sizden istenen her bir ifadeyi dikkatlice okuyarak 1'den 6'ya kadar olan seçeneklerden sizi en iyi ifade eden seçeneği işaretlemenizdir. Eğer herhangi bir madde sizinle direkt ilgili gözükmüyorsa (örneğin şu anda bir eşiniz/partneriniz yoksa), olması halinde nasıl düşünüp nasıl davranabileceğinizle ilgili en iyi tahmininizi belirtiniz.

	HİÇ UYGUI DEĞİL		ÇOK UYGUN	N
1. Ailemin yanındayken genellikle kendimi kısıtlanmış hissederim.	_			
1. Anenini yanındayken genenikle kendinii kisidaniniş hissederini.				_
	1 2	3 4		
2. Önemli bir işe veya göreve başlarken genellikle başkalarının	1 2	3 4	56	5
cesaretlendirmesine ihtiyaç duyarım.				
3. İnsanlar benimle yakınlık kurmaya çalıştıklarında, kendimi	1 2	3 4	56	5
onlardan uzak tutarım.				
4. İnsanlar benimle yakınlık kurmaya çalıştıklarında, bundan	1 2	3 4	5 6	5
genellikle rahatsızlık duyarım.				
5. Hemen hemen hayatımdaki herkesten onay alma ihtiyacı	1 2	3 4	5 6	5
hissederim.				
6. Değiştiremeyeceğim şeyler için üzülmenin bir anlamı yok.	1 2	3 4	56	5
7. Yakın ilişkilerimde kısıtlanma kaygısı yaşarım.	1 2	3 4	56	5
8. Eleştirilmek beni oldukça rahatsız eder.	1 2	3 4	5 6	ń
9. Anne/babamın beklentilerine göre yaşamaya çalışırım.	1 2	3 4	5 6	
10. Kendimi olduğum gibi kabul ederim.	1 2	3 4		
	1 2	υ.		<i>,</i>
11. Eşimle/partnerimle bir tartışma yaşarsam, tüm gün bu tartışma	1 2	34	56)
üzerine düşünürüm.				
12. Başkaları tarafından baskı altında olduğumu hissettiğim	1 2	3 4	56	5
zamanlarda bile onlara "hayır" diyebilirim.				
13. Yaptığım şeyin doğru olduğunu düşünüyorsam başkalarının ne	1 2	3 4	56	5
dediğini pek de umursamam.				
14. Bir karar alırken danışacağım birileri yoksa kolay kolay karar	1 2	3 4	5 6	5
veremem.				
15. Başkaları tarafından incitilmek beni aşırı derecede rahatsız eder.	1 2	3 4	5 6	5

16. Eşimin/partnerimin yoğun ilgisi beni bunaltır.	1	2	3	4	5	6
17. İnsanlar üzerindeki izlenimimi merak ederim.	1	2	3	4	5	6
18. Duygularımı genellikle çevremdekilerden daha yoğun yaşarım.	1	2	3	4	5	6
 Hayatımda ne olursa olsun, kendimle ilgili düşüncelerimden asla taviz vermem. 	ı 1	2	3	4	5	6
20. Anne/babamın fikrini almadan karar veremem.	1	2	3	4	5	6

