The Relationship between Rejection Sensitivity and Parental Attachment among Individuals with Borderline Personality Disorder Traits

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Objective: Rejection sensitivity, defined as the tendency to anxiously expect, readily perceive, and overreact to social rejection, can have significant implications for interpersonal relationships. It is hypothesized that in a sample of undergraduate women, rejection sensitivity may relate to disruption in attachment to early caregivers, with highly rejection sensitive individuals endorsing more disrupted attachment to parental figures. Furthermore, it is hypothesized that individuals with borderline traits or social anxiety traits will endorse more disrupted attachment and higher rejection sensitivity than healthy controls.

Method: Through self-report data from the Relationship Structures Questionnaire and the Rejection Sensitivity Questionnaire, this study considers the relationship between attachment to parental figures, and rejection sensitivity in the context of interpersonal relationships for individuals high in BPD traits, social anxiety (SA) traits (clinical control group) and healthy controls in an a sample of undergraduate women (N=134).

Results: Across groups, it was found that rejection sensitivity is significantly correlated with maternal and paternal avoidance. In addition, it was found that rejection sensitivity is significantly correlated with paternal attachment-related anxiety. BPD trait individuals displayed greater rejection sensitivity, more paternal and maternal avoidance, along with a higher level of paternal attachment-related anxiety than either control group. Compared to healthy controls, SA trait individuals displayed more maternal and paternal avoidance, paternal related-anxiety and rejection sensitivity.

Conclusions: These findings suggest that disruption in parental attachment is related to rejection sensitivity in BPD trait individuals and SA trait individuals. In future studies, differences in attachment disruption between BPD trait and SA trait individuals should be further explored through the consideration of current relationship outcomes.

Learning Objectives
At the conclusion of the presentation, participants will be able to:
1. Describe HiTOP’s efforts to build measures of the diagnostic constructs specified in the hierarchy.
2. Recognize the ways in which personality pathology constructs are modeled and measured within HiTOP.
3. Discuss the future directions and challenges specific to the integration of personality pathology dimensions in a broader dimensional classification of psychopathology.

References: