

PERCEIVED PARENTAL REJECTION AND PSYCHOLOGICAL WELL-BEING  
IN EMERGING ADULTHOOD: MODERATOR ROLE  
OF REFLECTIVE FUNCTIONING

GİZEM DAL

BOĞAZİÇİ UNIVERSITY

2021

PERCEIVED PARENTAL REJECTION AND PSYCHOLOGICAL WELL-BEING  
IN EMERGING ADULTHOOD: MODERATOR ROLE  
OF REFLECTIVE FUNCTIONING

Thesis submitted to the  
Institute for Graduate Studies in Social Sciences  
in partial fulfillment of the requirements for the degree of

Master of Arts

in

Psychology

by

Gizem Dal

Boğaziçi University

2021

## DECLARATION OF ORIGINALITY

I, Gizem Dal, certify that

- I am the sole author of this thesis and that I have fully acknowledged and documented in my thesis all sources of ideas and words, including digital resources, which have been produced or published by another person or institution;
- this thesis contains no material that has been submitted or accepted for a degree or diploma in any other educational institution;
- this is a true copy of the thesis approved by my advisor and thesis committee at Boğaziçi University, including final revisions required by them.

Signature.....

Date .....

## ABSTRACT

### Perceived Parental Rejection and Psychological Well-Being in Emerging Adulthood: Moderator Role of Reflective Functioning

The main aim of this study was to investigate moderator role of Reflective Functioning (RF) between perceived maternal and paternal rejection in childhood and psychological well-being during emerging adulthood period. A secondary aim of this study was to examine factor structure, convergent validity, and reliability of a short Turkish version of Reflective Functioning Questionnaire (RFQ-8) in a non-clinical sample. In total, 330 people between 18-29 years of age completed related online surveys. Analyses assessing psychometric features of RFQ-8 found out the unidimensional structure of this measure is a more valid instrument to use in this sample rather than the originally proposed two-factor version. Other analyses regarding the main goal of the study showed that psychological well-being during the emerging adulthood period has significant negative correlations with recalled rejection from both mother and the father in childhood and lower levels of current RF. Also, perceived rejection from mother and RF were found as significant predictors of psychological well-being in all levels of regression analysis after controlling for some background characteristics. However, the hypothesis regarding the moderator role of RF was not confirmed. An additional analysis conducted to explore mediating role of RF showed that RF partially mediates the relationship between psychological well-being and perceived paternal but not maternal rejection. Based on this, it was concluded that RF can be a buffer between paternal rejection perceived in childhood and psychological well-being in emerging adulthood. All

findings, implications, and limitations of the study were discussed in the light of related literature.

## ÖZET

Algılanan Ebeveyn Reddi ve Beliren Yetişkinlikteki Psikolojik İyi Olma Hali:

İçsel Değerlendirme İşlevselliğinin Moderatör Rolü

Bu çalışmanın temel amacı, içsel değerlendirme işlevselliğinin (İDİ) çocuklukta algılanan anne ve baba reddi ile beliren yetişkinlik dönemindeki iyi olma hali arasındaki düzenleyici rolünü araştırmaktır. Bu çalışmanın ikincil amacı ise İçsel Değerlendirme İşlevselliği Ölçeği'nin (İDİÖ-8) Türkçe kısa versiyonunun faktör yapısı, yakınsak geçerlilik ve güvenilirliğini klinik olmayan bir örnekleme de incelemektir. 18-29 yaş aralığında olan toplam 330 kişi ilgili online anketleri tamamlamışlardır. İDİÖ-8'in psikometrik özelliklerini değerlendirmeye yönelik analizler, bu ölçeğin orijinal halinde ortaya konan iki faktörlü yapısından tek faktörlü versiyonunun bu çalışmada kullanmak için daha geçerli bir araç olduğunu ortaya koymuştur. Çalışmanın ana amacına yönelik olan diğer analizler, beliren yetişkinlik dönemindeki psikolojik iyi olma hali ile çocuklukta anne ve babadan algılanan ret ve şu andaki İDİ'nin düşük sevilere arasında negatif yönde anlamlı bir ilişki olduğunu göstermiştir. Ayrıca, anneden algılanan ret ve İDİ, bazı demografik özelliklerin ötesinde, regresyon analizinin tüm seviyelerinde psikolojik iyi olma halinin anlamlı yordayıcıları olarak bulunmuştur. Ancak, İDİ'nin düzenleyici rolüne yönelik hipotez doğrulanamamıştır. Sonrasında, İDİ'nin aracı rolünü araştırmaya yönelik yapılan ek analiz, onun psikolojik iyi olma hali ile anneden değil ancak sadece babadan algılanan ret arasında kısmen aracı bir rol oynadığını göstermiştir. Buna dayanarak, İDİ'nin çocuklukta algılanan baba reddi ile beliren yetişkinlikteki psikolojik iyi olma hali arasında bir tampon olabileceği sonucuna varılmıştır.

Çalışmanın tüm bulguları, çıkarımları ve kısıtlılıkları ilgili literatür ışığında tartışılmıştır.

## ACKNOWLEDGEMENTS

First and foremost, I am deeply grateful to my advisor Yasemin Sohtorik İlkmen for her dedication, guidance, endless support, and warm presence whenever I needed throughout this process. It would not be possible to write this thesis without her precious effort in each step of this study.

I am sincerely thankful to Serra Mderrisoęlu for her valuable comments and recommendations regarding this thesis and her contribution to my academic knowledge and enthusiasm regarding Clinical Psychology since my undergraduate years. I also owe special thanks to Alev avdar Sideris for accepting to be a part of my thesis committee and feeding this study with her valuable feedbacks.

I would like to express my deep gratitude to my supervisor Gler Okman Fişek for her supports, guidance, and wisdom that shed light on my way to become a psychotherapist. I am sure that her perspective, recommendations, and courtesy will be an important reference point throughout my entire professional life.

I would like to express my appreciation to my professor Nur Yenięeri for her support and encouragement that made me possible to get back on the road in the darkest period of my life. Her presence was so valuable to me. Besides, I owe thanks to her for deepening my way of theoretical and practical understanding with her incredible intellect and insight during my graduate years.

I am so thankful to my lovely friends and colleagues Asya Alıcı, Esra Akhseyinoęlu, Feyza Arslan, İpek opuroęlu, zlem Tanrısever, Romina Markaroęlu and Selen Yksel who provided a real “holding environment” and gently accompanied me in this challenging journey. I feel very lucky to meet and get this education with them.



I would like to express my gratitude to my dear friends Mehmet Can Tunca, Gökçe Yeniev, Duygu Yıldız, Mustafa Akay, and Elif Taşyürek for making me feel their support and companionship whenever I needed in this period. I am also grateful to my fellow Elif Bekler and our lovely Sisifos for their presence in my life. The affection and joy that I feel while living with them were my basic sources of motivation during this process.

Finally, I owe great thanks to my parents, brother, aunt, cousin, and grandparents for the labor, patience, and love that they showed to me while I was growing. They were always primary supporters of my academic life since my childhood. And, I am foremost thankful to Kadir Engil for making all hardships of life more tolerable with a gentle companionship and just by giving a hug in case of emergency.

*To my grandmothers Hüsnü & Ayşe...*

## TABLE OF CONTENTS

CHAPTER 1: INTRODUCTION .....	1
CHAPTER 2: LITERATURE REVIEW .....	5
2.1 Well-being .....	5
2.2 Emerging adulthood.....	14
2.3 Parental acceptance rejection theory (PARTheory) .....	18
2.4 Reflective functioning as a resilience promoting factor .....	31
2.5 Current study .....	41
CHAPTER 3: METHOD .....	44
3.1 Participants .....	44
3.2 Instruments .....	45
3.3 Procedure .....	53
CHAPTER 4: RESULTS .....	55
4.1 Descriptive statistics .....	55
4.2 Psychometric properties of RFQ-8 .....	56
4.3 Background characteristics and psychological well-being.....	59
4.4 Correlations between parental rejection, reflective functioning, and psychological well-being .....	60
4.5 Predictors of psychological well-being and moderator of reflective functioning.....	61
4.6 Additional analysis: Mediator role of reflective functioning .....	63
CHAPTER 5: DISCUSSION .....	65
5.1 Discussion of the results .....	66
5.2 Implications of the study .....	77

5.3 Limitations of the study and recommendations.....	79
CHAPTER 6: CONCLUSIONS .....	82
APPENDIX A: DEMOGRAPHIC INFORMATION FORM .....	87
APPENDIX B: ADULT PARENTAL ACCEPTANCE REJECTION	
QUESTIONNAIRE (ADULT PARQ) MOTHER FORM.....	88
APPENDIX C: ADULT PARENTAL ACCEPTANCE REJECTION	
QUESTIONNAIRE (ADULT PARQ) FATHER FORM.....	91
APPENDIX D: REFLECTIVE FUNCTIONING QUESTIONNAIRE(RFQ-8) .....	94
APPENDIX E: MINDFUL ATTENTION AWARENESS SCALE (MAAS) .....	95
APPENDIX F: COGNITIVE SUBTEST OF BASIC EMPATHY SCALE	
(BESCOG) .....	97
APPENDIX G: DEPRESSION ANXIETY STRESS SCALE (DASS-42).....	98
APPENDIX H: SCALES OF PSYCHOLOGICAL WELL-BEING (SPWB-84) ..	101
APPENDIX I: ETHICAL PERMISSION FORM .....	107
APPENDIX J: INFORMED CONSENT FORM.....	108
APPENDIX K: INFORMED CONSENT FORM (FOR BOĞAZICI UNIVERSITY	
STUDENTS) .....	110
REFERENCES.....	112

## LIST OF TABLES

Table 1. Demographic Characteristics of the Sample .....	45
Table 2. Descriptive Statistics of the Study Variables .....	55
Table 3. Correlations Between Unidimensional RFQ-8 and Related Measures .....	58
Table 4. Pearson Correlation Coefficients Among Parental Rejection, Reflective Functioning and Psychological Well-Being .....	60
Table 5. Multiple Hierarchical Regression Result for Psychological Well-Being ..	61

## LIST OF ABBREVIATIONS

BES:	Basic Empathy Scale
CFA:	Confirmatory Factor Analysis
CFI:	Comparative Fit Index
DASS:	Depression Anxiety Stress Scale
IPARTheory:	Interpersonal Acceptance Rejection Theory
MAAS:	Mindful Attention Awareness Scale
PARQ:	Parental Acceptance Rejection Questionnaire
PARTheory:	Parental Acceptance Rejection Theory
RF:	Reflective Functioning
RFQ:	Reflective Functioning Questionnaire
RFQ_C:	Certainty Subscale of Reflective Functioning Questionnaire
RFQ_U:	Uncertainty Subscale of Reflective Functioning Questionnaire
RMSEA:	Root Mean Square Error of Approximation
SES:	Socioeconomic Status
SPSS:	Statistical Package for Social Sciences
SPWB:	Scales of Psychological Well-Being
TLI:	Tucker-Lewis Index

## CHAPTER 1

### INTRODUCTION

Throughout the developmental process, there are various factors that hamper or protect the mental health of human beings. While some of these risk and protective factors were experienced in the past but continue to exert their impact in the current developmental period, some of them are related to current experiences or resources (Martin & Martin, 2002). In fact, the quality of current mental health depends on the complex interaction of these factors. So, even though they had similar experiences in the past, are currently living through similar experiences, or have similar coping resources in the present, people present with individual differences in their mental health status (Sroufe, 1997; Cicchetti & Rogosch, 2002). This study basically aims to investigate these individual differences in psychological well-being, which is a component of mental health. Specifically, it aims to examine the interaction between parental acceptance-rejection experienced in childhood and current reflective functioning on the psychological well-being in emerging adulthood period.

What makes a person mentally healthy is not just the absence of the symptoms of disorders, but likewise the presence of adaptive psychological functioning, also referred to as well-being (Keyes, 2002). There is no clear consensus regarding the dimensions that define well-being. However, researchers seem to have two broad philosophical perspectives, namely the "hedonic" approach focusing on the happiness, life satisfaction, and balanced positive and negative affect versus the "eudaemonic" approach which emphasizes being in touch with one's "true self" (Waterman, 1993), self-growth, the fulfillment of psychological needs, and functioning fully in the psychological sense (Huppert, Abbott, Ploubidis, Richards &

Kuh, 2010; Ryff, 2014). These conceptions are going to be discussed in detail in the following chapter.

Psychological well-being is closely related to how people handle transitions in the developmental process (Ryff, 2014). One of the transitional periods in life is between adolescence and adulthood, which is called emerging adulthood (Arnett, 2014). According to Arnett (2014), depending on the economic and cultural background, people take more time to move into stable adult roles in love and work. This delay has caused the emergence of a new developmental period that roughly includes ages between 18 and 29. Although universality of this period is questionable, young people in most developed and some developing countries seem to live through it (Arnett, 2014). Research shows that it is also a valid developmental period for urban and highly educated young people in Turkey (Çok & Atak, 2015). Emerging adulthood is a critical period in terms of psychological well-being because many changes ranging from neurological to socio-cultural takes place. While some of these changes introduce more psychological distress threatening the well-being, some of them provide new opportunities to escape from or cope better with early negative experiences and consequently supporting psychological well-being (Tanner, 2006).

Perceived parental care is one of the important factors which has an influence on psychological well-being. People who reported to have parents showing warmth and acceptance exhibited higher levels of psychological well-being in comparison to those with hostile, neglectful, authoritarian, pervasive or uninvolved parents (e.g., Rothrauff, Cooney & An, 2009; Huppert et al., 2010). Parental acceptance-rejection theory (PAR) proposes that the basic emotional need of the human being is getting affection, care, support and love, in other words, acceptance from attachment figures



(Khaleque & Rohner, 2002). However, some parents show attitudes including aggression, dislike, resentment, and neglect toward their children which are defined as parental rejection (Rohner, 2016). Early experiences with parental acceptance and rejection have serious consequences for well-being in adulthood (Rohner, Khaleque & Cournoyer, 2012). However, despite experiencing rejection, some people do not develop negative mental health outcomes, which may be a function of certain social cognitive abilities that facilitate healthy coping (Rohner & Lansford, 2017).

This study proposes that one such social cognitive ability leading people to cope effectively with early negative caregiving experiences can be reflective functioning ability. Reflective functioning (or mentalization) is a social cognition which allows people to perceive or interpret the behaviors of themselves and others in terms of internal states such as needs, desires, goals, and believes (Bateman & Fonagy, 2012). This capability allows people to differentiate the inner from the outer reality within the interpersonal contexts and switch flexibly from different internal mental sets (Fonagy, Gergely, Jurist & Target, 2002). It is theorized that mentalizing capacity develops based on the quality of the relationship with the primary caregiver, mostly the mother (Fonagy & Target, 1997). Briefly, as the mother mirrors the affective states of the child and identifies the frustrations of her, the child internalized this capacity over time (Fonagy & Target, 1997). Because such attitudes of the mother also facilitate a secure attachment relationship, it is proposed that attachment security and reflective functioning capacity go hand in hand (Fonagy et al., 2002). In case of insecure attachment with the caregiver, this ability can still develop as a result of other close relationships in any period of one's life (Stein, 2006). Research shows that genuine reflective functioning capacity can be a protective factor against early negative experiences or current distress (e.g., Fonagy

et al., 1996; Borelli, Compare, Snavely & Decio, 2015; Berthelot, Lemieux, Garon-Bissonnette, Lacharité & Muzik, 2019; Borelli et al., 2020), because it allows people to securely explore the mental states of themselves and others, effectively regulate negative affect, and be open to accepting help for self-regulation (Bateman & Fonagy, 2012). On the other hand, deficiencies in mentalizing capacity can be related to the presence of some psychological disorders like borderline personality disorder, depression, eating disorders, and drug addiction (Bateman & Fonagy, 2012) as well as low levels of well-being (e.g., Fonagy et al., 2016; Ballespi, Vives, Debbané, Sharp & Barrantes-Vidal, 2018; Borelli et al., 2019).

A literature search reveals an abundance of studies investigating the links that psychological well-being has with perceived parental rejection and reflective functioning ability. However, the role of reflective functioning ability as a resilience factor between perceived maternal or paternal rejection in childhood and psychological well-being in emerging adulthood period has not been studied. Therefore, this study aims to fill this gap in the literature. Additionally, although there is a short Turkish version of Reflective Functioning Questionnaire (RFQ-8), currently there are no studies that investigated its validity in a Turkish context. Therefore, another goal of this study is to evaluate the validity of Turkish version of RFQ-8 and analyze its factor structure in a Turkish sample.

## CHAPTER 2

### LITERATURE REVIEW

In this chapter, first, the meaning of well-being will be discussed by tapping into different theoretical approaches in the literature, and its conceptualization in the current study will be described. Second, the definition of emerging adulthood and the importance of this period of life in terms of well-being will be addressed. Third, the importance of the relationship with parents in the childhood period and its impact on later periods of life will be explored based on the Parental Acceptance Rejection Theory. Finally, reflective functioning ability and its protective role on psychological well-being will be examined.

#### 2.1 Well-being

Until the second half of the last century, the primary focus of the researchers interested in psychology and mental health was healing psychological disorders. However, since the 1960's, the focus of attention has shifted toward prevention approaches by improving psychological well-being of individuals (Ryan & Deci, 2001). According to World Health Organization, mental health is an essential component of health which is currently described as a “state of complete physical, mental and social well-being and not merely the absence of disease or infirmity” (2018, para.1). For many years now, researchers have been conceptualizing mental health as a state consisted of presence of well-being in addition to the absence of illnesses (e.g. Cowen, 1991; Keyes, 2002). However, when the literature is overviewed, one cannot find a unified definition of the concept of well-being. It may be difficult to come up with a single definition of well-being because it is basically a

value-laden concept that can also change from culture to culture (Cowen, 1994).

Therefore, how different researchers conceptualized the concept of well-being will be reviewed in the next section.

### 2.1.1 Different conceptualizations of well-being

Basically, the definition of the well-being concept is shaped around two distinct but overlapping perspectives which are based on different philosophies. One of these is the hedonic approach which defines well-being in terms of pleasure, displeasure, and satisfaction with life experiences. The other one is the eudaemonic perspective which describes well-being as a fulfilment of one's true self and finding or making meaning and purpose in life (Ryan & Deci, 2001).

The hedonic view can be traced to ancient Greek philosopher Aristippus who describes the basic aim of life as maximizing pleasure and happiness through the collection of hedonistic moments (Ryan & Deci, 2001). Philosophers from utilitarian tradition focused on the satisfaction of desires, pleasure, and minimizing pain, and claimed that maximizing the pleasure of people is necessary for building a good society (Ryan & Deci, 2001; Lambert, Passmore & Holder, 2015). Psychologists adopting the hedonic approach equated well-being to hedonism, gearing their studies and interventions to increase people's positive emotional states and minimize their suffering. Also, psychologists following the hedonic approach emphasized that pleasure or happiness does not just come from bodily sensations but can emanate from one's subjective judgments about their life, for example, after reaching a

valued goal (Diener, Sapyta & Suh, 1998). Overall, this perspective focuses on feelings and the affective valance of people's experiences to define well-being (Lent, 2004).

The term "Eudaimonia", which the eudaemonic view is based on, had been used by the ancient Greek philosopher Aristotle in his essay *Nichomachean Ethics* as "the highest of all goods achievable as the realization of one's true potential" (Ryff & Singer, 2008, pg. 2). Bradburn (1969), who is a researcher interested in structuring psychological well-being, translated this term as "happiness" and operationalized it as the balance between positive and negative affect. However, other researchers interested in well-being such as Waterman (1984) and following him, Ryff (1989) disagreed with him and argued that the term eudaimonia is more than happiness and gratification of human desires. In fact, Aristotle basically emphasized that all pleasurable actions do not bring about good outcomes for humans. Therefore, it is important to follow one's virtues in life by deliberately balancing the experiences of pleasure and pain and striving to realize one's unique potential within the bounds of possibility (Ryff & Singer, 2008). Following this philosophical perspective, Waterman (1993), described well-being as living one's life consistent with one's "true self," feeling alive, and existing authentically according to who someone really is. These states are described by Watermen as *personal expressiveness* which is related to human growth. Personal expressiveness and hedonic enjoyment can go hand in hand, but the first one is more associated with making effort, feeling challenged and competent, and the latter one is basically related to being happy by staying away from problems (Waterman, 1993). Within this philosophical perspective, a life-span developmental psychologist Ryff (1989) investigated different theories regarding optimum psychological functioning taking from clinical,

developmental, existential, and humanistic psychologies. Consequently, she defined well-being as consisting of self-acceptance, having autonomy, finding purpose in life, environmental mastery, continuous personal growth and having positive relations with others. Similarly, Ryan and Deci (2001) adopted the eudaemonic perspective and in the scope of their self-determination theory, they defined the basis of well-being as a fulfillment of basic psychological needs: autonomy, competence, and relatedness. In brief, researchers adopting the eudaemonic perspective basically focused on thinking and behaviors rather than merely the feelings of people to define well-being (Lent, 2004).

Parallel with the aforementioned approaches, researchers interested in well-being used different indicators of well-being. In the literature, those following hedonic view operationally defined well-being as a composite of positive life satisfaction, presence of positive affect and absence of negative affect, and named this as subjective well-being. On the other hand, researchers adopting the eudaemonic approach focused on psychological functioning to define well-being, most frequently used Ryff's six-dimensional model called psychological well-being (Keyes, Shmotkin & Ryff, 2002). In fact, both approaches reflect individuals' subjective evaluations regarding their lives. There is also objective well-being which can be defined as welfare and is based on concrete societal indicators such as education, health, housing, employment, and security of life (Huppert, 2014).

As opposed to theoretical distinctions between different approaches of well-being, some researchers claimed that both theories indicate the same construct, so it is unnecessary to make such a philosophical and scientific distinction (e.g., Kashdan, Biswas-Diener & King, 2008). However, other researchers showed that the "happiness" aspect measured by subjective well-being and "meaning" aspect

measured by psychological well-being are highly related but two different dimensions of well-being (Keyes et al., 2002), a finding replicated in cross-cultural examinations (Disabato, Goodman, Kashdan, Short & Jarden, 2016). For example, participants in a national mental health study conducted in the USA differed in hedonic and eudaemonic well-being underscoring the need to treat these concepts separately to conduct proper preventions and interventions (Keyes & Annas, 2009). Furthermore, some researchers argue that while the hedonia is about cognitive and affective experiences, eudaimonia is about mental functioning and orientation (Huta & Watermen, 2014). This distinction may be related to differences in the focus of interest, namely emotional experiences versus functioning of individuals (Huta & Watermen, 2014).

Apart from the two different theoretical approaches which propose distinct conceptual and operational definitions for well-being, some researchers in the field use both explanations and measurement tools that evaluate both concepts. For example, according to Keyes (2007), for complete health or flourishing, people need both eudemonic and hedonic well-being. Therefore, under his conceptualization of subjective well-being, he includes emotional well-being indicating hedonic aspect, psychological well-being indicating eudaemonic aspect, and social well-being focusing on individuals' functioning in the social sphere. Similarly, emphasizing both approaches, Huppert (2009) describes well-being basically as "feeling good and functioning well."

To sum up, some researchers approach the concept of well-being from different, but overlapping angles and some of them integrate the two views to define a unified concept. This study will utilize psychological well-being, a eudemonic perspective, as operationalized by Ryff (1989) which is a commonly used definition

in the world as well as in Turkey. In the next sub-section, a more detailed definition of psychological well-being and its antecedents will be discussed.

### 2.1.2 Ryff's psychological well-being

Around thirty years ago, Ryff (1989) argued against the dominating well-being approaches, criticizing them as lacking a theoretical background. She questioned the meaning of “happiness” and emphasized the importance of the eudemonic approach which can be traced back to ancient Greek imperatives “to know yourself” and “to become what you are” for defining well-being (Ryff, 2014). While building this description of well-being, she drew on some theories of clinical, developmental, humanistic, and existential psychologists who previously defined positive psychological functioning from their perspectives. By combining these approaches, Ryff (1989) defined six components of psychological well-being.

One of the dimensions of Ryff's psychological well-being is *purpose in life*. This dimension means finding or creating certain meaning in past and present life, having a sense of directedness and some goals for the future. It was broadly taken from Frankl's (1959/1992) works on the importance of searching for meaning in the face of adversity, and Allport's (1961) concept of “maturity” defined as a state of understanding the purpose of life (Ruini & Ryff, 2016). According to Ryff and Singer (1998), although contents of the purposes in life can change from culture to culture, searching meaning and finding a purpose in life is not culture-specific, but a universal sign of wellness. Similarly, building high-quality relationships with others is a core element of well-being regardless of culture, because, from the beginning of life, human beings need deep and meaningful connections with significant others (Ryff & Singer, 1998). The second dimension, *positive relations with others*



indicates the ability to build warm, trusting, satisfying, and intimate relations with others and to be able to feel concerned about their well-being at the same time (Ryff, 2014). Initially, Freud mentioned the ability to love as a sign of mental health (as cited in Erikson, 1951/1993). Jahoda (1958) also included this as a component in her mental health description. In Erikson's (1959) theory on life span development, intimacy with others was considered as one of the basic milestones in healthy development, especially during the young adulthood period. Also, building warm relations and the capacity for love are important features of self-actualization in Maslow's theory (1968) and maturity in Allport's theory (1961). By drawing on these theories, Ryff included positive relations with others as an indicator of psychological well-being (Ruini & Ryff, 2016).

The third dimension, *self-acceptance*, refers to have a positive attitude or regard toward self in the present and past, acknowledging both good and bad qualities, and feeling satisfied with whoever one is (Ryff, 2014). Almost all the theories that Ryff drew on emphasized self-acceptance as one of the key factors for positive psychological functioning (Ruini & Ryff, 2016). *Personal growth*, the fourth dimension, means having a sense of self that is everchanging and developing over time, being open to new experiences, and knowing more about the self with an intent to change (Ryff, 2014). According to Ruini & Ryff (2016), this dimension is the closest to the meaning of Aristotle's term, *eudaimonia*. The ongoing process of becoming throughout life was emphasized by Rogers (1961) as a definition of a fully functioning person. Additionally, life span theorists like Buhler (1935), Erikson (1959), and Neugarten (1968) especially focused on the continued development and the struggles faced in different periods of life.

Two remaining aspects of psychological well-being defined by Ryff, namely *environmental mastery* and *autonomy*, were taken from Jahoda's (1958) positive mental health concept. Environmental mastery indicates self-efficacy or a sense of control and competence over the external affairs, activities, and contexts as well as the sense of agency to change them to create an environment that fits the needs of the person and being aware of and able to use of different opportunities in life (Ryff & Singer, 2008; Ryff, 2014). The importance of this aspect of wellbeing was also mentioned in life span developmental theories especially for the midlife period, and in the theory of Allport as a feature of maturity (Ryff & Singer, 2008). The final dimension, autonomy means having personal standards for evaluating the self, being able to regulate the behaviors from within, being an independent individual, and not conforming to social pressure to act or think in a certain way (Ryff, 2014). The importance of individuation was also emphasized by Jung (1933). Maslow (1968) proposed autonomous functioning as a characteristic of idealized self-actualizers, and Rogers (1961) accepted having an internal locus of evaluation as a feature of a fully functioning person. However, it should also be noted that this dimension is more related to the values of individualistic, Western cultures compared with other dimensions (Ryff & Singer, 2008).

Studies investigating psychological well-being in the last 30 years showed that it has a significant negative relationship with psychological disorders and physical diseases (Ryff, 2014). For example, some studies showed that depression and anxiety levels were negatively correlated with all dimensions of psychological wellbeing (e.g., Ryff, 1989; Winefield, Gill, Taylor & Pilkington, 2012). Results of a longitudinal study showed that individuals with the lower level of psychological well-being are two times more likely to have depression 10 years later (Wood &

Joseph, 2010). Another longitudinal study showed that in 10 years, a positive change in the level of well-being predicts a decrease in prevalence and incidence of major depression, panic, and generalized anxiety disorders, whereas the decrease in well-being predicts an increase in those mental disorders (Keyes, Dhingra & Simoes, 2010). Also, studies about physical health showed that some problems like physical disability, Parkinson's disease, and fibromyalgia are related to diminished psychological well-being (Schleifer et al, 2005; Ruini & Ryff, 2016). Similarly, higher levels of different dimensions of psychological well-being were found to be related to lower cardiovascular risk, better sleep quality, lower inflammatory response, and lower cortisol levels which are biomarkers of stress (Ryff, Singer & Dienberg Love, 2004). Besides these, brain studies showed that higher levels of eudemonic well-being are related to increased insular cortex volume which also plays an important role in emotion regulation and higher-order cognitive functioning (Ruini & Ryff, 2016)

In this study, Ryff's psychological wellbeing model was chosen for several reasons; firstly, it is more theory-based and a comprehensive model tapping into various aspects of psychological functioning as described above. Also, it has significant associations with physical and mental health outcomes. Furthermore, as opposed to hedonic well-being models, this eudemonic model approaches well-being not as a transient state, but something trait-like or more or less persistent characteristics of the people which is more consistent with the notion of this study. (Huta, 2016). Finally, contrary to the hedonic models, it focuses on not only personal but also the interpersonal nature of psychological functioning (Huta, 2016). In other words, it considers relationships with others as an important component of well-being along with self-related components.

According to the last comprehensive review done by Ryff (2014), various studies showed that psychological well-being has meaningful positive associations with empathy, emotional intelligence, adaptive coping strategies, effective handling of life transitions, and less rigid self-perception. It also has negative associations with early and current adverse experiences with parents, and experience of physical and emotional violence. In the following sections, contextual, social, and self-related factors interacting with psychological well-being will be discussed.

## 2.2 Emerging adulthood

### 2.2.1 Definition of emerging adulthood

Various demographic changes have taken place in the last sixty years. For example, the number of people having higher education has increased, extending student status, and delaying the age of marriage and parenthood in the developed and most of the developing countries (Arnett, 2014; Atak & Çok, 2010). According to Arnett (2000), these changes have triggered an alteration in the developmental period between adolescence and adulthood, because of the delay in having stable adult roles in terms of work and love. Therefore, he described a theoretically and empirically distinct developmental period between adolescence and adulthood and called it “emerging adulthood” (Arnett, 2000). He claimed that the age range for this period may change, for example from 18 to 25 or 18 to 29, since it is difficult to specify a clear-cut end point for it. The former is used as a more conservative range, but the latter is also legitimately used because many people do not have stable adult roles until the age of 30 in many industrialized and developing countries (Arnett, 2014).

The theoretical roots of the emerging adulthood concept were based on the early studies of Erikson (1968) regarding life span development. He mentioned a

period after adolescence in which adaptation of some adult roles and commitments are delayed, instead, the youth freely and playfully explore different roles or niches in the society to find a suitable role for themselves. Erikson (1968) named this period the “psychosocial moratorium” and emphasized that there is such a moratorium period for young people in each culture and society which allows exploring different societal roles and occupations consistent with the values of that specific culture. Even though Erikson was the first author to address this period between adolescence and young adulthood, he did not approach it as a distinct stage nor mentioned specific age periods. Arnett (2000) on the other hand described emerging adulthood as a transition and a separate developmental stage between adolescence and young adulthood. In multiple studies he conducted in the United States, he found that the majority of young people were unsure as to whether they see themselves as adults until the end of their twenties (Arnett, 2000; 2014).

It is important to note that emerging adulthood cannot be treated as a universal developmental period of life. Arnett (2000), indicated that this period is prevalent only for the cultures which allow the delay of having adult responsibilities and roles like marriage and parenthood. So, while this period exists in all Western cultures and industrialized Eastern countries, in developing countries it can be seen in more industrialized urban areas, rather than in rural ones (Arnett, 2000). According to a recent study examining the existence of this period in Turkey, urban and educated young people seem to experience emerging adulthood period in this country as well (Çok & Atak, 2015).

Arnett (2014) proposed five features that distinguish emerging adulthood as a distinct and separate period of life. One of them is *identity exploration* which refers to experimenting with different possibilities in terms of love and work before making

enduring commitments. Another feature, *instability*, basically describes unstable relationships and work as well as the residential place. *Feeling in between* is another feature of this period referring to the feeling of neither an adolescent nor an adult. This is due to the increased independence from the surveillance of parents, capacity to take own responsibility and making independent choices, but on the other hand not being totally capable of actualizing these responsibilities and choices and being financially dependent. Another common feature of emerging adulthood, *being self-focused*, refers to becoming a self-sufficient person while having little responsibility or commitment to others. Lastly, emerging adulthood is featured by *having many possibilities* to realize the hopes and dreams, and opportunities to change previous adversities. These specific features of the emerging adulthood period may have some positive or negative impacts on optimum psychological functioning. Therefore, well-being in this period of life will be examined in the next section.

#### 2.2.2 Importance of emerging adulthood period in terms of well-being

The emerging adulthood period is seen as a critical turning point in terms of well-being because the changes taking place in this period may bring both positive and negative consequences for mental health (Tanner, 2006). There are many biological and social contextual changes experienced in this period. For example, biologically, developments taking place in the prefrontal cortex may result in better executive functions including cognitive flexibility, inhibitory control, and working memory (Burt & Paysnick, 2012). In the social-contextual arena, there are changes in social roles, and depending on the living arrangements, one may move out of parents' place, start to live in a different place with different people or meet with people

coming from different backgrounds, and there may be some changes in the context and the culture (Schulenberg & Zarret, 2006).

Consequences of these changes in terms of mental health are basically dependent on the earlier adaptations and the match or ongoing interaction between the person and the changing context (Schulenberg & Zarret, 2006). For instance, some of the prominent features of this period like identity exploration, instability, getting less social support linked with being more self-sufficient, and feeling in between are found to be significantly related to depression and anxiety symptoms (Arnett, Žukauskienė & Sugimura, 2014). However, some empirical studies showed that having warm, accepting, emotionally supportive, and authoritative parents play a protective role in the internalizing and externalizing symptoms of emerging adults just like they do for children (Steele & Mckinney, 2019). Having secure attachment relationships with parents and romantic partners are related to higher well-being in this period of life (Guarnieri, Smorti & Tani, 2015; Lane, Leibert & Goka-Dubose, 2017). On the other hand, some changes that take place in this period of life provide some resources for those who experienced adverse life events or grew up in a negative family environment to develop better adaptation (Masten, Obradović & Burt 2006). For example, individual factors like cognitive development, newly established relationships with peers or adults other than parents, moving outside the negative family environment, and increasing socioeconomic status as a result of employment can facilitate positive mental health outcomes (Masten et al., 2006). In the following section, the quality of earlier relationships with parents is going to be discussed as a distal factor that has an influence on current psychological well-being during emerging adulthood within a theoretical framework, namely Parental Acceptance Rejection Theory.

### 2.3 Parental acceptance rejection theory (PARTheory)

As an evidence-based, life span development and socialization theory, parental acceptance-rejection theory (PARTheory), basically focuses on the effect of parental acceptance and rejection behavior on the psychological adjustment of children, adolescents, and adults. It was first developed by Rohner in the 1960s. Since then, PARTheory tries to explain the consequences and other related factors of parental acceptance and rejection through the studies conducted in various cultures (Rohner & Lansford, 2017). By the 2000s, PARTheory started to focus on acceptance and rejection in other important relationships such as romantic and peer relations along with parental ones. Due to this expansion in the scope of the theory, in 2014, its name has changed into Interpersonal Acceptance and Rejection Theory (IPARTheory) (Rohner, 2016). However, despite the change in its name, the theory still centers around the psychological impact of perceived parental acceptance and rejection (Rohner & Lansford, 2017).

According to IPAR Theory, interpersonal acceptance refers to behaviors and attitudes expressed by an important figure such as a parent or partner to convey affection, warmth, and basically love to the child or partner. These may include physical acts like kissing and hugging or verbal attitudes such as praising (Rohner, 2016). On the other hand, interpersonal rejection refers to the outward display of hostility or aggression, indifference, or neglect and “undifferentiated rejection” to the child or partner. Hostility or aggression includes physical and verbal abuse like kicking, hitting, cursing, mocking, or humiliating. Indifference or neglect is defined as unavailability to satisfy the physical and psychological needs of the significant other, such as not attending to other’s need for being comforted, not showing attention to the bids for connection, or remaining unresponsive or inaccessible.



Rohner (2016) emphasized that besides the outward display of hostility, abuse and neglect, it is also important to consider the subjective feeling of rejection by significant other even in the absence of observable behavioral signs. Despite the absence of concrete behavioral examples of rejection, having a feeling of not being wanted or loved by the parents is called “undifferentiated rejection” (Rohner, 2005a). This is accepted as another category under rejection. Both interpersonal acceptance and rejection explained above constitute the warmth dimension of the relationships (Rohner, 2016). This dimension is considered as a continuum where acceptance is located on the one end and rejection on the other. Therefore, it can be said that interpersonal or parental acceptance and rejection measures the level of warmth in intimate relationships.

IPARTheory basically investigates questions such as whether acceptance and rejection perceived from significant others lead to certain behaviors in children, and how these behavioral patterns extend into adulthood; how some children or adults show more resilience and less disturbance in the face of rejection; and what are the social-cultural factors that cause parents to differ in their accepting and rejecting attitudes (Rohner & Lansford, 2017). To answer these questions, IPARTheory proposes separate sub-theories, including personality, coping, and sociocultural sub-theories. These sub-theories will be explained in the following sections.

### 2.3.1 Personality sub-theory

Personality sub-theory explains the effects of perceived interpersonal acceptance and rejection in terms of mental health and personality of children and adults (Rohner, 2016). Human beings are evolutionarily and culturally developed to seek proximity to significant others for care and comfort, which has a survival value (Bowlby,

1982). These significant others are called attachment figures in IPARTheory (Rohner, 2005a) as well as attachment theory (Bowlby, 1982). The child or adult develops a special and persistent emotional bond with an attachment figure, and this bond cannot be replaced by anyone else (Rohner, 2005a). While the attachment figure can be parents or another consistent caregiver for children, it can be an intimate partner for adults (Bowlby, 1982; Rohner & Lansford, 2017).

According to IPARTheory, personality is defined as “an individual's more-or-less stable set of internally motivated predispositions to respond (i.e., affective, cognitive, perceptual, and motivational dispositions) and actual modes of responding (i.e., observable behaviors) in various life situations or contexts” (Rohner, 2005a, p. 390). According to this theory, one of the external factors which play a role in shaping these predispositions is the nature of the responses provided by attachment figures. Emotionally significant experiences with an attachment figure in the past or present lead to the construction of certain mental representations about the self, the other, and the whole world. The concept of mental representation refers to some cognitive structures which are formed based on the repeated pattern of the relationships with the significant others (Baldwin, 1992). Repeated images regarding both self and other in a specific relationship and their emotional impacts are accumulated and generalized in time, by this way, constitute mental representations (Sandler & Rosenblatt, 1962). Once they were created, people view the self and the other through the lenses of such representations, interpret the upcoming information according to expectations and beliefs shaped by relationships with significant others (Rohner, 2005a). Mental representations about the self and the other complement each other (Bretherton & Munholland, 2008). For example, a representation for a loving and protective parent has a counterpart as a loved and secure self-

representation; or the representation of a neglectful parent might have its counterpart in the mind of the child as an unlovable or invaluable self-representation. Mental representations can be consciously recognized or remain totally unconscious (Rohner, 2005a).

On top of the fact that mental representations for the self and other are formed as a result of relational experiences and their emotional impact, they also play a role in giving meaning to the new experiences, so they influence an individual's way of perception, reaction, and affectivity for new experiences and memory for the past experiences (Baldwin, 1992). IPAR Theory assumes that people develop certain behavioral predispositions which become almost stable over time and are described as personality dispositions or psychological adjustment (Rohner, 2005a). One of these personality outcomes of perceived rejection from the attachment figures is *dependence* which is described as a constant need for reassurance and emotional nurturance from the attachment figure. For children, this behavioral pattern can be observed as constantly seeking proximity to the parent, crying when separated, whining, and clinging to parents. For adults, it can be observed in the form of jealousy and frequent neediness toward the partner (Rohner & Lansford, 2017). On the other hand, those who perceived acceptance from their attachment figures do not frequently need emotional support because such needs were adequately satisfied in the past. This behavioral tendency is conceptualized as *independence* by IPAR Theory (Rohner & Lansford, 2017). However, healthy independence should not be confused with defensive independence. Some chronically rejected people develop a tendency to deny their need for affection or positive responses from significant others, and they themselves become a rejecting figure, a tendency described as "defensive independence" (Rohner, 2016).

Other personality outcomes of the perceived rejection from parents or other significant others are aggression, hostility, and passive aggression as a function of the emotional pain and resentment induced by a significant rejection (Rohner & Lansford, 2017). Similarly, depending on the intensity and duration of the perceived rejection, people may emotionally close themselves off to the relationships in order to prevent further rejection and its insulting impact (Rohner, 2016). Therefore, they become emotionally unresponsive, in other words, they are unable to freely express their feelings to others, become uncomfortable in intimate relationships, and are incapable to form deep and meaningful bonding with others (Rohner, 2005a).

According to IPARTheory, experiences with a rejecting significant other is related to negative self-representations, including impaired self-esteem and self-adequacy (Rohner & Lansford, 2017). Impaired self-esteem is defined as disapproval, disliking, and an unaccepting attitude toward one's features alongside the feelings of inferiority and unworthiness as an individual (Rohner, 2005a). Likewise, impaired self-adequacy refers to feeling incapable to effectively handle daily tasks or problems (Rohner, 2005a). Negative feelings, impaired self-esteem, and a sense of inadequacy induced by perceived rejection can cause a reduction in the ability to successfully handle stress (Rohner & Lansford, 2017). Therefore, they have difficulty keeping their moods stable, instead, they quickly become angry, upset or anxious. Finally, generalizations of negative self and other representations shaped by parental rejection can lead to having a negative world view as a personality disposition (Rohner & Lansford, 2017). According to this sub-theory, people having certain personality dispositions such as low levels of aggression or hostility, low levels of dependence or defensive independence, positive self-esteem, self-adequacy

and world view, high emotional stability, and emotional responsiveness to others, are characterized as showing psychological adjustment (Khaleque & Ali, 2017).

In the scope of personality sub-theory, researchers investigated the relationship between parental acceptance and rejection with psychological adjustment around the world with people from different cultural and sociodemographic backgrounds (Rohner & Lansford, 2017). Also, several meta-analyses were conducted to explore these concepts cross-culturally. Recently, Khaleque and Ali (2017) reviewed 12 meta-analyses and summarized the results in terms of different postulates. In this review, two meta-analyses (i.e., Khaleque & Rohner, 2002; 2012) showed significant relationships between parental acceptance-rejection and the psychological adjustment of the offspring regardless of the culture in which the studies were conducted. Results also showed that the effect size of the correlation between parental acceptance-rejection and psychological adjustment is higher for children (around .51) than for adults (around .45). While parental acceptance-rejection predicts 26% of the variability in psychological adjustment for children, this ratio is 21% for adults (Khaleque & Rohner, 2002). Neither for children nor adults, effect sizes significantly differ between different cultures or across continents. This result confirmed the pancultural nature of the relation between parental acceptance-rejection and psychological adjustment in the offspring (Khaleque & Ali, 2017).

Some meta-analyses focused on the gender factor in the association between parental acceptance-rejection and the psychological adjustment of the offspring. For example, in one meta-analysis, perceived maternal acceptance (or rejection) had a significantly stronger effect on the psychological adjustment of male adult offspring than female one and perceived paternal acceptance had a significantly stronger

impact on adult daughters than adult sons across different cultures (Ali, Khaleque & Rohner, 2015). Another meta-analysis showed that perceived acceptance from fathers have a significantly higher impact on the psychological adjustment of the child but not adult offspring when compared with the perceived acceptance from the mother (Khaleque & Rohner, 2012). However, the reason for such differential effect of the gender of both offspring and the parents has not been clearly explained yet (Ali et al, 2015; Rohner & Lansford, 2017).

Empirical studies conducted for several years consistently indicated a relationship between parental acceptance-rejection and emergence of different psychopathologies and psychological well-being of individuals (Rohner & Britner, 2002). According to a review conducted by Rohner and Britner (2002), parental and other interpersonal rejection were significantly and consistently associated with depressive affect, clinical and nonclinical depression in children, adolescents, and adults, externalizing behavior problems and delinquency in children and adolescents, and substance abuse, especially in adolescents. These associations were consistent in different countries and cultures.

Although it is not as common, there are also several studies investigating the relationship between parental acceptance-rejection and psychological well-being. One of the recent studies focused on the relationship between perceived parental acceptance-rejection and the psychological well-being of transgender individuals (Reyes et al., 2020). In this study, psychological well-being is defined according to Ryff's eudaemonic well-being. Results showed that both perceived maternal and paternal rejection have significant negative relations with overall psychological well-being. Results also showed that the association between parental rejection and psychological well-being is greater for maternal rejection in comparison with

paternal rejection. Another study investigated the relationship between parental acceptance-rejection and the psychological well-being of adolescents (Giovazolias, Karagiannopoulou & Mitsopoulou, 2017). They focused on positive relations with others and purpose in life dimensions of psychological well-being. Results showed that both maternal and paternal acceptance is significantly associated with psychological well-being. Another study examined the relationship between parental acceptance-rejection and one dimension of Ryff's eudemonic well-being, namely the self-acceptance dimension, among young Turkish adults (Kuyumcu & Rohner, 2016). Results of this study showed that both maternal and paternal acceptance have significant positive associations with self-acceptance for both women and men. However, according to the results of multiple hierarchical regression, while only paternal acceptance predicts self-acceptance for women, only maternal acceptance predicted self-acceptance for men.

Also, some empirical studies in the literature examined the relationship between parental warmth, namely acceptance, and well-being. For example, one study examined the link between perceived parental warmth and psychological well-being among emerging adults (García Mendoza, Sánchez Queija & Parra Jiménez, 2019). Psychological well-being in this study was defined using Ryff's eudaemonic well-being. Results showed that parental warmth (without considering maternal and paternal separately) was significantly correlated with psychological well-being among emerging adults. In a longitudinal research, Moran, Turiano & Gentzler (2018) examined the association between perceived parental warmth and affection in childhood and both eudaemonic and hedonic well-being in adults. Eudaemonic well-being was measured by Ryff's psychological well-being scales and hedonic one was measured by positive and negative affect. As in the previous study, perceived

warmth was not measured separately for each parent. Results showed that perceived warmth was significantly related to positive affect, negative affect, and eudaemonic well-being ten years and then twenty years later. Another longitudinal study investigated the link between perceived parental warmth and flourishing which is composed of emotional, psychological, and social well-being in the midlife period (Chen, Kubzansky & VanderWeele, 2019). Results indicated that parental warmth was significantly associated with emotional, psychological, and social well-being distinctively as well as with the composite score, which indicates flourishing, 10 years later.

Some researchers also investigated the link between well-being and perceived parental rejection by focusing on neglect and emotional abuse which is conceptualized as a form of rejection (Rohner & Rohner, 1980). For instance, one study investigated the history of physical and psychological violence by parents in childhood and their links with psychological well-being and negative affect in adulthood (Greenfield & Marks, 2010). Results of this study showed that regardless of its frequency and severity levels, both physical and psychological violence from both parents were significantly related to increased negative affect. However, regardless of the presence of physical violence, only frequent psychological violence from mothers was significantly associated with decreased psychological well-being. On the other hand, for fathers, regardless of the frequency, both psychological and physical violence were found to have a significant link with decreased psychological well-being. Another longitudinal study investigated the link between neglect and abuse in childhood and well-being which was measured by both eudaemonic and hedonic well-being measures including anger proneness, self-esteem, autonomy, purpose in life, self-directedness, constraints (a concept similar to perceived



helplessness), happiness, and life satisfaction in adulthood (Herrenkohl, Klika, Herrenkohl, Russo & Dee, 2012). They found that child abuse has significant relations with anger, reduced self-esteem, autonomy, purpose in life, high constraints, and decreased life satisfaction. Furthermore, neglect was significantly associated with low self-esteem, lack of sense of autonomy, purpose in life, high constraints, and decreased life satisfaction. Similarly, another study investigated the effects of childhood abuse and neglect on psychological well-being in adulthood by looking at the mediating role of the current relationship with an abusive parent (Kong, 2018). In this study, psychological well-being was conceptualized using Ryff's psychological well-being model. According to the results, perceived neglect from the mother was negatively related with psychological well-being. Also, verbal abuse and physical abuse by fathers had significant negative associations with psychological well-being.

### 2.3.2 Coping sub-theory

The coping sub-theory of IPARTheory examines the resiliency factors that explain why some children and adults show relatively more positive mental health outcomes despite the perceived rejection (Rohner, 2005a). To answer this question, the theory focuses on different, but interacting factors that may play role in the coping process. Those factors are classified as those associated with the characteristics of the self, other, and the context (Rohner & Lansford, 2017).

According to Rohner (2016), some self-related factors which lead to effective coping with rejection may include certain biological dispositions, personality, and quality of mental representations. It is especially emphasized by IPARTheory that certain social cognitive abilities are expected to facilitate coping in the face of

perceived rejection. For example, “ability to depersonalize” or a “differentiated sense of self” can be counted as those social cognitive abilities (Rohner & Lansford, 2017, p.430). Personalizing is defined as an automatic attitude interpreting the relatively objective incidences or interpersonal interactions as if they are associated with the self (Rohner, 2005a). Such misinterpretations of the people who have difficulty to depersonalize are generally made in a negative way. For example, they can believe that purpose of someone in behaving in some way is to reject or hurt their feelings although there is not a clear clue for this reasoning. Depersonalizing, on the other hand, protects the self because it allows people to interpret ambiguous events or social interactions in a more positive way (Rohner, 2016). Besides, a fairly differentiated sense of self enables people to be aware of their physical and psychological separateness from others. Having a separate sense of identity facilitates differentiating the feelings and thoughts belonging to “me” and feelings and thoughts of the others “about me” (Ki, Rohner, Britner, Halgunseth & Rigazio-Digilio, 2018).

Other significant relationships in one’s life and social features in the living environment are included as the contextual factors that have the potential to facilitate coping in the face of interpersonal rejection (Rohner, 2016). Specifically, it is hypothesized that by keeping all other factors equal, the presence of at least one warm and accepting attachment figure leads to higher coping ability with the perceived rejection (Rohner & Lansford, 2017). Also, in life span development, positive interpersonal or personal experiences outside the family, like satisfying intimate relationships, work experiences, or successful psychotherapy can facilitate coping and lead to positive mental health consequences despite perceived parental rejection in childhood (Rohner & Lansford, 2017).

In the scope of the coping sub-theory, two types of individuals with different coping behaviors are described. One group is called *affective copers* which includes people having good mental health outcomes although they perceived significant rejection from their attachment figures. On the other hand, *instrumental copers* refer to those who are good at “task-oriented activities” such as being successful at work or academic field but suffer from certain psychopathologies or poor psychological functioning (Rohner, 2016). However, it is important to note that, affective copers still have a greater risk to experience mental and/or physical health problems than those who do not experience significant rejection from attachment figures (Rohner & Lansford, 2017).

Compared to other components, the coping sub-theory is a less developed and studied aspect of IPARTheory (Rohner, 2016). A recent international study investigated various features of affective copers including gender, age, and their percentage among rejected people (Ki et al., 2018). Furthermore, the moderator effect of one accepting parent and the mediator effect of romantic partner on the relationship between parental rejection and psychological adjustment of offspring were investigated in this study. According to the results, 40 percent of seriously rejected people showed effective coping with negative parenting experiences. Furthermore, younger people were coping better than other age groups. Also, the presence of one accepting parent as a protective factor only emerged for female affective copers. In other words, although females perceived serious rejection from one of the parents, they are well-adjusted if the other parent is perceived as an accepting figure. Furthermore, perceived rejection from the partner was a mediator in the relationship between perceived parental rejection and psychological

maladjustment only for those who could not show effective coping in the face of parental rejection, namely non-copers.

The present study will examine a self-related factor, reflective functioning ability which has the potential to positively contribute to coping in the face of perceived parental rejection in childhood. As a social cognitive ability, reflective functioning plays a key role in self-organization, differentiating internal and external reality, forming and organizing multiple self and other representations, and flexibly switching between those different mental sets (Fonagy et al., 2002). Consequently, reflective functioning may facilitate the development of a differentiated sense of self and ability to depersonalize which are described as coping factors related to self by this sub-theory (Rohner, 2016).

### 2.3.3 Sociocultural sub-theory

This sub-theory basically focuses on the contextual causes and correlates of parental acceptance and rejection behavior (Rohner & Khaleque, 2012). “Sociocultural system model” of IPARTheory explains how parental acceptance or rejection behaviors are determined considering the roles of the family context, other social institutions, and the culture at large (Rohner, 2016).

According to the model, some societal factors including the structure of the family, and economic and political organizations play roles in determining parental acceptance and rejection behaviors. These impact the psychological development of the child as presented in the personality sub-theory (Rohner & Khaleque, 2012). In addition to this, there are also bidirectional relationships between the elements of the sociocultural system. (Rohner & Lansford, 2017). For example, as acceptance and rejection behaviors of the parents shape the psychological development of the child,

some characteristics of the child, such as his/her temperament have an impact on the attitudes of parents as well (Rohner & Lansford, 2017). Furthermore, although in the first place, people create the cultural codes of their society like folkloric, artistic, or religious traditions, eventually those traditions influence the internal and external world of people along with their parenting attitudes (Rohner, 2016).

This study does not aim to explain possible contextual factors that have an impact on acceptance or rejection behaviors perceived by the parents. However, it aims to examine perceived parental rejection and its effect on the psychological well-being of the offspring in a Turkish context.

#### 2.4 Reflective functioning as a resilience promoting factor

Reflective functioning (or mentalization)<sup>1</sup> is a social-cognitive capacity that allows an individual to understand and interpret one's own and other's behaviors in terms of internal mental states such as feelings, needs, beliefs, desires, and goals (Bateman & Fonagy, 2012). This capacity is thought to have evolutionary importance for human beings. It facilitates understanding or predicting the intentions of others, by this way, leads individuals to build deep social connections, cooperate, alleviate aggressive actions related to competition, and transmit shared knowledge from one generation to another (Luyten, Campbell, Allison & Fonagy, 2020). Therefore, mentalization capacity provides an advantage in adaptation to the social environment and increases the possibility of survival. (Luyten et al., 2020). Mentalization is thought to include several concepts that tapped into different aspects of social cognition such as the theory of mind (ToM), mindfulness, empathy, psychological mindedness, insight, and alexithymia (Choi-Kain & Gunderson, 2008; Bateman & Fonagy, 2012).

---

<sup>1</sup> "Reflective functioning" indicates operational definition of "mentalization". They are used synonymously in this study.

Therefore, it is also accepted as a broad “umbrella concept” (Luyten et al., 2020, pg. 9.7).

Development of this concept basically depends on psychoanalytic literature and attachment theory. In psychoanalytic literature, the concept of “containment” proposed by Bion (1962) refers to the transformation of intolerable impulses, needs, and emotions into thinkable, meaningful experiences especially in the context of mother and infant dyadic relationships. This transformation process indicates the necessity of a reflective function for realizing, organizing, and making meaning of unbearable, pre-symbolic wishes or affects, which operates as a containment process (Allen, Fonagy & Bateman, 2008). In the early 1960s, initially, French psychoanalysts introduced the concept of “mentalization” as a mental function that plays a role in the transformation of affect-driven somatic experiences into more symbolized forms (Lecours & Bouchard, 1997). British psychoanalyst Winnicott (1971) specifically focused on the role of the caregiver and her “mirroring” response to the infant which can be described as understanding the internal states of the infant and reflecting the modified form of such states back to her/him. Perceiving the processed and mentalized form of her/his needs, feelings, and purposes through the mirroring behaviors of her/his mother, the infant starts to develop a true and mentalized sense of self (Allen et al., 2008). Following Winnicott’s emphasis on mirroring role of the caregiver, in attachment theory, Bowlby (1982) focused on the role of the caregiver as a provider of a “secure attachment” relationship. In this relationship, the baby feels himself/herself in the comfort of being with his/her caregiver. Also, s/he experiences the caregiver as a “secure base” to freely explore both external and the internal world, namely mental states.

Depending on these theories, Fonagy and colleagues reintroduced the concept of mentalization and its operational definition, reflective functioning (Fonagy et al., 2002; Allen et al., 2008). Assessment of reflective functioning was first conducted by Fonagy, Target, Steele & Steele (1998) based on a coding system that is applied to semi-structured Adult Attachment Interview. Later, in order to make the assessment procedure easier, Reflective Functioning Questionnaire (RFQ) was developed by Fonagy et al. (2016). This tool was produced to measure two different impairments in mentalization capacity. One of them is *hypo-mentalization* which refers to the inability to know the mental states of the self and the other, namely having high levels of uncertainty about the internal world. On the other hand, Fonagy et al. (2016) underscored another impairment which shows itself as a tendency for having excessively detailed, but inaccurate models about the mental states of the others. People with this pseudo mentalization which is also called *hyper-mentalization* may groundlessly think that they are good at knowing the minds, they are too certain about the mental states by disregarding the opacity of the mind, therefore they may give biased answers in the measures assessing mentalization. However, genuine mentalization capacity is defined as showing neither an excessive amount of certainty nor uncertainty about the internal world of the self and the other (Fonagy et al., 2016).

Fonagy et al. (2002) proposed that reflective functioning capacity develops in the secure attachment context because it allows the child to realize his/her own needs and affects, and take action to regulate them. Furthermore, this capacity is the basis of the formation of the psychological self, and impairments in it constitute a risk factor for certain personality disorders (Fonagy et al., 2002). The theory regarding the development of the mentalization capacity of a human being has recently

undergone some changes. In the previous formulation, the development of mentalization capacity was considered as mostly depending on the mother-infant dyadic relationship in the early periods of life (Luyten, et al., 2020). According to this formulation, mentalization capacity develops as a function of the secure attachment style of the parent, mostly the mother, through the mediator role of the mentalization capability of the mother. In other words, mothers who have secure attachments are able to better understand and mirror the needs, desires, and feelings of the child, and allow him/her to explore the environment. This allows the child to develop cognitive, emotional, and social capacities including mentalization (Luyten et al., 2020). However, later, there was a shift in this view toward considering more about contextual factors such as family, peers, neighborhood, broader environment, and culture in the development of mentalization (Fonagy, Luyten, Allison & Campbell, 2017; Luyten et al., 2020). According to this view, parental reflective functioning ability, which is highly influenced by such contextual factors, leads to the establishment of both secure attachment and mentalization capacity of the child. In other words, instead of parental availability, sensitivity or secure attachment, a social context addressing the mental states facilitates the development of the mentalization capacity of the child (Luyten et al., 2020). Besides, as a higher-order cognitive ability, mentalization is also affected by some biological dispositions like variabilities in executive functions (Németh, Péterfalvi, Czéh, Tényi, & Simon, 2020), and it is modified as the relationship context changes (Fonagy et al., 2017).

Neuroimaging studies helped to reveal that there are different aspects of mentalization and some imbalances between them may result in impairments in this capability. (Bateman & Fonagy, 2012). For example, the automatic (implicit) aspect of mentalization occurs faster, in a reflexive way in daily interactions, and requires



less attention. The function of it basically depends on processing sensory information, so, involves mostly evolutionarily older brain systems like the amygdala, basal ganglia, lateral temporal, ventromedial prefrontal, and dorsal anterior cingulate cortex (Lieberman, 2007). On the other hand, controlled (or explicit) mentalization is a slower and conscious process, requires attention, awareness, and reflection (Luyten et al., 2020). It is based on symbolic and linguistic information, and evolutionarily involves recent neural systems like the lateral and medial prefrontal cortex (Lieberman, 2007; Fonagy, Bateman & Luyten, 2012). Highly controlled mentalization may cause hyper-mentalization which refers to mentalizing in an excessively detailed way while disconnecting from reality and the affective aspect. Likewise, a balance between different neural systems plays a role in the capacity to understand and differentiate the mental states of both self and the other (Fonagy et al., 2012). As a more automatic, developmentally more primitive, and body-based system, mirror neurons, lead to know the feelings, behaviors, and sensations of others through their direct simulation and embodiment of them inside the self (Gallese, Keysers & Rizzolatti, 2004). On the other hand, the system called mental state attribution which develops later through interpersonal relationships is involved in more abstract and symbolic information processing (Ripoll, Snyder, Steele & Siever, 2013, Luyten et al., 2020). This system facilitates the process of keeping the experiences of the others apart from the self by restraining the shared representations system evoked by mirror neurons while observing the other. An impairment or imbalance in their functioning can cause an inability to distinguish the mental representations of others from those of the self. This leads to experience the intents and feelings of the other as belonging to the self, to be easily affected by the

attitudes of the others, therefore endanger the sense of agency and individuality (Fonagy et al., 2012).

#### 2.4.1 Reflective functioning and mental health

Reflective functioning can be described both as a risk factor for mental disorders and as a protective factor for psychological well-being. Impairment in reflective functioning capacity is most prominently and primarily associated with certain personality disorders. For example, it is argued that in the case of borderline personality disorder, there is impotence in internal, more controlled, and cognitive mentalization processes; in the case of antisocial, avoidant, and narcissistic personality disorders, there are problems in the affective aspect of mentalization, so there is an inability to know affective states of others (Fonagy & Luyten, 2018). Furthermore, the presence and duration of mood disorders like depression and anxiety can cause some impairments in mentalizing ability, and impairments in this ability can lead to vulnerabilities for mood disorders and prevent remission (Fischer-Kern & Tmej, 2019; Luyten & Fonagy, 2018). Distortions in reflective functioning are also evident in eating disorders, substance abuse, and drug addiction (Bateman & Fonagy, 2012), as well as post-traumatic stress disorder, autism, and attention deficit disorder (Luyten et al., 2020).

It can also be claimed that higher reflective functioning capacity is related with different aspects of psychological well-being. From very early on, what makes the internal and external world more meaningful for human beings is mentalized forms of the affect induced by different experiences. First, with the validation of emotional experiences through mirroring of a significant other, the baby starts to give meaning to her existence and develops a true self (Winnicott, 1971). In time,

developing awareness about the presence of different minds belonging to self and the other, indicating mentalization capacity, facilitates the development of a sense of self; this self takes responsibility for own behaviors, controls and regulates actions and emotions internally, and constructs a sense of self with a coherent past and certain goals for the future (Allen & Fonagy, 2006). Also, the ability to understand others in terms of mental states is a fundamental component of interpersonal relationships. These capabilities facilitated by reflective functioning contribute to various dimensions of psychological well-being.

A glance at the literature reveals significant positive associations between psychological well-being and reflective functioning. For example, one study examined the association between reflective functioning and Ryff's definition of psychological well-being (Fonagy et al., 2016). The results showed that higher levels of reflective functioning were associated with higher levels of well-being. Another study showed a positive link between reflective functioning and the quality of interpersonal relationships, which is one of the components of psychological well-being (Antonsen, Johansen, Ro, Kvarstein & Wilberg, 2016). Furthermore, in a longitudinal study, Borelli et al. (2019) investigated whether reflective functioning capacity measured in adolescence predicts general well-being, including positivity, vitality, self-control, general health as well as depression and anxiety in the emerging adulthood period. Their results indicated that reflective functioning was a significant predictor of general well-being in emerging adulthood when the well-being in adolescence was controlled. Furthermore, another study examined factors affecting the general well-being of psychotherapists and defined well-being as a composite of both negative and positive aspects of psychological functioning (Brugnera et al.,

2021). Results of this study again confirmed the positive relationship between higher reflective functioning and well-being.

A recent study conducted by Ballespí, Vives, Sharp, Chanes & Barrantes-Vidal (2021) examined the role of self and other related mentalization separately on social relations, academic performance, and well-being among adolescents. They defined well-being as happiness, self-esteem, and transcendence (having different purposes and aspirations in life), which seems like a combination of hedonic and eudaemonic definitions. Results showed that while self-esteem and transcendence have positive associations with only self-related mentalization, social functioning and happiness have positive associations with only other-related mentalization. Performance in academic and extracurricular activities was positively associated with both self and other related mentalization.

Also, some empirical studies focused on the relationship between psychological well-being and concepts that overlap with dimensions of mentalization. For example, the concept of psychological mindedness, which means showing interest in the internal worlds of the self and the other (Trudeau & Reich, 1995), is defined as a trait providing a tendency for mentalizing (Bateman & Fonagy, 2012). One study examining the relationship between psychological mindedness and psychological well-being found a significant positive link between them (Trudeau & Reich, 1995). Another study found that self-focused mentalization measured by self-reflection and insight was positively related with all dimensions of Ryff's eudemonic definition of psychological wellbeing and hedonic wellbeing (Harrington & Loffredo, 2010). Similarly, the concept of mindfulness is accepted as a self-focused aspect of mentalization (Luyten, Fonagy, Lowyck & Vermote, 2012). Bowlin and Baer (2012), examined the association between the dimensions of Ryff's

psychological well-being and mindfulness. Results of this study showed that except for one aspect, mindfulness has significant positive correlations with all dimensions of psychological wellbeing, and it predicts 13% of the variance in the psychological wellbeing of university students after controlling for other variables.

#### 2.4.2 Negative early experiences with parents and reflective functioning

From a developmental point of view, it is hypothesized that early adverse experiences with parents such as rejection in the form of neglect or physical, sexual, or emotional abuse may hinder mentalization ability (Fonagy & Target, 1997). This is because rejecting parents are unable to take the perspective of the child or understand his/her emotional experience, and thus unable to help to regulate these unbearable feelings or provide a secure base to freely explore her/his internal world (Allen, et al., 2008; Berthelot et al., 2019). In other words, rejecting parents do not properly mentalize the mind of the child and in turn, the child cannot develop a proper internalized mentalization capacity. Furthermore, chronic stress due to the negative experiences with parents can cause some neurobiological changes that play a role in the impairment of the mentalization process (Luyten & Fonagy, 2015). However, it is also suggested that mentalization capacity can be supported by other significant relationships such as the other parent who is not an abusive figure, other important adults in the family, siblings, peers, a supportive teacher, and a therapist (Fonagy & Target, 1997; Stein, 2006; Luyten, Nijssens, Fonagy & Mayes, 2017; Berthelot et al., 2019).

There is a limited number of studies focusing on the link between childhood abuse and neglect and its impact on mentalization capacity, especially in nonclinical adult groups. The literature review revealed mixed results regarding the nature of this

link. For example, in the studies of Berthelot et al. (2019) and Li, Carracher & Bird (2020), it was found that diminished reflective functioning partially mediates the association between psychopathological outcomes and emotional abuse and neglect in non-clinical adults. On the other hand, for instance, in some studies, researchers failed to find a statistically significant link between childhood maltreatment and affect centered mentalization of adults (Herrmann et al., 2018) and reflective functioning of young adults (Crugnola, Ierardi, Bottini, Verganti & Albizatti, 2019). Likewise, other researchers did not find a significant impairment in reflective functioning abilities of mothers who experienced neglect and abuse in their childhood (Ensink, Berthelot, Bernazzani, Normandin & Fonagy, 2014; Stacks et al., 2014). It is also important to note that neither of these studies investigated the effect of negative experiences with mothers and fathers separately.

Although there are some inconsistencies in the literature about a direct link between early adverse parental experiences and reflective functioning ability, there is consensus on the protective role of reflective functioning in the face of adversity (Fonagy & Bateman, 2016). For example, in their study, Fonagy et al. (1996) found that those who experienced abuse in their childhood are more likely to be diagnosed with borderline personality disorder if they have low levels of reflective functioning. Another study conducted by Borelli et al. (2015) showed that adolescents who perceived neglect from their parents tend to have secure attachment relationships if they have high levels of reflective functioning. In another study, Borelli et al. (2020) investigated the moderator role of reflective functioning between mothers' parental rejection experiences in their childhood and current relationships with their infants and partners. Results of this study confirmed the protective role of reflective functioning in the face of early negative experiences with parents. Similarly, in the

study of Scandurra et al. (2020), reflective functioning was found as a buffer in the relationship between perceived gender-related rejection and mental health. These are mainly due to some resiliency-promoting functions of the reflective functioning ability. For example, reflective functioning makes it possible to realize and name the feelings associated with adversity (Fonagy, Steele, Steele, Higgitt & Target, 1994). This can lead to work on negative experiences on a conscious level, reappraise the negative experiences, and give meaning to them (Fonagy et al., 2017). Reflective functioning also fosters making a distinction between the internal and external world, namely, differentiating what is related to someone's fantasy and what is the reality. Additionally, it leads to being more flexible to switch between fantasy and reality in a healthy way and to think about or explore different mental sets and realities (Fonagy et al., 1994; 2002). Reflecting upon different mental states facilitates detection of maladaptive mental representations regarding the self and the other and allows making adaptive modifications on them. (Fonagy et al, 1994). Furthermore, reflective functioning leads to be open for emotional support from others and get benefits from interpersonal relationships by co-regulating the feelings and thoughts following an adverse experience (Fonagy et al., 1994; 2017). Based on this preliminary evidence, this study aims to further explore the role of reflective functioning as a resiliency factor in the face of early adversity.

## 2.5 Current study

This study has two goals. Firstly, it aims to explore psychometric properties and construct validity of the short version of the Reflective Functioning Questionnaire (RFQ-8) in a Turkish population. Although there is a Turkish version of this questionnaire, there are no studies regarding psychometric properties and the validity

of it in Turkish. According to preliminary validation studies conducted with English (Fonagy et al., 2016), French (Badoud et al., 2015), and Italian (Morandotti et al., 2018) versions of RFQ-8, it was declared as a valid instrument that measures two impairments in mentalization capacity. Depending on these, RFQ-8 was used in various scientific studies (see Müller et al., 2020). However, later, some studies pointed out that although certainty scale was produced to capture a distortion in reflective functioning (hyper-mentalization), it was consistently found to have negative relationships with psychopathological outcomes (de Meulemeester, Vansteelandt, Luyten & Lowyck, 2018; Euler et al., 2019; Müller et al., 2020). In other words, the certainty scale seems to measure healthy levels of mentalization instead of an excessive amount of mentalization which is defined as an impairment. Besides, in their study, Müller et al. (2020) underlined some problems regarding the face validity of the certainty subscale, the scoring procedure of the items, and the factor structure of the questionnaire. They basically proposed that RFQ has a unidimensional structure measuring just hypo-mentalization rather than two dimensions. By considering all critiques, this study aimed to assess psychometric properties including internal consistency, convergent validity, and the factor structure of the scale.

The second and the main goal of this study is to investigate the potential moderator role of reflective functioning in the link between perceived maternal and paternal acceptance-rejection and psychological wellbeing during the emerging adulthood period. Depending on the related studies in the literature, those are hypothesized that:

H1: Perceived rejection from both mother and father is negatively associated with psychological well-being.



H2: Impairments in reflective functioning ability (hypo-mentalization and hyper-mentalization) are negatively associated with psychological wellbeing.

H3: Perceived rejection from both mother and father has significant interaction with reflective functioning in predicting psychological well-being so that the negative effect of perceived parental rejection on psychological wellbeing is higher for impaired levels of reflective functioning ability even after controlling for covariates.

## CHAPTER 3

### METHOD

#### 3.1 Participants

One of the nonprobability sampling types, convenience sampling which includes the participants who are easy to reach was used in this study (Leary, 2012). Depending on the literature on emerging adulthood, this study aimed to reach the participants who are between 18- 29 years of age. Depending on preliminary power analysis using G\*Power, the minimum sample size to get .80 power with .05 alpha level and .05 effect size were detected as 309 (Faul, Erdfelder, E., Buchner, A., & Lang, 2009). A total of 332 participants completed the study. Among them, two people who completed the study under 10 minutes were excluded because they are suspected to answer the questions randomly due to their extremely low completion time. Also, the father rejection score of one participant was excluded because he died before the participant was five years old. Furthermore, the well-being score of one person, depression, anxiety, and stress score of one person, and father rejection score of two participants were excluded due to missing values. However, because other scores of those participants were not excluded, the final sample has consisted of a total of 330 people.

The age of participants ranged between 18 and 29 ( $M = 22.83$ ;  $SD = 3.01$ ).

The demographic characteristics of the participants are presented in Table 1.

Table 1. Demographic Characteristics of the Sample

Demographic Characteristics	<i>n</i>	%
Gender		
Female	247	74.8
Male	80	24.2
Non-binary or not specified	3	0.9
Education		
High School Graduates	171	51.8
Bachelor's Degree	142	43.0
Master's Degree and Above	17	5.2
Student status		
Not Student	128	38.8
Preparatory	2	0.6
Freshmen	41	12.4
Sophomore	60	18.2
Junior	44	13.3
Senior	55	16.7
SES		
Lower	13	3.9
Lower-Middle	62	18.8
Middle	174	52.7
Upper-Middle	78	23.6
Upper	3	0.9
Size of hometown		
Rural	21	6.4
Urban	129	39.1
Metropolitan	180	54.5
Parents		
Mother (alive)	327	99.1
Father (alive)	312	94.5

Note: *N* = 330.

### 3.2 Instruments

#### 3.2.1 Personal information form

Personal Information Form is designed by the researcher under the supervision of the thesis advisor. It includes questions regarding the information about participant's age, gender, education, perceived socioeconomic status (SES), size of hometown, and whether their parents are alive or deceased (Appendix A).

### 3.2.2 Adult parental acceptance-rejection questionnaire (Adult PARQ)

In this study, short Turkish versions of both mother (Appendix B) and the father (Appendix C) forms of adult PARQ were used. Originally, this questionnaire was developed by Rohner (2005b) and adapted to Turkish by Dedeler, Akun & Batigun (2017).

Adult PARQ was developed to assess people's memories regarding the perceived acceptance and rejection of their parents when they were children. The original long version has 60 questions each for the mother and the father, totaling 120 questions. According to a meta-analysis based on 51 studies conducted across the world, the mean weighted internal consistency value of adult PARQ was found as .95 (Khaleque & Rohner, 2002). The long version of PARQ was adapted to Turkish by Varan (2003, as cited by Dedeler et al., 2017) with internal consistency rates of .86 to .96.

The short version of adult PARQ has consisted of 24 items for perceived maternal acceptance-rejection and 24 items for paternal acceptance-rejection, 48 items in total. It has four subscales for each parent measuring perceived parental acceptance and rejection. The perceived acceptance dimension includes the warmth/affection subtest which is consisted of eight items including statements such as "my mother (or father) made me feel wanted and needed." On the other hand, the perceived rejection dimension includes hostility/aggression, indifference/neglect, and undifferentiated hostility subtests. Among these, hostility/aggression has consisted of six items containing statements like "my mother/father went out of her/his way to hurt my feelings;" indifference/neglect consists of six items including statements like "my mother/ father ignored me as long as I did not disturb her/him;" and undifferentiated hostility consists of four items including statements like "my

mother/father did not really love me.” The items are rated on a four-point Likert type scale ranging from “almost never true” (one point) to “almost always true” (four points). Nine items are scored as reverse in total. The score of each scale is calculated by summing the points of related items and total scores are calculated by summing the scores of each scale. Higher total scores indicate higher rates of perceived rejection. In other words, higher scores mean higher perceived hostility, neglect, undifferentiated rejection, and lower perceived warmth from the parents.

The short version of child PARQ was initially adapted to Turkish by Yılmaz & Erkman (2008, as cited by Sart, Börkman, Erkman & Serbest, 2016) with internal consistency rates ranging from .53 to .88. A more recent adaptation study by Dedeler et al. (2017), showed good internal consistency rates with .92 for the mother scale and .96 for the father scale. In this study, Cronbach’s alpha values ranged from .75 to .95 for all dimensions. Also, this study confirmed the construct, criterion, and discriminant validity of the questionnaire.

In the current study, the short version of adult PARQ showed good reliability with Cronbach’s alpha values of .94 for the mother form and .96 for the father form. Also, reliability rates of all dimensions ranged from .80 to .91 for the mother and .88 to .94 for the father form.

### 3.2.3 Reflective functioning questionnaire (RFQ-8)

Reflective Functioning Questionnaire is developed by Fonagy et al. (2016) in order to assess the capacity to understand mental states of the self and other people by using a self-report questionnaire that can be easily administrated. In this study, the short Turkish version of RFQ was used (Appendix D). It consists of eight items

which are rated on a seven-point Likert-type scale ranging from “1- strongly disagree” to “7- strongly agree”.

RFQ-8 has two subscales named certainty (RFQ\_C) and uncertainty (RFQ\_U). Each subscale has six items, four of them included in both scales and two of them are unique to each scale. RFQ\_C is developed to capture hyper-mentalization; namely, it assesses how much certainty individuals show about the mental states of themselves and others. It includes statements like “I do not always know why I do what I do” and they are scored as “3 2 1 0 0 0.” So, getting higher scores from this scale means being extremely certain about the mental states by ignoring the opaqueness of the minds, and lower scores reflect more genuine mentalization capacity. On the other hand, RFQ\_U is designed to assess hypo-mentalization which means being uncertain about the mental states. This subscale consists of items like “Sometimes I do things without really knowing why” and they are scored as “0 0 0 1 2 3.” Therefore, higher scores mean inability to know about the mental states and lower scores reflect genuine mentalization ability.

The long version of RFQ was found as a satisfactorily reliable instrument with internal consistency rates of .73/.78 for RFQ\_C and .77/.54 for RFQ\_U in clinical/ nonclinical populations (Fonagy et al., 2016). The short version of RFQ was used in this study. Reliability and validity studies of the short version of RFQ are conducted in different languages. Internal consistency of the short RFQ was found as .71 for RFQ\_C and .64 for RFQ\_U in the French version (Badoud et al., 2015), and .77 for RFQ\_C and .75 for RFQ\_U in the Italian version (Morandotti et al., 2018). Turkish version of RFQ-8 is retrieved from a webpage which is provided by the researchers (Luyten & Fonagy, n.d.) as freely open for research purposes.

In the current study, both dimensions of the short Turkish version of RFQ were found satisfactorily reliable with the internal consistency of .73 for uncertainty and .78 for certainty dimensions. Although there is a Turkish version of RFQ-8, it has not been validated in Turkish yet. Therefore, it was planned in this study to assess the construct and criterion validity of the Turkish version of RFQ-8 by considering some critiques regarding its psychometric features (Müller et al., 2020; Spitzer et al., 2020). Based on the validation studies of this scale in different languages (e.g., Badoud et al., 2015; Fonagy et al. 2016; Morandotti et al., 2018), RFQ-8 was compared to scales measuring empathy, mindfulness, depression, anxiety, stress to assess convergent validity. These instruments will be described in detail below.

#### 3.2.4 Mindful attention awareness scale (MAAS)

Mindful Attention Awareness Scale (MAAS) is developed by Brown and Ryan (2003) to assess how frequently people experience mindful states in their daily lives. MAAS is adapted to Turkish by Özyeşil, Arslan, Kesici & Deniz (2011). In this study, the Turkish version of this scale was used (Appendix E).

MAAS consists of 15 self-report items rated on a six-point-Likert type scale ranging from “almost always” (one point) to “almost never” (six-point). The scale does not have any subscales or reverse items for scoring. Higher scores reflect higher levels of mindfulness.

The original version of MAAS (Brown and Ryan, 2003) was found as a highly reliable and valid measure with an internal consistency rate of .82 and its significant positive correlation with the scales measuring some related constructs like self-awareness, consciousness, and self-monitoring. Turkish version of MAAS

(Özyeşil et al., 2011) was also found as a reliable and valid measure in this language with .80 internal consistency, .86 test-retest reliability, statistically significant positive correlations with related constructs. In the current study, this scale showed good reliability with Cronbach's alpha value of .86.

### 3.2.5 Basic empathy scale (BES)

Basic Empathy Scale (BES) is developed by Jolliffe and Farrington (2006) and it was adapted to Turkish by Topçu, Baker & Aydın (2010). This scale assesses cognitive and affective aspects of empathy. Affective empathy means sharing the same emotions with the other and it depends on a more basic “emotional contagion system” (Luyten et al., 2020). Whereas cognitive empathy depends on a more developed cognitive system which leads to understanding the mental state of the other and it is more similar to concepts such as perspective-taking and mentalizing (Luyten et al., 2020; Jolliffe and Farrington, 2006). Therefore, in the current study, only the cognitive subscale of this scale was used (Appendix F).

BES consists of 20 items rated on five-points-Likert scale with a range from “totally disagree” (one point) to “totally agree” (five points). It includes nine items for cognitive and 11 items for affective subscales. The total score is calculated by summing the scores from each item and eight items are scored as reversed. For the cognitive subscale, which is used in this study, only three items were scored as reversed by giving one point to the answer of “totally disagree” and five points to “totally agree”. The minimum score one can get from this scale is nine and the maximum is 45. Higher scores reflect higher levels of cognitive empathy.

In the original study (Jolliffe & Farrington, 2006), BES was found as a reliable and valid measure with Cronbach's  $\alpha$  value of .79 for cognitive and .85 for



affective subscale. Turkish adapted version of it (Topçu et al., 2010) was also found as a reliable and valid measure with Cronbach's  $\alpha$  values ranging from .76 to .80. In the current study, the cognitive empathy subscale showed good reliability with Cronbach's alpha value of .86.

### 3.2.6 Depression anxiety stress scale (DASS-42)

Depression Anxiety Stress Scale (DASS) was developed by Lovibond and Lovibond (1995) as a measure of the level of depression, anxiety, and stress. The scale assesses the frequency of symptoms separately for depression, anxiety and stress. Turkish version of this scale, which is adapted by Bilgel and Bayram (2010), was used in the current study (Appendix G).

DASS consists of 42 items rated on a four-point Likert-type scale ranging from “never” (zero points) to “always” (four points). It has three subscales: depression, anxiety, and stress. Each scale consists of 14 items, and the possible score range is between zero and 42. Higher scores from each scale indicate higher levels of depression, anxiety, and stress.

In the original study conducted by Lovibond & Lovibond (1995), DASS-42 was found as a highly reliable measure with internal consistency rates of .91 for depression, .81 for anxiety, and .89 for stress subscales. It was also found as a valid measure that showed a significant positive correlation with Beck Depression Inventory and Beck Anxiety Inventory. In the Turkish adaptation study, DASS-42 was also found to be highly reliable and a valid measure with internal consistency rates of .92 for depression, .86 for anxiety, and .88 for stress subscales (Bilgel & Bayram, 2010).

In the current study, DASS-42 showed good reliability with Cronbach's alpha value of .96. Furthermore, depression, anxiety, and stress scales were also found as highly reliable with internal consistency rates of .95, .89, and .91, respectively.

### 3.2.7 Scales of psychological well-being (SPWB)

Scales of Psychological Wellbeing were constructed by Ryff (1989) and is consisted of six subscales including autonomy, environmental mastery, personal growth, positive relationships with others, purpose in life, and self-acceptance. In the first version, each subscale consisted of 20 items. A later version included 14 items per subscale, a total of 84 items, and has been commonly used in research (Ryff, Lee, Essex & Schmutte, 1994). This later version with 84 items was adapted to Turkish by Akin (2008), and this version was used in the current study (Appendix H).

SPWB is rated on a six-point Likert-type scale ranging from "strongly disagree" (one point) to "strongly agree" (six points). In total, 40 items are reverse scored, and a total score is calculated by summing the scores getting from each item. The minimum and maximum scores one can get from the whole scale are 84 and 504, respectively. Higher scores indicate higher levels of psychological well-being.

In the original study of Ryff (1989), SPWB was found as a valid measure that has statistically significant relations with similar scales and a highly reliable measure with the internal consistency coefficients ranging from .86 to .93 for subscales. Also, the Turkish version of SPWB, adapted by Akin (2008), was found as a valid and reliable measure with good internal consistency coefficients ranging from .87 to .96 for subscales.

In the current study, a total score of SPWB was found highly reliable with Cronbach's alpha value of .95. Also, all dimensions which constitute this scale showed good internal consistency rates ranging from .80 to .90.

### 3.3 Procedure

Before starting data collection, the required ethical approval from The Ethics Committee for Master and PhD Theses in Social Sciences and Humanities (SOBETİK) of Boğaziçi University (Appendix I) was obtained. The author also obtained permission for all the scales used in this study before data collection. After that, the informed consent form (Appendix J & K) and all instruments described in the previous section were uploaded to a software, PsyToolkit (Stoet, 2010, 2017). The data was collected and stored through this online tool. It is free and reliable software that was developed to use for academic research. The online link of the study was distributed to potential participants in two different ways. Initially, it was sent out through social media channels and personal invitations. Some part of the data was collected from 234 participants who reached the link of the study through these channels between July and September 2020. Then, the remaining data were collected from 98 Boğaziçi University students attending PSY 101 and PSY 241 courses in the semester of Fall 2020. This group of participants reached the link of the study through the research participation system of the university and gained 0.5 credits from one of the mentioned lectures for their participation.

After reading and approving the consent form, participants were reminded that they could leave the study any time they wish without any penalty. Then they were presented the study instruments in a fixed order: demographic information form, Turkish versions of adult PARQ mother and father forms, RFQ-8, MAAS,

BEScog, DASS-42, and SPWB. Participants were required to answer all items on a scale to move to the next section. After the surveys, participants were given an opportunity to give feedback if they wished to on an optional comment section. It took approximately 30 minutes to complete the whole study.

## CHAPTER 4

### RESULTS

In this part, first, descriptive statistics about predictor and dependent variables of the study will be presented. Second, the results of the confirmatory factor analysis (CFA) and correlation analyses regarding the validity of RFQ-8 will be reported. Third, relationships between some background characteristics and psychological well-being will be presented. Then, the results of the correlation and multiple hierarchical regression analyses which are related to the specified hypotheses will be reported. Also, the result of an additional analysis that was conducted to explore the mediator role of RF will be presented.

In the data analysis process, there were five missing scores in total (three in PAR father, one in DASS, and one in SPWB). While conducting independent sample t-test and ANOVA, they are excluded analysis by analysis, while conducting correlation they are excluded pairwise, and conducting regression they are excluded listwise from the analysis. T-test, correlation, and regression analyses were conducted using Statistical Package for Social Sciences (SPSS) 25, and CFA and path analysis was conducted using SPSS Amos 25.

#### 4.1 Descriptive statistics

Initially, distributions of the variables were checked. Means, standard deviations, minimum and maximum scores, and internal consistency scores of all variables are presented in Table 2. Among them, scores of MASS, BEScog, and DASS were used only for testing the construct validity of RFQ-8. It should be noted here that initially, analyses were conducted using SPWB sub-scale scores. However, since sub-scale scores yielded similar relationships with study variables, and none of the moderation

analyses were significant, in order to prevent redundancy, only total scores were given in this study. Although the distribution of perceived rejection from both mother and father was slightly positively skewed, skewness and kurtosis values of all variables were in the range of  $\pm 2$ , which indicates an acceptable range for normality (Kim, 2013).

Table 2. Descriptive Statistics of the Study Variables

Variables	<i>M</i>	<i>SD</i>	Min-Max	Cronbach's $\alpha$
PARQ Mother	37.18	12.36	24-82	.94
PARQ Father	41.76	16.68	24-96	.96
RFQ Certainty	1.10	0.81	0-3	.78
RFQ Uncertainty	0.74	0.69	0-2.83	.73
MASS	56	13.28	15-87	.86
BEScog	37.97	5.03	14-45	.86
DASS-42	45.22	27.11	0-125	.96
SPWB	347.89	55.36	142-488	.95

## 4.2 Psychometric properties of RFQ-8

### 4.2.1 Two-dimensional structure of RFQ-8 and its convergent validity

First, the originally proposed two-dimensional structure of RFQ-8 (Fonagy et al., 2016) was investigated with CFA by using the maximum likelihood method in Amos. The goodness of fit of the proposed factor structure was assessed based on the root mean square error of approximation (RMSEA), comparative fit index (CFI), and Tucker-Lewis index (TLI). In order to achieve goodness of fit, RMSEA values should be under .05 for good fit or .08 for a reasonable fit, and CFI and TLI values should be close to .95 for good fit or over .90 for acceptable fit (Brown, 2015). Also, based on the suggestions of creators (Fonagy et al., 2016) correlated errors among

the items which have very similar wording in Turkish were allowed. Considering the psychometric integrity, one correlated error was allowed among two items (RFQ\_C3 and RFQ\_C4) loading on the same latent factor (certainty) and it was determined before the analysis. According to the results, two factor structure of RFQ-8 showed a poor fit to the data with RMSEA (90% CI) = 0.13 (0.12-0.14), CFI = 0.79, TLI = 0.73. Also, the correlation between RFQ\_U and RFQ\_C was found as -.92. The results did not support a two-dimensional structure of RFQ-8 in a non-clinical Turkish population.

Second, convergent validity of two dimensional RFQ-8 was tested by conducting Pearson correlation analysis between uncertainty and certainty dimensions of RFQ-8 and related constructs. According to the results uncertainty scale assessing hypo-mentalization was negatively correlated with MAAS ( $r = -.39, p < .001$ ), BEScog ( $r = -.11, p < .05$ ), and positively correlated with DASS ( $r = .48, p < .001$ ). On the other hand, certainty scale assessing hyper-mentalization showed positive associations with mindfulness ( $r = .40, p < .001$ ) and cognitive empathy ( $r = .16, p < .01$ ). However, it showed negative association with DASS ( $r = -.41, p < .001$ ).

#### 4.2.2 Unidimensional structure, reliability and validity of RFQ-8

Because two-factor structure of the RFQ-8 scale was not confirmed, based on literature, the unidimensional factor structure of the scale was analyzed. As proposed by Müller et al. (2020) and Spitzer et al. (2020), the unidimensional version of the scale, which is consisted of eight items constituting the questionnaire was scored on a 7-point Likert scale. Only item 7 was reverse coded. In this unidimensional

version, while higher scores indicate uncertainty, lower scores indicate high levels of certainty.

First, one-factor version of RFQ-8 was tested with CFA (Figure 1). Before the analysis, one error covariance was allowed between the items (item3 and item4) that have highly similar wording based on the study of Müller et al. (2020). According to the results, the model provided adequate fit to the data, RMSEA (90% CI) = .07 (.04 -.09), CFI = .96, TLI = .94. Factor loadings were over .50, except item1 ( $\lambda = .37$ ). Also, reliability analysis showed that this version of RFQ-8 has good reliability with Cronbach's alpha value of .82.

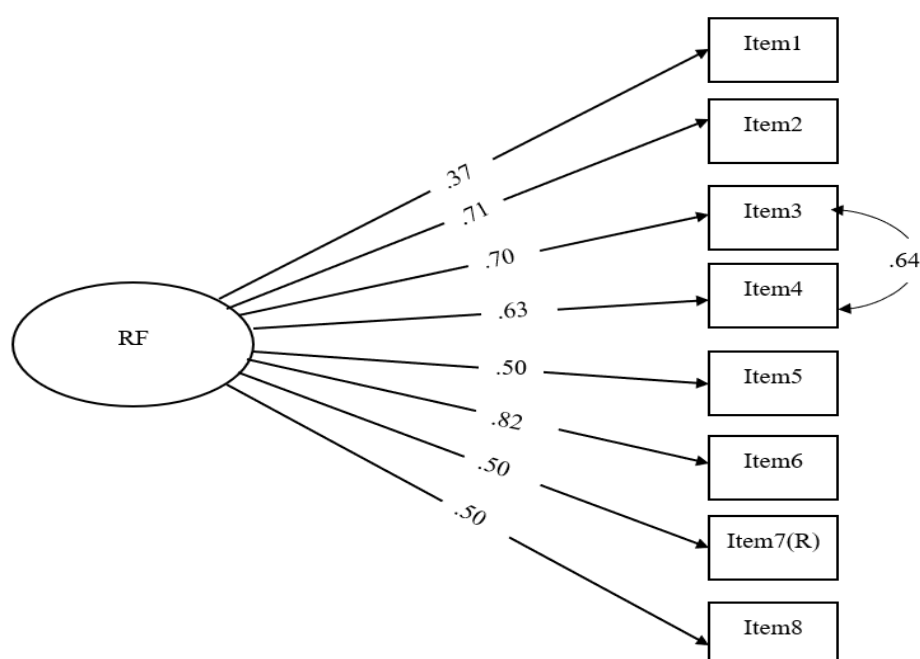


Figure 1. The one-factor version of RFQ-8

Second, Pearson correlation analyses were conducted to test the convergent validity of unidimensional RFQ-8. Results were in the expected direction (Table 3). Unidimensional RFQ-8 scores showed significant negative correlations with MAAS



and BEScog and positive correlation with a total score of DASS. Depending on the better psychometric features, unidimensional RFQ-8 was decided to be used in further analyses.

Table 3. Correlations Between Unidimensional RFQ-8 and Related Measures

	RFQ-8 (Unidimensional)
MASS	-.44 <sup>***</sup>
BEScog	-.16 <sup>**</sup>
DASS	.48 <sup>***</sup>

Note: \*\* $p < .01$ , \*\*\* $p < .001$

#### 4.3 Background characteristics and psychological well-being

Mean comparisons and correlations were conducted to investigate the relationships between some background characteristics and psychological well-being. About gender, because there were only three participants who stated their gender as non-binary, this variable was examined as binary (female and male). Similarly, due to the small number of participants in some categories (i.e., those having master's degrees and above), educational attainment was also examined using two categories: high school degree and bachelor's degree and above. Relations between categorical variables and psychological well-being such as gender, educational attainment, student status, and size of hometown were analyzed through one-way ANOVA's. Finally, the relationship with age which is a continuous variable was examined through Pearson's correlation coefficient, and with SES variable that has ordinal nature was examined through Spearman's correlation coefficient.

Regarding gender, the result of the analysis showed no significant difference among psychological well-being of female and male participants,  $F(1, 326) = .33, p = .56$ . On the other hand, regarding the educational attainment, results showed that participants who hold bachelor's degree or above ( $M = 355.55, SD = 54.77$ ) have

significantly higher psychological well-being than those holding high school degree ( $M = 340.81$ ,  $SD = 55.15$ ),  $F(1, 326) = 5.64$ ,  $p = .018$ . Regarding the student status, there was not a statistically significant difference between psychological well-being and student status (e.g., freshmen, sophomores, juniors, seniors, and those who are not students),  $F(4, 324) = 1.81$ ,  $p = .12$ . Also, according to the result, there were not statistically significant differences between students and nonstudents in terms of psychological well-being,  $F(1, 326) = 3.47$ ,  $p = .06$ . Similarly, the well-being scores of the participants did not differ according to their size of hometown,  $F(2, 326) = 2.33$ ,  $p = .09$ .

The results did not show a significant relationship between age and psychological well-being,  $r = .10$ ,  $p = .06$ . However, a significant positive relationship was found between psychological well-being and SES,  $r_s = .16$ ,  $p = .003$ . To sum up, among the background characteristics of the participants, educational attainment and SES were found to be significantly associated with psychological well-being scores.

#### 4.4 Correlations between parental rejection, reflective functioning, and psychological well-being

The first hypothesis of this study asserted that there will be statistically significant negative relationships between perceived rejection from both parents and psychological well-being. Based on this hypothesis, the associations between perceived rejection from both parents and psychological well-being were investigated with Pearson's correlation coefficient (Table 4). According to the results, psychological well-being showed significant negative correlations with

perceived rejection from both mother ( $r(329) = -.33, p < .001$ ) and the father ( $r(326) = -.32, p < .001$ ). These results supported the first hypothesis of the study.

Table 4. Pearson Correlation Coefficients Among Parental Rejection, Reflective Functioning, and Psychological Well-Being

Variable	<i>n</i>	1	2	3	4
1. PAR Mother	330	-			
2. PAR Father	327	.538***	-		
3. RFQ-8	330	.152**	.207***	-	
4. SPWB	329	-.335***	-.332***	-.451***	-

Note: \*\* $p < .01$ , \*\*\* $p < .001$  (2-tailed)

The second hypothesis of the study suggests a negative correlation between impaired levels of reflective functioning and psychological well-being. In order to test this hypothesis, a correlation analysis was conducted by using unidimensional RFQ-8 (Table 4). As it was mentioned before, higher scores from this scale indicate low levels of RF. According to results, RF showed a statistically significant relationship with psychological well-being in the expected direction,  $r(329) = -.45, p < .001$ . This result supported the second hypothesis of the study.

#### 4.5 Predictors of psychological well-being and moderator role of reflective functioning

The third hypothesis of this study suggested that the negative relationship between perceived parental rejection and psychological well-being will be stronger when RF scores were lower. In order to test this, a hierarchical multiple regression analysis which is consisted of three levels was conducted. In the first level, educational attainment and SES were included as control variables. In the second level, mother rejection, father rejection, and reflective functioning were included to assess their main effects on psychological well-being after controlling for educational attainment

and SES. In the final level, two interaction terms (mother rejection\*RF, father rejection\*RF) were included in the model in order to test the moderator effect of RF between parental rejection and psychological well-being. Interaction terms were computed after centering relevant variables by subtracting the mean of each variable from each score. Also, before conducting the analysis, assumptions of the multiple regression were checked. All assumptions (e.g., multicollinearity and singularity, normality, linearity, homoscedasticity, and independence of residuals) were met. Also, no outliers were detected according to Cook's distance (any case exceeding the value of 1). The result of multiple regression analysis was summarized in Table 5.

Table 5. Multiple Hierarchical Regression Result for Psychological Well-Being

Variable	<i>B</i>	95% CI for <i>B</i>		<i>SE B</i>	$\beta$	$R^2$	$\Delta R^2$
		LL	UL				
Step 1						.05	.05***
Constant	259.53***	212.14	306.92	24.09			
Education	15.04*	3.19	26.89	6.02	.14*		
SES	11.95**	4.45	19.45	3.81	.17**		
Step 2						.31	.26***
Constant	408.40***	359.71	457.09	24.75			
Education	9.89	-0.30	20.09	5.18	.09		
SES	5.32	-1.23	11.87	3.33	.08		
PARQ Mother	-0.91***	-1.39	-0.41	0.24	-.20***		
PARQ Father	-0.39*	-0.75	-0.02	0.18	-.12*		
RF	-2.07***	-2.57	-1.56	0.25	-.39***		
Step 3						.31	.004
Constant	405.59***	356.73	454.45	24.83			
Education	10.58*	0.32	20.83	5.21	.09*		
SES	5.16	-1.39	11.72	3.33	.07		
PARQ Mother	-0.97***	-1.48	-0.46	0.25	-.22***		
PARQ Father	-0.33	-0.71	0.05	0.19	-.10		
RF	-2.06***	-2.56	-1.55	0.25	-.38***		
Mother*RF	0.03	-0.01	0.08	0.02	.07		
Father*RF	-0.01	-0.04	0.03	0.02	-.02		

Note: CI = confidence interval; LL = lower limit; UL = upper limit; Mother\*RF = interaction of mother rejection and RF; Father\*RF = interaction of father rejection and RF. \* $p < .05$ . \*\* $p < .01$ . \*\*\* $p < .001$

According to the results, in the first level, educational attainment and SES significantly contributed to the model with  $F(2, 323) = 7.99, p < .001$ , and explained 4.7% of the variance in the psychological well-being. In the second level, the entrance of mother rejection, father rejection, and RF to the model made a significant contribution to the model with  $F(3, 320) = 40.42, p < .001$  and explained an additional 26.2% variance in the psychological well-being. However, the entrance of two interaction terms did not make any statistically significant change in the model,  $F(2, 318) = 1.00, p = .36$ .

The final model, which is consisted of seven independent variables, explained a 31.3% variance in psychological well-being. In the final model, significant predictors of psychological well-being were educational attainment, mother rejection, and RF. Because there was not statistically significant interaction, the hypothesis regarding the moderator role of reflective functioning was rejected.

#### 4.6 Additional analysis: Mediator role of reflective functioning

Depending on the statistically significant relationship between parental rejection and reflective functioning found in this study, it was thought that RF may play a mediator role between parental rejection and psychological well-being in emerging adulthood. Therefore, apart from the hypotheses of this study, an additional mediation analysis was conducted by using structural equation modeling. Mother rejection and father rejection were included in the model as predictors of both RF and psychological well-being; RF was included as the mediator of both mother and father rejection and a predictor of psychological well-being. Also, educational attainment and SES were included as predictors of well-being as in the previous analysis. Because of the statistically significant associations found between mother and father rejection and

between perceived rejection from both parents and SES, covariations between them were also indicated in the model (Figure 2). The analysis was conducted via SPSS Amos 25. The model showed good fit to the data ( $X^2 = 6.6$ ,  $df = 5$ ,  $p = .25$ ; RMSEA = .03, CFI = .99, TLI = .98). To investigate the mediator effect of RF, indirect effects were tested by using bootstrapping. According to the result, RF partially mediated the relationship between father rejection and psychological well-being (Standardized Indirect Effect = -.068, 95% CI [-.133, -.017],  $p = .01$ ). Perceived rejection from the mother did not predict RF, so RF did not mediate the relationship between mother rejection and psychological well-being.

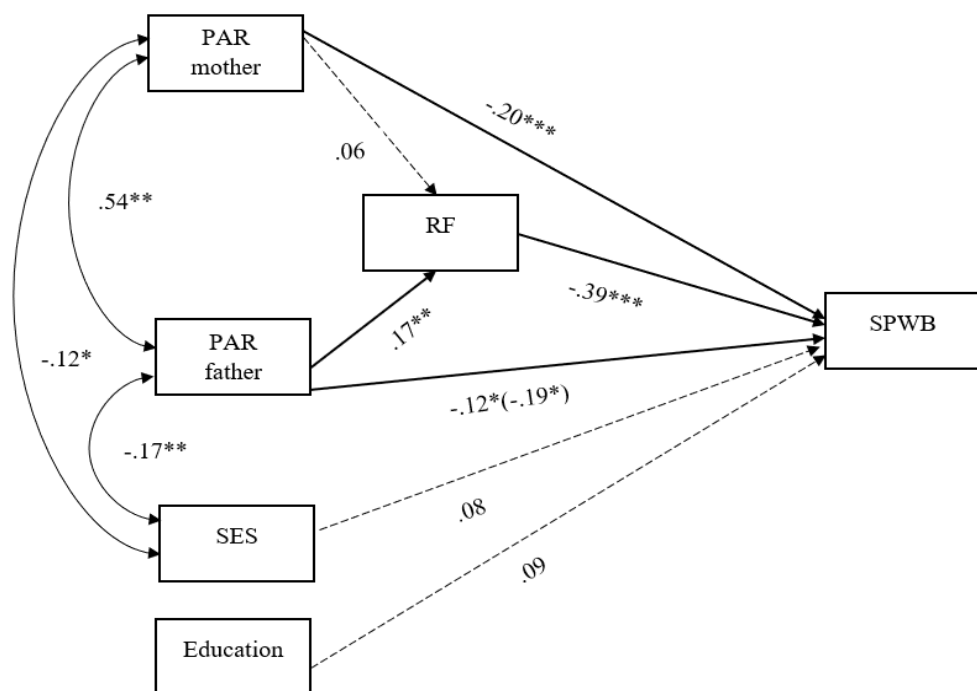


Figure 2. Path analysis model for mediator role of RF with standardized coefficients

## CHAPTER 5

### DISCUSSION

The primary aim of this study was to investigate the role of reflective functioning (or mentalization) as a resilience factor in the relationship between perceived parental rejection in childhood and the psychological wellbeing in the emerging adulthood period. Also, this study aimed to explore the psychometric properties of the RFQ-8 in a non-clinical Turkish sample. According to the results, the two-dimensional structure of RFQ-8 was not supported by CFA, and the certainty dimension indicating hyper-mentalization did not show expected positive relationships with scales measuring similar constructs. On the other hand, the one-dimensional structure of RFQ-8 showed better psychometric properties, including expected correlations with the related constructs. Therefore, this version of the scale was used in the current study. Furthermore, results showed that psychological well-being in the emerging adulthood period has significant negative associations with perceived rejection from mother, father, and lower levels of RF as proposed in the hypotheses. However, the moderator role of RF among perceived parental rejection and psychological well-being could not be supported in this study.

In this chapter, the findings of the study will be discussed in detail. This chapter also discusses possible clinical implications related to the results, limitations of the current study, and recommendations for future studies.

## 5.1 Discussion of the results

### 5.1.1 Psychometric properties and validation of RFQ-8

This was the first study investigating the psychometric features, including factor structure and convergent validity of RFQ-8 in a Turkish sample. Results of this study regarding the factor structure and validity of RFQ-8 supported a unidimensional nature of RFQ-8 in a non-clinical Turkish population. Initially, CFA of the originally proposed, two-dimensional version of Turkish RFQ-8 was conducted to see whether it fits the data well. In this case, the two-dimensional structure did not show a good fit with the data. Furthermore, the certainty scale did not show the expected relationship with a total score of DASS. Based on the previous validation studies (e.g., Badoud et al., 2015; Fonagy et al., 2016; Morandotti et al., 2018), it is expected in this study that the certainty scale would have positive associations with mindfulness and cognitive empathy. This is because people with extremely detailed accounts about their own and others' feelings, thoughts, or intentions pretend as if having good reflective functioning, so they can be found as highly mindful and emphatic in self-report questionnaires. On the other hand, hyper-mentalization measured by certainty scale is defined as a distortion in mental operations and is prevalent with high levels of depression, anxiety, and stress (Luyten et al., 2012). In the current sample, there was a negative relationship between certainty scores and DASS scores, which was in the opposite direction with predictions. This result was consistent with some studies which raised concerns about the validity of the certainty scale (e.g., de Meulemeester et al., 2018; Euler et al., 2019; Müller et al., 2020). In those studies, it was indicated that the certainty scale may not capture a maladaptive version of certainty, namely hyper-mentalization, instead it may capture healthy levels of certainty about the mental states. Results of this study supported this claim



in this Turkish version. Furthermore, Müller et al.(2020) proposed in their study that contents of the items of certainty scale semantically address the state of uncertainty rather than certainty; certainty was measured as denial of uncertainty, and this endangers face validity of the certainty scale. In this study, the size of the correlations that certainty and uncertainty scales have with related constructs (e.g., MASS, BEScog, DASS) were very similar with each other, but in the opposite direction. This finding can support the claim of Müller et al. (2020) and indicates that both scales measure the same construct (hypo-mentalization) in a reverse manner.

On the other hand, the unidimensional version of RFQ-8, which basically captures only hypo-mentalization, showed better reliability and validity than the two-dimensional version in this study. The results from this study supported studies criticizing the two-factor structure of RFQ-8. For example, in the validation study of the German version of RFQ-8, Spitzer et al. (2020) criticized the double scoring method of the questionnaire (four items of the questionnaire were included in both uncertainty and certainty scales as differently scored) and found it methodologically problematic. Therefore, they proposed a unidimensional version of the questionnaire, the lower end of which indicates certainty, and the upper end indicates uncertainty dimensions. They also tested whether this version showed U-shaped relationships with some measures of psychopathology. However, results showed a linear relationship in which the certainty aspect seems to tap into healthy outcomes as in the previous studies. Following this, in their study, Müller et al. (2020) claimed that using common items in different subscales cause an artificial correlation among them, so they found the original scoring procedure methodologically problematic, too. Also, they replicated the investigation of whether unidimensional RFQ-8 shows U-shaped relationships with some psychopathological outcomes. As in the study of

Spitzer et al. (2020), they failed to show such a relationship and supported the claim that certainty aspect of this scale did not measure maladaptive outcomes.

Consequently, they asserted that RFQ-8 has a unidimensional structure that seems to measure only hypo-mentalization.

Based on these critiques and suggestions, and the failure to support the two-dimensional structure of the RFQ-8, the unidimensional version of the scale was examined. First, the result of CFA indicated that the unidimensional model showed an adequate fit with the data. Second, the unidimensional version showed statistically significant correlations in the expected direction with the related concepts. Therefore, the unidimensional version of RFQ-8 measuring certainty on one continuum (uncertainty at one end and adaptive levels of certainty on the other end) was found to be a valid instrument in this study. However, there were still some limitations of this questionnaire. These will be discussed when appropriate in the following parts.

#### 5.1.2 Background characteristics and psychological well-being

Background characteristics of the participants showed that all of them were highly educated (having at least a high school degree), most of them (93.6%) stated that they have been living in and/or have a sense of belonging to urban or metropolitan areas and most of them (76.3%) stated their SES as middle class and above. In their study, Çok & Atak (2015) indicated that urban and educated young people who are between 18 and 30 years of age seem to experience the emerging adulthood period in Turkey. In this study, mentioned background characteristics of almost all participants overlap with the characteristics of those who seem to experience the emerging adulthood period in this culture.

According to the literature, different dimensions of psychological well-being were frequently seen as changing with age, gender, educational attainment, and SES (Ryff & Singer, 1996; 2008). In this study, the psychological well-being of the participants did not show significant differences as a function of age or gender. Previous studies investigated different dimensions of psychological well-being among young, middle-aged, and older adults (Ryff & Singer, 1996; 2008). These studies consistently showed that especially environmental mastery and autonomy dimensions increase from young adulthood to middle age due to changing roles and status in society. In this study, the absence of the relationship between age and psychological well-being was expected due to the restricted age range. That is all participants were in the emerging adulthood period, so they were supposed to have similar experiences. In fact, this result supported the homogeneity of the participants in terms of their developmental period.

Several studies investigating the gender factor in psychological well-being consistently revealed that while autonomy scores of men were found higher than women, women show higher scores on positive relations with others (Ferguson & Gunnell, 2016; Ryff & Singer, 2008). However, because these dimensions were not investigated separately in this study, such a difference could not be captured in total scores of well-being even if it exists.

On the other hand, consistent with the literature (e.g., Ryff, Magee, Kling & Wing, 1999; Ryff & Singer, 2008), SES and educational attainment were found as positively associated with psychological well-being and predict almost 5% of the variation in psychological well-being. SES was associated with psychological well-being, as it is associated with better access to limited resources. Lower SES hinders to reach essential resources for psychological well-being (Ryff & Singer, 2008).

Also, lower SES is significantly associated with negative physical health outcomes which go hand in hand with lower psychological well-being (Ryff & Singer, 1996).

Educational attainment is seen as a marker of SES along with income and occupational status (Ryff et al., 1999). However, it was also strongly associated with psychological well-being even after controlling for some other markers of SES such as level of income, parental education, and occupation (Ryff et al., 1999). Depending on this, in order to assess the role of education separately, the last attained level of education, student status, and level of the class were investigated in this study. While psychological well-being did not change according to student status and level of class, having Bachelor's degree and above education level is associated with significantly higher psychological well-being. This result might depend on the fact that those who achieved higher education and were motivated to continue further education are more likely to show higher personal growth and purpose in life. Putting it differently, individuals who are motivated to learn and produce via more education may tend to create a meaningful sense of the self and outer world, which is consistent with the description of eudaimonia (Knoop, 2016).

### 5.1.3 Associations between perceived parental rejection, reflective functioning, and psychological well-being

#### 5.1.3.1 Perceived parental rejection and psychological well-being

Several studies examining memories of rejection from the parents and psychological well-being in adulthood consistently found significant relationships between them (e.g., Greenfield & Marks, 2010; Harrenkohl et al., 2012; Kuyumcu & Rohner, 2016; Moran et al., 2018; Chen et al., 2019; Reyes et al., 2020). Based on the literature, it was hypothesized in this study that perceived rejection from both mother and father

has a significant negative relationship with psychological well-being during the emerging adulthood period. Results of the study confirmed this hypothesis and supported the previous findings in the literature.

Regarding the differential effects of the perceived rejection from mother and father, correlation analyses showed that effect sizes of the negative association between psychological well-being and perceived mother and father rejection were almost the same with each other ( $r = -.335$ ,  $r = -.332$  respectively,  $ps < .001$ ). However, when both mother, father rejection, and RF simultaneously added to regression analysis, the influence of mother rejection ( $b = -.20$ ,  $p < .001$ ) on psychological well-being was found to be higher than father rejection ( $b = -.12$ ,  $p < .05$ ) after controlling for SES and educational attainment. Furthermore, in the final model which includes interactions with RF, while the mother rejection remained a statistically significant predictor of psychological well-being, father rejection did not. This result indicated that compared to the perceived rejection from the father, perceived rejection from the mother is a more direct and important predictor of psychological well-being.

Similar to many cultures in the world, mothers are seen as primary caregivers in Turkish culture (Metindoğan, 2015). Therefore, especially in the first years of life, because the interaction with the mother and the need for her care is very intense, she plays a significant role in shaping the internal world of the child. However, parental rejection scales used in this study examines memories of childhood instead of infancy. In childhood, fathers also have an important place in the lives of their children especially as play partners (Lamb, Pleck, Charnov & Levine, 1987; Metindoğan, 2015). Although both parents are supposed to have important roles in the lives of their children in those periods of life, why do mothers seem to have a

greater impact on the psychic world of the offspring? This may be explained by closeness and hierarchical organization between family members. Common relationship patterns between the members of Turkish families showed that while mothers more directly interact with children, fathers mainly interact with mothers rather than their children due to their hierarchical position in the family (Sunar & Fişek, 2005). Especially, as the age of children increases, the authority of the father becomes more prominent in the relationship and this causes a distance in the communication with their children (Sunar, 2002; Sunar & Fişek, 2005). Compared to fathers, mothers have more interaction and emotional closeness with their children (Fişek, 1991). As mothers' socioemotional existence was more central for their children, accepting or rejecting attitudes by mothers may be more influential on self and other representations as well as psychological well-being. However, this may no longer be the case with new generation parents as fathers have become more involved in childcare.

#### 5.1.3.2 Reflective functioning and psychological well-being

In the literature, it was commonly proposed by the researchers that impairments in RF are associated with several negative mental health outcomes (e.g., Bateman & Fonagy, 2012; Fonagy & Luyten, 2018; Luyten et al., 2020). The link between different aspects of well-being and RF during adulthood was also shown by empirical studies (e.g., Fonagy et al., 2016; Antonsen et al., 2016; Borelli et al., 2019; Brugnera et al., 2021). Based on these, it was hypothesized in this study that impaired levels of RF (hyper and hypo-mentalization) would be associated with lower levels of psychological well-being.

Because preliminary analysis indicated that the certainty aspect of two-dimensional RFQ-8 seems to assess healthy levels of mentalization instead of hyper-mentalization, only the association between psychological well-being and unidimensional RFQ-8, which basically captures only hypo-mentalization, was investigated in this study. Results supported the previous studies along with the hypothesis, showing that those who have more impaired RF (e.g., higher levels of uncertainty and lower adaptive levels of certainty about the mental states of the self and the others) have lower psychological well-being. Also, the result of the regression analysis indicated that RF is a significant predictor of psychological well-being at all levels of the analysis, even after controlling for SES and educational attainment. Furthermore, when compared to the effects of perceived parental rejection, RF had a higher impact on psychological well-being. This may be explained by the fact that while RF is related to the current state of individuals, parental rejection is a more distal risk factor whose effects might be ameliorated in time.

#### 5.1.3.3 Discussion on protective role of reflective functioning

Based on the literature about the resilience promoting role of the RF in the face of adversity (e.g., Fonagy et al., 1994; Stein 2006; Fonagy & Bateman, 2016; Fonagy et al., 2017), it was hypothesized in this study that the negative effect of perceived parental rejection on psychological well-being would be higher in impaired levels of RF. However, RF did not moderate the relationship between perceived parental rejection and psychological well-being in emerging adulthood. There might be a couple of reasons that can explain this result.

First, one reason might be related to some features of the measurement tool. The analyses investigating the construct validity of RFQ-8 showed that, it has a greater relationship with mindfulness ( $r = -.44, p < .001$ ) than cognitive empathy ( $r = -.16, p < .01$ ). While mindfulness measured by MASS taps into the self-related aspect of mentalization capacity, cognitive empathy measured by BEScog taps into the other-related aspect of mentalization (Luyten et al., 2012). Therefore, it can be said that RFQ-8 did not measure the other-related aspect of mentalization capacity as much as the self-related one. This limitation of the questionnaire was also mentioned in the study of Müller et al. (2020). They asserted that while the RF concept includes understanding the mental states of both self and the other, only one of the eight items addresses the mental states of the others in RFQ-8. As the results of this study showed, the self-related aspect of the mentalization capacity is important for mental health and it contributes to psychological well-being. It allows individuals to monitor their own feelings, needs, desires, and behaviors, recognize and regulate them, and ask someone to help for self-regulation. On the other hand, other-related aspect of mentalization capacity plays a more important role in understanding others' mental states. It helps to understand that the feelings, desires, needs, and behaviors of others might be different than those of the self, therefore allows differentiation of mental representations regarding the self and the other. As a result, it facilitates the differentiation of the self, and the development of the ability to depersonalize, which are considered as resilience factors against parental rejection (Rohner, 2016). In short, inadequate assessment of other-related aspect of mentalization capacity by the questionnaire might be one reason that explains the failure to show the moderator role of RF. In order to further test the hypothesis regarding the moderator role of RF,



assessment instruments that equally capture all aspects of mentalization capacity should be utilized.

Second, RF might have a mediator role between parental rejection and psychological well-being. In the literature, there were a limited number of studies examining the relationship between RF and childhood abuse in non-clinical adult populations and they showed inconsistent results. Also, none of those studies examined the role of perceived rejection separately for mothers and fathers. In one of the studies which found a significant link between RF and childhood abuse, it was indicated that the effect size of this relationship was small especially when it was compared with the relationship found in clinical populations (Berthelot et al., 2019). The theory proposed that the mentalization capacity of the children is shaped based on the ability of the caregiver to understand the mental states of the child in their dyadic interaction in the first years of life (Fonagy et al., 2002; Luyten et al., 2020). However, it was also proposed that RF can show development in later periods of life depending on the other significant relationships and some other contextual factors (Fonagy and Target, 1997; Stein, 2006; Luyten et al., 2017). In this study, the author did not propose a hypothesis regarding the relationship between perceived parental rejection and RF. It was assumed that throughout the developmental process there may be at least one other significant figure in the ecosystem of the people who facilitates the development of his/her RF abilities apart from the primary caregiver. Furthermore, there might be major contextual changes that took place during the emerging adulthood period. For example, people may have moved away from a negative family environment and built new relationships that facilitated the development of secure attachment and RF (Masten et al., 2006; Borelli et al., 2020). Based on these post-hoc ideas, a moderation analysis was conducted. However, RF

showed statistically significant associations with perceived rejection from both mothers and fathers in this study. This was a meaningful result as well because memories regarding the rejecting attitudes of parents toward the child may be an indication of their inability to understand the mental states of their child, and this jeopardizes the development of RF in their child. Also, the stress induced by severe and consistent parental rejection may cause impairments in cognitive abilities, and hence impaired RF (Luyten & Fonagy, 2015). Considering the negative relationship between perceived parental rejection and RF, a post hoc mediation analysis was conducted to investigate the protective role of RF. The result of the mediation analysis showed that RF partially mediated the relationship between perceived paternal rejection in childhood and psychological well-being in emerging adulthood. Perceived maternal rejection was not a statistically significant predictor of RF, but a direct predictor of psychological well-being in emerging adulthood. Therefore, based on these results, it can be said that RF can be a buffer in the relationship between paternal rejection and psychological well-being.

As it was mentioned before, although some studies in the literature showed the protective role of mentalization between negative experiences with parents in childhood and some maladaptive outcomes, none of them investigated the effects of the experiences with parents separately (e.g., Fonagy et al., 1996; Borelli et al., 2015; Berthelot et al., 2019; Li, Carracher & Bird, 2020, Borelli et al., 2020). To the best of this author's knowledge, the only study investigating the mediating role of RF by considering the relationships with mother and the father separately conducted was by Gambin, Woźniak-Prus, Konecka & Sharp (2021). Consistent with the results of the present study, they found that RF in adolescence was a mediator in the relationship between emotion regulation and attachment with the father, but not the

mother. Gambin et al. (2021) explained the father's unique role on mentalization capacity of the child by emphasizing the fact that fathers are most commonly involved in playful activities with their children and support their exploration and risk-taking behaviors more than mothers (e.g., Lamb et al., 1987; Grossmann et al., 2002). They proposed that an accepting father and a secure attachment with him provides the child a safe space for encountering and reflecting on different feelings and thoughts of both themselves and the other as well as through practicing to express and adjust to various mental states during such exploratory and playful activities. Furthermore, this interaction, which is different from the one they have with the mother, can provide the child a fresh perspective about the internal states. These authors further emphasized the link between the positive relationship with the father and the positive family context, which provides a secure space to talk about thoughts and feelings and learn to understand mental states of the self and the other (Gambin et al., 2021). Together with the current study, these results underscored the importance of the father's role in the mentalization capacity of the child and point out the necessity of further studies investigating how interactions with mothers and fathers uniquely affect the mentalization capacity of the offspring.

## 5.2 Implications of the study

In this study, some proximal and distal risk and protective factors for psychological well-being during emerging adulthood were investigated. Emerging adulthood is an important period of life in terms of mental health because changing roles and occupations, which may lead to experiences of instability and uncertainty about the future can be sources of stress in this period. While the outer world is unsettled, it can be difficult to keep the balance of the internal world and show optimum

psychological functioning. This study showed that while having negative experiences with parents in childhood and lower levels of RF risks well-being, having more accepting parents and higher RF can help to protect psychological well-being in this period of life. These factors together predict 26% of the variation in the psychological well-being of individuals going through emerging adulthood.

First of all, these results indicate the importance of parenting and its continuing effects on the psychological functioning of the offspring. The preliminary protective measures for the mental health of the young population can be prevention or intervention projects or programs that aim to facilitate positive parenting attitudes to support them in becoming competent parents. This study also showed that although the role of the mother has a more direct effect on the well-being of their offspring when they reach the emerging adulthood period, the role of the father should not be overlooked. The finding on the father's influence on the mentalization capacity of the offspring indicates the necessity of the prevention or interventions programs addressing parenting attitudes of fathers and their inclusion in childcare. In a clinical sense, the results of this study support the therapeutic approaches focusing on the early relationships with the parents and working on the mental representations regarding the self and the significant others to promote psychological functioning in emerging adulthood. Additionally, interventions aiming to facilitate or improve the RF of the clients seem to be important to support their well-being. During therapy, therapists can facilitate the meaning-making of the intolerable affects for the clients, a function of therapy defined as "containment" by Bion (1962). Also, they can listen to clients empathically and reflect processed forms of their mental states back as a "mirroring" response defined by Winnicott (1971). Furthermore, they can provide a "secure base" when they explore the terrifying parts

of her/his internal world as defined by Bowlby (1982). These experiences can open ways for better RF capacity and assist the clients to experience a true and authentic sense of self (Winnicott, 1971), which is also a description of eudemonic well-being (Waterman, 1993).

### 5.3 Limitations of the study and recommendations

Besides the aforementioned contributions to the literature, there are also some limitations of this study. First and foremost, all measurement tools were based on the self-report of the participants. This method is used for practical reasons. However, especially when measuring RF, because the problems in RF contradict with an accurate assessment of one's own mental state, using self-report techniques raises some questions about the accuracy and reliability of the results. Therefore, assessment methods based on interviews and observation may give more accurate information about someone's RF. Similarly, self-reporting about memories of parental rejection is prone to some biases because people may be defensive about the negative experiences with their significant others and depict their experiences as more positive than how they were actually. A trend in the scores toward acceptance of the parents may be an outcome of this bias. Objective methods may provide more accurate results for this variable as well.

Another limitation was related to the cross-sectional design of this study. Because the variables were measured at a single point in time, relationships between them cannot provide causal inferences. In order to present the causal relationships between perceived parental rejection, RF, and psychological well-being more accurately, it would be better to conduct longitudinal studies.

There are various factors that predict psychological well-being and RF other than the variables measured in this study. For example, other current or previous significant relationships, such as relationships with romantic partners, friends, teachers, grandparents, or a therapist, account for having important associations with the changes in RF ability and mental representations (e.g., Fonagy & Target, 1997; Rohner & Lansford, 2017; Stein, 2006). Lack of an assessment of these relationships may be another limitation of this study. In future studies, in order to consider the effects of those relationships, they can be included in the model along with perceived parental rejection, RF, and psychological well-being.

Finally, although this study investigated some psychometric properties of RFQ-8 in a non-clinical Turkish sample, there are still questions about the validity of this tool. For instance, it was proposed in the literature that there are different dimensions of mentalization like implicit-explicit or self-other (e.g., Luyten et al., 2020), however as creators of the questionnaire mentioned (Luyten & Fonagy, n.d.), it does not specifically measure those different dimensions. Besides, parallel with some of the previous studies (e.g., de Meulemeester et al., 2018; Euler et al., 2019; Müller et al., 2020) this study showed that RFQ-8 seems to fail in measuring hyper-mentalization at least in a healthy adult sample. It is necessary to conduct research to create new measurement tools assessing different dimensions and impairments of RF in the future. It is worth noting that there are other self-report measures assessing mentalization in the literature like Mentalization Questionnaire (MZQ) (Hausberg et al., 2012) and Mentalization Scale (MentS) (Dimitrijevic, Hanak, Altaras Dimitrijevic & Jolic Marjanovic, 2018); however, those have not been translated to Turkish or validated in Turkish culture. Future studies should adapt these scales into

Turkish investigating their psychometric properties and compare them with RFQ to obtain a more valid instrument assessing mentalization capacity.

## CHAPTER 6

### CONCLUSIONS

The idea of exploring the effects of some past and current risk and protective factors and their interaction on the current mental health status, especially the psychological well-being of emerging adults motivated the author to conduct this study. The emerging adulthood period of life was specifically chosen because it can be seen as a critical turning point in terms of mental health due to dramatic changes taking place in the lives of emerging adults (Tanner, 2006). Those changes taking place in both the internal and external worlds of the emerging adults may cause both stresses, due to instability and uncertainty in their lives, and relief, due to the chance to escape from the earlier adverse environments.

In general, the first environment that people are born into and live in for a long time is their family. Parents who constitute this primary environment also have a great influence on the internal worlds of their children. Therefore, the author thought about the negative experiences with parents as one of the most important distal factors that threaten the psychological well-being of emerging adults. Specifically, previous adverse experiences with parents in the form of rejection or emotional abuse were expected to act as risk factors for the current psychological well-being of emerging adults. At this point, the author was curious about the current resources that would enhance resilience and counterbalance the negative early experiences. People cannot change their past experiences, but by being aware of their effects on their current existence or relationships, naming the feelings related to negative experiences, and giving meaning to them they have an opportunity to remove the shadow of the past on the present. An important social-cognitive capacity



called RF (or mentalization) can enable this process and be a protective factor in the face of early and current adversity. Some studies in the literature confirmed such protective role of RF in the face of parental rejection (e.g., Fonagy et al., 1996; Borelli et al., 2015; 2020). Differences of this study from the previous ones would be looking at the effects of maternal and paternal rejection separately and focusing on the psychological well-being during the emerging adulthood period as the outcome variable.

In the literature, RF is being assessed via either an interview (Fonagy et al., 1998) or a recently developed self-report instrument of RFQ (Fonagy et al., 2016). For practical reasons, the short version of RFQ was used in the current study. Although there is a Turkish version of RFQ-8, there are not studies assessing the validity or factor structure of this scale in a Turkish-speaking population. Therefore, the exploration of psychometric properties of RFQ-8 in a non-clinical Turkish population became a secondary goal of this study. During this exploration, both validation studies in other languages and some critiques regarding this instrument were taken into consideration.

First and foremost, the results regarding the psychometric properties of RFQ-8 showed that the Turkish version of this instrument seems to have one-factor structure measuring only one kind of impairment in mentalization capacity which is called hypo-mentalization. This component seems to tap into the self-related aspect of mentalization more than other-related one. These findings were parallel with some studies which questions originally proposed the two-factor structure of RFQ-8 (e.g; de Meulemeester et al., 2018; Euler et al., 2019; Spitzer et al., 2020; Müller et al., 2020). This one factor RFQ-8 had better psychometric features, e.g., showed expected relationships with other scales measuring similar constructs. Therefore, the

remaining analyses in the current study were conducted by using this more valid, unidimensional version of RFQ-8.

Results showed that, contrary to expectations, negative effects of perceived maternal and paternal rejection on psychological well-being during emerging adulthood are not ameliorated by current RF. The results revealed that previous negative experiences with especially the mother and lower mentalization capacity individually and directly predicted poorer psychological well-being during emerging adulthood. On the other hand, paternal rejection exerts some amount of its negative effect on psychological well-being through lowering current RF. In other words, perceived paternal rejection during childhood impairs the RF of the offspring, and this leads to lower psychological well-being during emerging adulthood.

The major limitation of this study was related to the psychometric properties of RFQ-8. It did not seem to capture whole aspects of mentalization capacity. It was important to note that in previous studies which showed the moderator role of RF between parental rejection and some mental health outcomes, RF was measured utilizing an interview format. Maybe, the results could have been different if an instrument less reliant on self-report and able to capture all aspects of mentalization capacity were used in this study. On the other hand, based on the related literature, the author thought that another reason for the lack of a moderator effect could be that RF plays a mediator role between parental rejection and psychological well-being. The additional mediation analysis conducted to test this assumption showed that RF does mediate the relationship between perceived paternal rejection and psychological well-being. In other words, RF could buffer the impact of the perceived paternal rejection on psychological well-being. However, this result was not replicated for maternal rejection.

This result seems meaningful when we think about the traditional roles or functions of the mother and the father in the family and their footprints on the inner world of the child. Similar to many cultures in the world, the mother is generally accepted as the first significant object or attachment figure for the child in Turkish culture as well (Metindoğan, 2015). Since the infancy period, self-representation of the child is shaped according to the relationship with this significant other and her representation in the mind of the child (Rohner, 2005a; Bretherton & Munholland, 2008). As the child grows, the father also comes into the stage in the mind of the child, but especially in Turkish culture, the mother keeps its closeness with the child in a psychological sense (Sunar, 2002; Sunar & Fişek, 2005). This closeness might consolidate the internalization of some relationship patterns with the mother and makes it harder for the child to separate representation of the self from that of the mother, and mentalize the mind of her as different from self. Namely, representations of self and the mother might be more intertwined in the mind of the child. Therefore, her impact on the child can be more direct and cannot be significantly reduced by the reflective function of the child. On the other hand, in the eyes of the child, the father can be counted as the first significant figure who has a different mind from the mother-child unity (Gambin et al., 2021). This relativistic distance of the father in the inner world of the child may be the reason for his relatively less or indirect impact on the well-being of the child.

For the author, the most interesting and unexpected result was that the mentalization capacity of emerging adults is predicted by only perceived paternal, but not maternal rejection in childhood. A similar finding in another study (i.e., Gambin et al., 2021) may indicate an important contribution to the theory on the development of mentalization capacity. According to the recent shift in the theory,

not only the dyadic relationship between the caregiver and child but also some contextual factors like family environment in which the mental states of the people were addressed is considered to be important in the development of mentalization capacity (Luyten et al., 2020). Father may be a key determinant of the socio-emotional climate of the family context. In other words, the attitudes of the father can play an important role in providing members of the family with a secure space to talk about feelings and thoughts and understand the minds of others. From this perspective, the father can be thought of as a container of mother and child dyadic relationship. Therefore, this result might be evaluated as support for the importance of the father over the dyadic relationships in the development of mentalization ability.

Based on the results from this study, it can be concluded that perceived maternal rejection in childhood and lower levels of current RF are individual risk factors of psychological well-being in emerging adulthood. Also, RF in emerging adulthood can be accounted as a protective factor in the face of paternal rejection perceived in childhood. Regarding the secondary aim of the study, it can be said that it would be better to modify the originally proposed RFQ-8, create more comprehensive tools measuring mentalization capacity, or measure RF via interview. Finally, it seems necessary to conduct more studies focusing on the differential effects of dyadic relationships and the broader context on the development of mentalization capacity.

## APPENDIX A

### PERSONAL INFORMATION FORM

**1. Yaşınız (Age):** ( )

**2. Cinsiyetiniz (Gender):** Kadın (*Female*) ( ) Erkek (*Male*) ( ) Diğer (*Other*) ( )

Belirtmek İstemiyorum (*I don't want to specify*) ( )

**3. Eğitim Durumu** (En son mezun olunan öğretim kurumu ve seviyesi):

(*Educational Attainment (The last completed educational level)*):

İlkokul (*Primary School*) ( ) Ortaokul (*Middle School*) ( ) Lise (*High School*) ( )

Üniversite-Lisans (*Collage*) ( ) Yüksek Lisans (*Master*) ( ) Doktora (*Doctorate*) ( )

**4. Öğrenci iseniz, sınıfınız** (başlayacak olduğunuz):

(*If you are a student, your class (that you will start)*):

Öğrenci değilim (*not student*) ( ) Hazırlık (*Preparatory*) ( ) 1.sınıf (*Freshmen*) ( )

2.sınıf (*Sophomore*) ( ) 3. Sınıf (*Junior*) ( ) 4. sınıf ve üzeri (*Senior*) ( )

**5. Sosyoekonomik durumunuzu nasıl tanımlarsınız?**

(*How can you describe your socioeconomic status?*)

Alt (*Lower*) ( ) Alt-orta (*Lower-Middle*) ( ) Orta (*Middle*) ( )

Orta-üst (*Upper- Middle*) ( ) Üst (*Upper*) ( )

**6. Uzun süredir yaşadığınız ve/ya kendinizi ait hissettiğiniz yerleşim birimi:**

(*Size of the place that you are living for a long time and/or you feel belong to*)

Metropol (*Metropolis*) ( ) Kent (*Urban*) ( ) Kır (*Rural*) ( )

**7. Anneniz hayatta mı?** (*Is your mother alive?*): Evet (*Yes*) ( ) Hayır (*No*) ( )

**8. Anneniz hayatta değilse, onu kaybettiğinizde kaç yaşındaydınız?** ( )

(*If your mother was deceased, what was your age when you lost her?*)

**9. Babanız hayatta mı?** (*Is your father alive?*): Evet (*Yes*) ( ) Hayır (*No*) ( )

**10. Babanız hayatta değilse, onu kaybettiğinizde kaç yaşındaydınız?** : ( )

(*If your father was deceased, what was your age when you lost her?*)

## APPENDIX B

### ADULT PARENTAL ACCEPTANCE REJECTION QUESTIONNAIRE

(ADULT PARQ)-

#### MOTHER 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.

*(In this page, there are statements containing mother-child relationship. Please read every statement carefully and think about to what degree each one of these describes the way your mother treats you when you were a child.*

*After reading each of the statements, please mark one of the options among “Almost always true”, “Sometimes true”, “Rarely true” or “Never true” by thinking about how it fits the way your mother acts toward you.)*

ANNEM (MY MOTHER)	DOĞRU (TRUE)		DOĞRU DEĞİL (NOT TRUE)	
	Hemen Her Zaman Doğru (Almost Always True)	Bazen Doğru (Sometimes True)	Nadiren Doğru (Rarely True)	Hiçbir Zaman Doğru Değil (Never True)
İyi davrandığımda bana sarılır ve beni öperdi. (Hugs and kisses me when I am good.)	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

© Rohner Research Publications, 2012.

Adaptation by M. Dedeler, E. Akün, A. Durak Batıgün (2017).

ANNEM (MY MOTHER)		DOĞRU (TRUE)		DOĞRU DEĞİL (NOT TRUE)	
		Hemen Her Zaman Doğru (Almost Always True)	Bazen Doğru (Sometimes True)	Nadiren Doğru (Rarely True)	Hiçbir Zaman Doğru Değil (Almost Never True)
1.	Benim hakkımda güzel şeyler söylerdi. (Said nice things about me.)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2.	Bana hiç ilgi göstermezdi. (Paid no attention to me.)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3.	Benim için önemli olan şeyleri anlatabilmemi kolaylaştırırdı. (Made it easy for me to tell her things that were important to me.)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4.	Hak etmediğim zaman bile bana vururdu. (Hit me, even when I did not deserve it.)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
5.	Beni büyük bir baş belası olarak görürdü. (Saw me as a big nuisance)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
6.	Kızdığı zaman beni çok kötü cezalandırırdı. (Punish me severely when she was angry.)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
7.	Sorularımı cevaplayamayacak kadar meşguldü. (Was too busy to answer my questions.)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
8.	Benden hoşlanmıyor gibiydi. (Seemed to dislike me.)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
9.	Yaptığım şeylerle gerçekten ilgilenirdi. (Was really interested in what I did.)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
10.	Bana bir sürü kırıcı şey söylerdi. (Said many unkind things to me.)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
11.	Ondan yardım istediğimde beni duymazlıktan gelirdi. (Paid no attention when I asked for help.)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
12.	Bana istenilen ve ihtiyaç duyulan biri olduğumu hissettirirdi. (Made me feel wanted and needed.)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
13.	Bana çok ilgi gösterirdi. (Paid a lot of attention to me.)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
14.	Beni kırmak için elinden geleni yapardı. (Went out of her way to hurt my feelings.)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
15.	Hatırlaması gerekir diye düşündüğüm önemli şeyleri unuturdu. (Forgot important things I thought she should remember.)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

16.	Eğer kötü davranırsam, beni artık sevmediğini hissettirirdi. (Made me feel unloved if I misbehaved.)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
17.	Bana yaptığım şeylerin önemli olduğunu hissettirirdi. (Made me feel what I did was important.)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
18.	Yanlış bir şey yaptığımda beni korkutur veya tehdit ederdi. (Frightened or threatened me when I did something wrong.)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
19.	Benim ne düşündüğüme önem verir ve düşündüklerim hakkında konuşmamdan hoşlanırdı. (Cared about what I thought and liked me to talk about it.)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
20.	Ne yaparsam yapayım, diğer çocukların benden daha iyi olduğunu düşünürdü. (Felt other children were better than I was no matter what I did.)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
21.	Bana istenmediğimi belli ederdi. (Let me know I was not wanted.)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
22.	Beni sevdiğini belli ederdi. (Let me know she loved me.)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
23.	Onu rahatsız etmediğim sürece benimle ilgilenmezdi. (Paid no attention to me as long as I did nothing to bother her.)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
24.	Bana karşı yumuşak ve iyi kalpliydi. (Treated me gently and with kindness.)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>



## APPENDIX C

### ADULT PARENTAL ACCEPTANCE REJECTION QUESTIONNAIRE

(ADULT PARQ)-

#### FATHER 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.

*(In this page, there are statements containing father-child relationship. Please read every statement carefully and think about to what degree each one of these describes the way your father treats you when you were a child.)*

*After reading each of the statements, please mark one of the options among “Almost always true”, “Sometimes true”, “Rarely true” or “Never true” by thinking about how it fits the way your father acts toward you.)*

BABAM (MY FATHER)	DOĞRU (TRUE)		DOĞRU DEĞİL (NOT TRUE)	
	<i>Hemen Her Zaman Doğru</i> (Almost Always True)	<i>Bazen Doğru</i> (Sometimes True)	<i>Nadiren Doğru</i> (Rarely True)	<i>Hiçbir Zaman Doğru Değil</i> (Never True)
İyi davrandığımda bana sarılır ve beni öperdi. (Hugs and kisses me when I am good.)	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

© Rohner Research Publications, 2012.

Adaptation by M. Dedeler, E. Akün, A. Durak Batıgün (2017).

BABAM (MY FATHER)		DOĞRU (TRUE)		DOĞRU DEĞİL (NOT TRUE)	
		Hemen Her Zaman Doğru (Almost Always True)	Bazen Doğru (Sometimes True)	Nadiren Doğru (Rarely True)	Hiçbir Zaman Doğru Değil (Almost Never True)
1.	Benim hakkımda güzel şeyler söylerdi. (Said nice things about me.)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2.	Bana hiç ilgi göstermezdi. (Paid no attention to me.)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3.	Benim için önemli olan şeyleri anlatabilmemi kolaylaştırırdı. (Made it easy for me to tell her things that were important to me.)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4.	Hak etmediğim zaman bile bana vururdu. (Hit me, even when I did not deserve it.)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
5.	Beni büyük bir baş belası olarak görürdü. (Saw me as a big nuisance)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
6.	Kızdığı zaman beni çok kötü cezalandırırdı. (Punish me severely when she was angry.)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
7.	Sorularımı cevaplayamayacak kadar meşguldü. (Was too busy to answer my questions.)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
8.	Benden hoşlanmıyor gibiydi. (Seemed to dislike me.)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
9.	Yaptığım şeylerle gerçekten ilgilenirdi. (Was really interested in what I did.)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
10.	Bana bir sürü kırıncı şey söylerdi. (Said many unkind things to me.)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
11.	Ondan yardım istediğimde beni duymazlıktan gelirdi. (Paid no attention when I asked for help.)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
12.	Bana istenilen ve ihtiyaç duyulan biri olduğumu hissettirirdi. (Made me feel wanted and needed.)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
13.	Bana çok ilgi gösterirdi. (Paid a lot of attention to me.)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
14.	Beni kırmak için elinden geleni yapardı. (Went out of her way to hurt my feelings.)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
15.	Hatırlaması gerekir diye düşündüğüm önemli şeyleri unuturdu. (Forgot important things I thought she should remember.)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
16.	Eğer kötü davranırsam, beni artık sevmediğini hissettirirdi.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

	(Made me feel unloved if I misbehaved.)				
17.	Bana yaptığım şeylerin önemli olduğunu hissettirirdi. (Made me feel what I did was important.)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
18.	Yanlış bir şey yaptığımda beni korkutur veya tehdit ederdi. (Frightened or threatened me when I did something wrong.)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
19.	Benim ne düşündüğüme önem verir ve düşündüklerim hakkında konuşmamdan hoşlanırdı. (Cared about what I thought and liked me to talk about it.)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
20.	Ne yaparsam yapayım, diğer çocukların benden daha iyi olduğunu düşünürdü. (Felt other children were better than I was no matter what I did.)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
21.	Bana istenmediğimi belli ederdi. (Let me know I was not wanted.)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
22.	Beni sevdiğini belli ederdi. (Let me know she loved me.)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
23.	Onu rahatsız etmediğim sürece benimle ilgilenmezdi. (Paid no attention to me as long as I did nothing to bother her.)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
24.	Bana karşı yumuşak ve iyi kalpliydi. (Treated me gently and with kindness.)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

## APPENDIX D

### REFLECTIVE FUNCTIONING QUESTIONNAIRE- SHORT (RFQ-8)

**Lütfen aşağıdaki cümleleri dikkatlice okuyunuz. Her bir cümle için, cümleye ne kadar katıldığınızı ifade etmek üzere 1 ile 7 arasında bir numara seçip cümlenin yanına yazınız. Cümleler üzerinde çok fazla düşünmeyin- ilk tepkiniz genellikle en iyisidir. Teşekkür ederiz.**

*(Please work through the next 8 statements. For each statement, choose a number between 1 and 7 to say how much you disagree or agree with the statement, and write it beside the statement. Do not think too much about it – your initial responses are usually the best. Thank you.)*

**1'den 7'ye kadar olan aşağıdaki ölçeği kullanın:**

*(Use the following scale from 1 to 7)*

Kesinlikle Katılmıyorum (Strongly Disagree)	1	2	3	4	5	6	7	Kesinlikle Katılıyorum (Strongly Agree)
--	---	---	---	---	---	---	---	--

1. İnsanların düşünceleri benim için bir bilinmezdir.  
*(People's thoughts are a mystery to me.)*
2. Neyi neden yaptığımı her zaman bilmem.  
*(I don't always know why I do what I do.)*
3. Sinirlendiğimde, neden söylediğimi gerçekten bilmediğim şeyler söylerim.  
*(When I get angry, I say things without really knowing why I am saying them.)*
4. Sinirlendiğimde, sonradan pişman olacağım şeyler söylerim.  
*(When I get angry, I say things that I later regret.)*
5. Eğer güvensiz hissedersen, diğerlerini sinirlendirecek şekilde davranırım.  
*(If I feel insecure, I can behave in ways that put others' backs up.)*
6. Bazen neden yaptığımı gerçekten bilmediğim şeyler yaparım.  
*(Sometimes I do things without really knowing why.)*
7. Ne hissettiğimi her zaman bilirim.  
*(I always know what I feel)*
8. Güçlü duygular genellikle düşüncelerimi bulanıklaştırır.  
*(Strong feelings often cloud my thinking.)*

## APPENDIX E

### MINDFULL ATTENTION AWARENESS SCALE (MAAS)

**Açıklama:** Aşağıda sizin günlük deneyimlerinle ilgili bir dizi durum verilmiştir. Lütfen her bir maddenin sağında yer alan 1 ile 6 arasındaki ölçeği kullanarak her bir deneyimi ne kadar sık veya nadiren yaşadığınızı belirtiniz. Lütfen deneyimizin **ne olması gerektiğini değil, sizin deneyiminizi gerçekten neyin etkilediğini** göz önünde bulundurarak cevaplayınız. Lütfen her bir maddeyi diğerlerinden ayrı tutunuz.

(Instructions: Below is a collection of statements about your everyday experience. Using the 1-6 scale below, please indicate how frequently or infrequently you currently have each experience. Please answer according to what really reflects your experience rather than what you think your experience should be. Please treat each item separately from every other item.)

1	2	3	4	5	6
Hemen hemen her zaman (Almost Always)	Çoğu zaman (Very Frequently)	Bazen (Somewhat Frequently)	Nadiren (Somewhat Infrequently)	Oldukça Seyrek (Very Infrequently)	Hemen hemen hiçbir zaman (Almost Never)
1. Belli bir süre farkında olmadan bazı duyguları yaşayabilirim. (I could be experiencing some emotion and not be conscious of it until sometime later.)					1 2 3 4 5 6
2. Eşyaları özensizlik, dikkat etmeme veya başka bir şeyleri düşündüğüm için kırarım veya dökürüm. (I break or spill things because of carelessness, not paying attention, or thinking of something else.)					1 2 3 4 5 6
3. Şu anda olana odaklanmakta zorlanırım. (I find it difficult to stay focused on what's happening in the present.)					1 2 3 4 5 6
4. Gideceğim yere, yolda olup bitenlere dikkat etmeksizin hızlıca yürüyerek gitmeyi tercih ederim. (I tend to walk quickly to get where I'm going without paying attention to what I experience along the way.)					1 2 3 4 5 6
5. Fiziksel gerginlik ya da rahatsızlık içeren duyguları, gerçekten dikkatimi çekene kadar fark etmeme eğilimim vardır. (I tend not to notice feelings of physical tension or discomfort until they really grab my attention.)					1 2 3 4 5 6
6. Bir kişinin ismini, bana söylendikten hemen sonra unuturum. (I forget a person's name almost as soon as I've been told it for the first time.)					1 2 3 4 5 6

7. Yaptığım şeyin farkında olmaksızın otomatikçe bağlanmış gibi yapıyorum. 1 2 3 4 5 6  
(It seems I am "running on automatic," without much awareness of what I'm doing.)
8. Aktiviteleri gerçekte ne olduklarına dikkat etmeden acele ile yerine getiririm. 1 2 3 4 5 6  
(I rush through activities without being really attentive to them)
9. Başarmak istediğim hedeflere öyle çok odaklanırım ki o hedeflere ulaşmak için şu an ne yapıyor olduğumun farkında olmam. 1 2 3 4 5 6  
(I get so focused on the goal I want to achieve that I lose touch with what I'm doing right now to get there.)
10. İşleri veya görevleri ne yaptığımın farkında olmaksızın otomatik olarak yaparım. 1 2 3 4 5 6  
(I do jobs or tasks automatically, without being aware of what I'm doing.)
11. Kendimi bir kulağımla birini dinlerken; aynı zamanda başka bir şeyi de yaparken bulurum. 1 2 3 4 5 6  
(I find myself listening to someone with one ear, doing something else at the same time.)
12. Gideceğim yerlere farkında olmadan gidiyor, sonra da oraya neden gittiğime şaşırıyorum. 1 2 3 4 5 6  
(I drive places on 'automatic pilot' and then wonder why I went there.)
13. Kendimi gelecek veya geçmişle meşgul bulurum. 1 2 3 4 5 6  
(I find myself preoccupied with the future or the past.)
14. Kendimi yaptığım işlere dikkatimi vermemiş bulurum. 1 2 3 4 5 6  
(I find myself doing things without paying attention.)
15. Ne yediğimin farkında olmaksızın atıştırıyorum. 1 2 3 4 5 6  
(I snack without being aware that I'm eating.)

## APPENDIX F

### COGNITIVE SUBSCALE OF BASIC EMPATHY SCALE (BESCOG)

**Aşağıda size uyan ve uymayan özellikler sıralanmıştır. Lütfen her maddeye NE ÖLÇÜDE KATILIP KATILMADIĞINIZI uygun kutuyu X ile işaretleyerek belirtiniz. Lütfen cevap verirken olabildiğince dürüst olunuz.**

*(The features that fits or not to you are arrayed below. Please specify TO WHAT DEGREE YOU AGREE OR DISAGREE with each statement by marking relevant box. Please be honest as much as you can while you answer)*

<b>1= Kesinlikle katılmıyorum (Strongly disagree)</b> <b>2= Katılmıyorum (Disagree)</b> <b>3= Ne katılıyorum ne katılmıyorum (Neutral)</b> <b>4= Katılıyorum (Agree)</b> <b>5= Kesinlikle katılıyorum (Strongly agree)</b>					
	<b>1</b>	<b>2</b>	<b>3</b>	<b>4</b>	<b>5</b>
1) Arkadaşım başarılı olduğunda onun ne kadar mutlu olduğunu anlayabilirim. <i>(I can understand my friend's happiness when she/he does well at something.)</i>					
2) Arkadaşlarımın korktuğunu anlamakta güçlük çekerim. <i>(I find it hard to know when my friends are frightened.)</i>					
3) Birisi kendini kötü hissettiğinde onun neler hissettiğini genellikle anlayabilirim. <i>(When someone is feeling "down" I can usually understand how they feel.)</i>					
4) Arkadaşlarımın korktuğunu genellikle anlarım. <i>(I can usually work out when my friends are scared.)</i>					
5) İnsanların ne hissettiğini çoğunlukla onlar bana söylemeden anlayabilirim. <i>(I can often understand how people are feeling even before they tell me.)</i>					
6) İnsanların neşeli olduğunu genellikle anlarım. <i>(I can usually work out when people are cheerful.)</i>					
7) Arkadaşımın kızgın olduğunu genellikle hemen fark ederim. <i>(I can usually realize quickly when a friend is angry.)</i>					
8) Arkadaşımın hissettiklerinin genellikle farkında değilimdir. <i>(I am not usually aware of my friend's feelings.)</i>					
9) Arkadaşlarımın mutlu oldukları anları anlamakta zorlanırım. <i>(I have trouble figuring out when my friends are happy.)</i>					

# APPENDIX G

## DEPRESSION ANXIETY STRESS SCALE (DASS-42)

N O	SON 1 HAFTADAKİ DURUMUNUZ (OVER THE PAST WEEK)	Hiçbir zaman (Never)	Bazen ve ara sıra (Sometimes)	Oldukça sık (Often)	Her zaman (Always)
1	Oldukça önemsiz şeyler için üzüldüğümü fark ettim (I found myself getting upset by quite trivial things)	0	1	2	3
2	Ağızımda kuruluk olduğunu fark ettim (I was aware of dryness of my mouth)	0	1	2	3
3	Hiç olumlu duygu yaşayamadığımı fark ettim (I couldn't seem to experience any positive feeling at all.)	0	1	2	3
4	Soluk almada zorluk çektim (örneğin fiziksel egzersiz yapmadığım halde aşırı hızlı nefes alma, nefessiz kalma gibi) (I experienced breathing difficulty (e.g., excessively rapid breathing, breathlessness in the absence of physical exertion))	0	1	2	3
5	Hiçbir şey yapamaz oldum (I just couldn't seem to get going)	0	1	2	3
6	Olaylara aşırı tepki vermeye meyilliyim (I tended to over-react to situations)	0	1	2	3
7	Bir sarsaklık duygusu vardı (sanki bacaklarım beni taşıyamayacakmış gibi) (I had a feeling of shakiness (e.g., legs going to give way))	0	1	2	3
8	Kendimi gevşetip salıvermek zor geldi (I found it difficult to relax)	0	1	2	3
9	Kendimi, beni çok tedirgin ettiği için sona erdiğinde çok rahatladığım durumların içinde buldum (I found myself in situations that made me so anxious I was most relieved when they ended)	0	1	2	3
10	Hiçbir beklentimin olmadığı hissine kapıldım (I felt that I had nothing to look forward to)	0	1	2	3
11	Keyfimin pek kolay kaçırılabilirdi hissine kapıldım (I found myself getting upset rather easily)	0	1	2	3
12	Sinirsel enerjimi çok fazla kullandığımı hissettim (I felt that I was using a lot of nervous energy)	0	1	2	3
13	Kendimi üzgün ve depresif hissettim (I felt sad and depressed)	0	1	2	3
14	Herhangi bir şekilde geciktirildiğimde (asansörde, trafik ışıklarında, bekletildiğimde) sabırsızlandığımı hissettim (I found myself getting impatient when I was delayed in any way (e.g., lifts, traffic lights, being kept waiting))	0	1	2	3
15	Baygınlık hissine kapıldım (I had a feeling of faintness)	0	1	2	3



16	Neredeyse her şeye karşı olan ilgimi kaybettiğimi hissettim ( <i>I felt that I had lost interest in just about everything</i> )	0	1	2	3
17	Birey olarak değersiz olduğumu hissettim ( <i>I felt I wasn't worth much as a person</i> )	0	1	2	3
18	Alingan olduğumu hissettim ( <i>I felt that I was rather touchy</i> )	0	1	2	3
19	Fizik egzersiz veya aşırı sıcak hava olmasa bile belirgin biçimde terlediğimi gözledim (örneğin ellerim terliyordu) ( <i>I perspired noticeably (e.g., hands sweaty) in the absence of high temperatures or physical exertion</i> )	0	1	2	3
20	Geçerli bir neden olmadığı halde korktuğumu hissettim ( <i>I felt scared without any good reason</i> )	0	1	2	3
21	Hayatın değersiz olduğunu hissettim ( <i>I felt that life wasn't worthwhile</i> )	0	1	2	3
22	Gevşeyip rahatlamakta zorluk çektim ( <i>I found it hard to wind down</i> )	0	1	2	3
23	Yutma güçlüğü çektim ( <i>I had difficulty in swallowing</i> )	0	1	2	3
24	Yaptığım işlerden zevk almadığımı fark ettim ( <i>I couldn't seem to get any enjoyment out of the things I did</i> )	0	1	2	3
25	Fizik egzersiz söz konusu olmadığı halde kalbimin hareketlerini hissettim (kalp atışlarımın hızlandığını veya düzensizleştiğini hissettim) ( <i>I was aware of the action of my heart in the absence of physical exertion (e.g. sense of heart rate increase, heart missing a beat)</i> )	0	1	2	3
26	Kendimi perişan ve hüzünlü hissettim ( <i>I felt down-hearted and blue</i> )	0	1	2	3
27	Kolay sinirlendirilebildiğimi fark ettim ( <i>I found that I was very irritable</i> )	0	1	2	3
28	Panik haline yakın olduğumu hissettim ( <i>I felt I was close to panic</i> )	0	1	2	3
29	Bir şey canımı sıktığında kolay sakinleşemediğimi fark ettim ( <i>I found it hard to calm down after something upset me</i> )	0	1	2	3
30	Önemsiz fakat alışkın olmadığım bir işin altından kalkamayacağım korkusuna kapıldım ( <i>I feared that I would be 'thrown' by some trivial but unfamiliar task</i> )	0	1	2	3
31	Hiçbir şey bende heyecan uyandırmıyordu ( <i>I was unable to become enthusiastic about anything</i> )	0	1	2	3
32	Bir şey yaparken ikide bir rahatsız edilmeyi hoş göremediğimi fark ettim. ( <i>I found it difficult to tolerate interruptions to what I was doing</i> )	0	1	2	3
33	Sinirlerimin gergin olduğunu hissettim ( <i>I was in a state of nervous tension</i> )	0	1	2	3
34	Oldukça değersiz olduğumu hissettim ( <i>I felt I was pretty worthless</i> )	0	1	2	3

35	Beni yaptığım işten alıkoyan şeylere dayanamıyordum ( <i>I was intolerant of anything that kept me from getting on with what I was doing</i> )	0	1	2	3
36	Dehşete düştüğümü hissettim ( <i>I felt terrified</i> )	0	1	2	3
37	Gelecekte ümit veren bir şey göremedim ( <i>I could see nothing in the future to be hopeful about</i> )	0	1	2	3
38	Hayatın anlamsız olduğu hissine kapıldım ( <i>I felt that life was meaningless</i> )	0	1	2	3
39	Kışkırtılmakta olduğumu hissettim ( <i>I found myself getting agitated</i> )	0	1	2	3
40	Panikleyip kendimi aptal durumuna düşüreceğim durumlar nedeniyle endişelendim. ( <i>I was worried about situations in which I might panic and make a fool of myself</i> )	0	1	2	3
41	Vücudumda (örneğin ellerimde) titremeler oldu. ( <i>I experienced trembling (e.g., in the hands)</i> )	0	1	2	3
42	Bir iş yapmak için gerekli olan ilk adımı atmada zorlandım ( <i>I found it difficult to work up the initiative to do things</i> )	0	1	2	3

## APPENDIX H

### SCALES OF PSYCHOLOGICAL WELL-BEING (SPWB)

<p>Aşağıda kendiniz ve yaşamınız hakkında hissettiklerinizle ilgili bir dizi ifade yer almaktadır. Lütfen doğru veya yanlış cevap olmadığını unutmayınız. Her bir cümleye katılma ya da katılmama durumunuzu en iyi şekilde gösteren numarayı işaretleyiniz.</p> <p>(There are a series of statements about your feelings about yourself and the life. Circle the number that best describes the degree to which you agree or disagree with each statement.)</p>		Hiç Katılmıyorum (Strongly Disagree)	Çoğunlukla katılmıyorum (Mostly Disagree)	Kısmen katılmıyorum (Disagree slightly)	Kısmen katılıyorum (Agree slightly)	Çoğunlukla katılıyorum (Mostly Agree)	Tamamen katılıyorum (Strongly Agree)
1	Çoğu insan beni sevecen ve şefkatli biri olarak görür. (Most people see me as loving and affectionate.)	1	2	3	4	5	6
2	Bazen çevremdeki insanlara daha fazla benzemek için davranış ve düşünce tarzımı değiştiririm. (Sometimes I change the way I act or think to be more like those around me.)	1	2	3	4	5	6
3	Genellikle yaşamımdaki olaylardan sorumlu olduğumu hissedirim. (In general, I feel I am in charge of the situation in which I live.)	1	2	3	4	5	6
4	Ufkumu genişletecek aktivitelerle ilgilenmem. (I am not interested in activities that will expand my horizons.)	1	2	3	4	5	6
5	Geçmişte yaptıklarımı ve gelecekte yapmak istediklerimi düşündüğümde kendimi iyi hissedirim. (I feel good when I think of what I've done in the past and what I hope to do in the future.)	1	2	3	4	5	6
6	Yaşamımı gözden geçirdiğimde, yaşamımdaki olayların sonuçlarından memnuniyet duyarım. (When I look at the story of my life, I am pleased with how things have turned out.)	1	2	3	4	5	6
7	Yakın ilişkilerimi sürdürmek benim için zordur. (Maintaining close relationships has been difficult and frustrating for me.)	1	2	3	4	5	6
8	Çoğu insanın görüşlerine ters düşse bile düşüncelerimi dile getirmekten korkmam. (I am not afraid to voice my opinion, even when they are in opposition to the opinions of most people.)	1	2	3	4	5	6
9	Günlük yaşam gereksinimleri sıklıkla tüm enerjimi bitirir. (The demands of everyday life often get me down.)	1	2	3	4	5	6
10	Genellikle her geçen gün kendime ilişkin daha fazla şey öğrendiğimi hissediyorum. (In general, I feel that I continue to learn more about myself as time goes by.)	1	2	3	4	5	6
11	İçinde bulunduğum günü yaşarım ve geleceğe yönelik gerçeğe hiçbir şey düşünmem. (I live life one day at a time and don't really think about the future.)	1	2	3	4	5	6
12	Genellikle kendimi güvenli ve iyi hissedirim. (In general, I feel confident and positive about myself.)	1	2	3	4	5	6
13	Problemlerimi paylaşabileceğim yakın arkadaşım az olduğu için kendimi çoğunlukla yalnız hissedirim.	1	2	3	4	5	6

	<i>(I often feel lonely because I have few close friends with whom to share my concerns.)</i>						
14	Verdiğim kararlar çoğunlukla diğer insanların davranışlarından etkilenmez. <i>(My decisions are not usually influenced by what everyone else is doing.)</i>	1	2	3	4	5	6
15	Çevremdeki insanlar ve toplumla pek uyumlu değilimdir. <i>(I do not fit very well with the people and the community around me.)</i>	1	2	3	4	5	6
16	Yeni şeyler denemekten hoşlanan biriyim. <i>(I am the kind of person who likes to give new things a try.)</i>	1	2	3	4	5	6
17	Şimdiye odaklanmayı tercih ederim, çünkü gelecek daima sorunları da beraberinde getirir. <i>(I tend to focus on the present because the future always brings me problems.)</i>	1	2	3	4	5	6
18	Tanıdığım insanlardan çoğunun yaşamlarında benden daha fazla şey elde ettiklerini düşünürüm. <i>(I feel like many of the people I know have gotten more out of life than I have.)</i>	1	2	3	4	5	6
19	Ailem ve arkadaşarımla sohbet etmekten hoşlanırım. <i>(I enjoy personal and mutual conversations with family members or friends.)</i>	1	2	3	4	5	6
20	Diğer insanların benim hakkımdaki düşünceleri beni kaygılandırır. <i>(I tend to worry about what other people think of me.)</i>	1	2	3	4	5	6
21	Günlük yaşamımdaki çoğu sorumluluklarımı yerine getirmede gayet iyiyim. <i>(I am quite good at managing the many responsibilities of my daily life.)</i>	1	2	3	4	5	6
22	Hayatım şu anda oldukça iyi gidiyor, bir şeyleri yapmak için yeni yollar denemek istemiyorum. <i>(I don't want to try new ways of doing things—my life is fine the way it is.)</i>	1	2	3	4	5	6
23	Yaşamımın bir yönü ve amacı olduğu hissine sahibim. <i>(I have a sense of direction and purpose in life.)</i>	1	2	3	4	5	6
24	Fırsatım olursa kendimle ilgili değiştirmek istediğim çok şey var. <i>(I like most aspects of my personality.)</i>	1	2	3	4	5	6
25	Arkadaşlarım problemlerini anlatırken onları dikkatle dinlemek benim için önemlidir. <i>(It is important to me to be a good listener when close friends talk to me about their problems.)</i>	1	2	3	4	5	6
26	Benim için kendimden memnun olmak diğerlerinin onayını almaktan daha önemlidir. <i>(Being happy with myself is more important to me than having others approve of me.)</i>	1	2	3	4	5	6
27	Çoğunlukla sorumluluklarımın altında ezildiğimi hissediyorum. <i>(I often feel overwhelmed by my responsibilities.)</i>	1	2	3	4	5	6
28	Kendime ve dünyaya yönelik bakış açımı değiştirecek yeni deneyimleri önemserim. <i>(I think it is important to have new experiences that challenge how you think about yourself and the world.)</i>	1	2	3	4	5	6
29	Günlük yaşam olayları çoğunlukla bana saçma ve önemsiz gelir. <i>(My daily activities often seem trivial and unimportant to me.)</i>	1	2	3	4	5	6
30	Kişiliğimin pek çok yönünü beğenirim. <i>(I like most aspects of my personality.)</i>	1	2	3	4	5	6

31	Konuşma ihtiyacı hissettiğimde beni dinlemeye istekli çok fazla insan yok. ( <i>I don't have many people who want to listen when I need to talk.</i> )	1	2	3	4	5	6
32	Güçlü fikirleri olan insanlardan etkilenme eğilimine sahibim. ( <i>I tend to be influenced by people with strong opinions.</i> )	1	2	3	4	5	6
33	Yaşamımdan mutsuz olursam onu değiştirmek için etkili önlemler alırım. ( <i>If I were unhappy with my living situation, I would take effective steps to change it.</i> )	1	2	3	4	5	6
34	Bir birey olarak gerçekten yıllardır kendimi çok fazla geliştirmediyimi düşünüyorum. ( <i>When I think about it, I haven't really improved much as a person over the years.</i> )	1	2	3	4	5	6
35	Yaşamda ne elde etmeye çalıştığıma yönelik sağlıklı bir hisse sahip değilim. ( <i>I don't have a good sense of what it is I'm trying to accomplish in my life.</i> )	1	2	3	4	5	6
36	Geçmişte bazı hatalar yaptım, ancak yine de her şeyin en iyi şekilde sonuçlandığını düşünüyorum. ( <i>I made some mistakes in the past, but I feel that all in all everything has worked out for the best.</i> )	1	2	3	4	5	6
37	Dostluklarımın bana çok şey kattığını düşünüyorum. ( <i>I feel like I get a lot out of my friendships.</i> )	1	2	3	4	5	6
38	İnsanlar yapmak istemediğim şeyleri yaptırabilmek için nadiren beni ikna edebilirler. ( <i>People rarely talk me into doing things I don't want to do.</i> )	1	2	3	4	5	6
39	Kişisel ve mali işlerimi yönetmede genellikle başarılıyım. ( <i>I generally do a good job of taking care of my personal finances and affairs.</i> )	1	2	3	4	5	6
40	Bana göre her yaşta insan kendini geliştirme ve yetiştirmeye devam edebilir. ( <i>In my view, people of every age are able to continue growing and developing.</i> )	1	2	3	4	5	6
41	Eskiden kendime amaçlar belirlerdim, fakat şimdi bu tür şeyler zaman kaybı gibi görünüyor. ( <i>I used to set goals for myself, but that now seems a waste of time.</i> )	1	2	3	4	5	6
42	Birçok yönden yaşamdan elde ettiklerime ilişkin hayal kırıklığı yaşadığımı hissediyorum. ( <i>In many ways, I feel disappointed about my achievements in my life.</i> )	1	2	3	4	5	6
43	Birçok kişinin benden daha fazla arkadaşı olduğunu düşünüyorum. ( <i>It seems to me that most other people have more friends than I do.</i> )	1	2	3	4	5	6
44	Benim için diğer insanlarla uyumlu olmak ilkelerimle yalnız başıma yaşamaktan daha önemlidir. ( <i>It is more important to me to "fit in" with others than to stand alone on my principles.</i> )	1	2	3	4	5	6
45	Her gün yapmak zorunda olduğum şeyleri yetiştirememek bende stres oluşturuyor. ( <i>I find it stressful that I can't keep up with all of the things I have to do each day.</i> )	1	2	3	4	5	6
46	Zamanla beni daha güçlü ve yetenekli bir birey haline getiren bir anlayış kazandım. ( <i>With time, I have gained a lot of insight about life that has made me a stronger, more capable person.</i> )	1	2	3	4	5	6

47	Geleceğe yönelik planlar yapmaktan ve onları gerçekleştirmek için çalışmaktan zevk alırım. ( <i>I enjoy making plans for the future and working to make them a reality.</i> )	1	2	3	4	5	6
48	Çoğunlukla kendimle ve yaşam tarzımla gurur duyarım. ( <i>For the most part, I am proud of who I am and the life I lead.</i> )	1	2	3	4	5	6
49	İnsanlar beni özverili ve zamanını diğerleriyle paylaşmaya istekli birisi olarak tanımlarlar. ( <i>People would describe me as a giving person, willing to share my time with others.</i> )	1	2	3	4	5	6
50	Genel kaniya ters düşse de görüşlerime güvenirim. ( <i>I have confidence in my opinions, even if they are contrary to the general consensus.</i> )	1	2	3	4	5	6
51	Yapılması gereken şeyleri yetiştirebilmek için zamanımı planlamada oldukça iyiyimdir. ( <i>I am good at juggling my time so that I can fit everything in that needs to be done.</i> )	1	2	3	4	5	6
52	Bir birey olarak zamanla kendimi çok geliştirdiğim kanısına sahibim. ( <i>I have a sense that I have developed a lot as a person over time.</i> )	1	2	3	4	5	6
53	Kendim için belirlediğim planlarımı yerine getirmede aktif bir kişiyim. ( <i>I am an active person in carrying out the plans I set for myself.</i> )	1	2	3	4	5	6
54	Birçok insanın yaşamına imrenirim. ( <i>I envy many people for the lives they lead.</i> )	1	2	3	4	5	6
55	Diğer insanlarla çok samimi ve güvenilir ilişkiler yaşamadım. ( <i>I have not experienced many warm and trusting relationships with others.</i> )	1	2	3	4	5	6
56	Tartışmalı konularla ilgili görüşlerimi dile getirmek benim için zordur. ( <i>It's difficult for me to voice my own opinions on controversial matters.</i> )	1	2	3	4	5	6
57	Günlük yaşamım çok yoğun ancak her şeye yetismekten doyum alıyorum. ( <i>My daily life is busy, but I derive a sense of satisfaction from keeping up with everything.</i> )	1	2	3	4	5	6
58	Eski alışkanlıklarımı değiştirmemi gerektiren yeni ortamlarda bulunmaktan hoşlanmıyorum. ( <i>I do not enjoy being in new situations that require me to change my old familiar ways of doing things.</i> )	1	2	3	4	5	6
59	Bazı insanlar yaşamını amaçsızca geçirir ancak ben onlardan biri değilim. ( <i>Some people wander aimlessly through life, but I am not one of them.</i> )	1	2	3	4	5	6
60	Kendime yönelik tutumlarım muhtemelen, diğer insanların kendilerine yönelik tutumları kadar olumlu değildir. ( <i>My attitude about myself is probably not as positive as most people feel about themselves.</i> )	1	2	3	4	5	6
61	Arkadaşlık ilişkilerinde kendimi genellikle dışarıdan bakan birisiymiş gibi hissedirim. ( <i>I often feel like I'm on the outside looking in when it comes to friendships.</i> )	1	2	3	4	5	6
62	Arkadaşlarım veya ailem onaylamazsa çoğunlukla kararlarımı değiştiririm.	1	2	3	4	5	6

	(I often change my mind about decisions if my friends or family disagree.)						
63	Günlük yaşam aktivitelerimi planlamaya çalıştığımda hayal kırıklığı yaşarım, çünkü yapmayı tasarladığım şeyleri asla tamamlayamam. (I get frustrated when trying to plan my daily activities because I never accomplish the things I set out to do.)	1	2	3	4	5	6
64	Benim için yaşam sürekli bir öğrenme, değişim ve gelişim sürecidir. (For me, life has been a continuous process of learning, changing, and growth.)	1	2	3	4	5	6
65	Bazen kendimi yapılması gereken her şeyi yapmış gibi hissedirim. (I sometimes feel as if I've done all there is to do in life.)	1	2	3	4	5	6
66	Yaşadığım hayatla ilgili olarak çoğunlukla sabahları yılgın biçimde uyanırım. (Many days I wake up feeling discouraged about how I have lived my life.)	1	2	3	4	5	6
67	Arkadaşlarıma güvенеbileceğimi bilirim, onlar da bana güvенеbileceklerini bilirler. (I know that I can trust my friends, and they know they can trust me.)	1	2	3	4	5	6
68	Belirli bir biçimde düşünmem veya davranmam için yapılan sosyal baskılara boyun eğecek biri değilim. (I am not the kind of person who gives in to social pressures to think or act in certain ways.)	1	2	3	4	5	6
69	Benim için gerekli olan aktivite ve ilişkileri bulmada oldukça başarılıyım. (My efforts to find the kinds of activities and relationships that I need have been quite successful.)	1	2	3	4	5	6
70	Görüşlerimin zamanla nasıl değiştiğini ve olgunlaştığını görmekten hoşlanırım. (I enjoy seeing how my views have changed and matured over the years.)	1	2	3	4	5	6
71	Yaşam amaçları benim için bir hayal kırıklığı değil doyum kaynağı olmuştur. (My aims in life have been more a source of satisfaction than frustration to me.)	1	2	3	4	5	6
72	Geçmiş yaşamımda iniş çıkışlarım olmuştur ancak genellikle geçmişimi değiştirmek istemezdim. (The past has its ups and downs, but in general, I wouldn't want to change it.)	1	2	3	4	5	6
73	Diğerleriyle konuşurken kendimi açmak benim için zordur. (I find it difficult to really open up when I talk with others.)	1	2	3	4	5	6
74	Yaşamımdaki seçimlerimi diğer insanların nasıl değerlendirdiğine ilişkin endişe duyarım. (I tend to worry about what other people think of me.)	1	2	3	4	5	6
75	Yaşamımı doyum sağlayacak şekilde düzenlemede zorlanırım. (I have difficulty arranging my life in a way that is satisfying to me.)	1	2	3	4	5	6
76	Yaşamımda büyük yenilikler veya değişiklikler yapmayı denemekten uzun zaman önce vazgeçtim. (I gave up trying to make big improvements or change in my life a long time ago.)	1	2	3	4	5	6
77	Yaşamdan neler kazandığımı düşünmek benim için doyum vericidir. (I find it satisfying to think about what I have accomplished in life.)	1	2	3	4	5	6

78	Kendimi arkadaşlarım ve tanıdıklarımla karşılaştırdığımda kim olduğuma ilişkin kendimi iyi hissedirim. (When I compare myself to friends and acquaintances, it makes me feel good about who I am.)	1	2	3	4	5	6
79	Ben ve arkadaşlarım birbirimizin problemlerine karşı duyarlı davranırız. (My friends and I sympathize with each other's problems.)	1	2	3	4	5	6
80	Kendimi değerlendirirken başkalarının önemseydiği değerleri değil kendi değerlerimi dikkate alırım. (I judge myself by what I think is important, not by the values of what others think is important.)	1	2	3	4	5	6
81	Zevklerime uygun bir ev ve yaşam tarzı kurabildim. (I have been able to build a home and a lifestyle for myself that is much to my liking.)	1	2	3	4	5	6
82	Bence “yaşlı bir köpeğe yeni numaralar öğretilemez” sözü doğrudur. (There is truth to the saying that you can't teach an old dog new tricks.)	1	2	3	4	5	6
83	Genel bir değerlendirme yaptığımda yaşamdan elde ettiklerimin çok fazla olduğundan emin değilim. (In the final analysis, I'm not so sure that my life adds up to much.)	1	2	3	4	5	6
84	Herkesin yetersizlikleri vardır ancak benimkiler daha fazla gibi görünüyor. (Everyone has their weaknesses, but I seem to have more than my share.)	1	2	3	4	5	6



## APPENDIX I

### ETHICAL APPROVAL

Evrak Tarih ve Sayısı: 26/06/2020-67

T.C.  
BOĞAZİÇİ ÜNİVERSİTESİ  
SOSYAL VE BEŞERİ BİLİMLER YÜKSEK LİSANS VE DOKTORA TEZLERİ ETİK İNCELEME  
KOMİSYONU  
TOPLANTI TUTANAĞI

Toplantı Sayısı : 4  
Toplantı Tarihi : 11/05/2020  
Toplantı Saati : 14:00  
Toplantı Yeri : Zoom Sanal Toplantı  
Bulunanlar : Prof. Dr. Feyza Çorapçı, Dr. Öğr. Üyesi Yasemin Sohtorik İlkmen, Prof. Dr. Özlem Hesapçı  
Karaca, Doç. Dr. Ebru Kaya, Prof. Dr. Fatma Nevra Seggie  
Bulunmayanlar :

Gizem Dal  
Psikoloji

Sayın Araştırmacı,

"Algılanan Ebeveyn Reddi ve Beliren Yetişkinlik Dönemindeki Psikolojik İyi Oluş: Yansıtıcı İşleyişin Moderatör Rolü" başlıklı projeniz ile ilgili olarak yaptığımız SBB-EAK 2020/30 sayılı başvuru komisyonumuz tarafından 11 Mayıs 2020 tarihli toplantıda incelenmiş ve uygun bulunmuştur.

Bu karar tüm üyelerin toplantıya çevrimiçi olarak katılımı ve oybirliği ile alınmıştır. COVID-19 önlemleri kapsamında kurul üyelerinden ıslak imza alınmadığı için bu onam mektubu üye ve raportör olarak Fatma Nevra Seggie tarafından bütün üyeler adına e-imzalanmıştır.

Saygılarımızla, bilgilerinizi rica ederiz.

Prof. Dr. Fatma Nevra SEGGIE  
ÜYE

e-imzalıdır  
Prof. Dr. Fatma Nevra SEGGIE  
Raportör

SOBETİK 4 11/05/2020

Bu belge 5070 sayılı Elektronik İmza Kanununun 5. Maddesi gereğince güvenli elektronik imza ile imzalanmıştır.

## APPENDIX J

### INFORMED CONSENT FORM

#### PARTICIPANT INFORMATION AND CONSENT FORM

**Institution Supporting the Research:** Boğaziçi University

**Name of the Research:** Perceived parental rejection and psychological well-being in emerging adulthood: Moderator role of reflective functioning

**Project Coordinator:** Dr. Yasemin Sohtorik İlkmen

**E-mail Address of the Project Coordinator:** sohtorik@boun.edu.tr

**Phone Number of the Project Coordinator:** ...

**Name of the Researcher:** Gizem Dal

**E-mail Address of the Researcher:** gizm.dal@gmail.com

**Phone Number of the Researcher:** ...

Dear Participant,

Gizem Dal, who is an M.A. student in the Psychology Department at Boğaziçi University, has been conducting a scientific research project. The main purpose of this study is to investigate the relation of the acceptance-rejection received from parents during childhood and the reflective functioning as a social cognitive ability with the psychological wellbeing during adulthood. We would like to share some important information before you decide whether or not to participate in this research. If you would like to participate in this research, you can start it by clicking on the checkbox which is at the bottom of this page.

This research has been approved by the Ethics Committee for Master and PhD Theses in Social Sciences and Humanities (Sosyal ve Beşeri Bilimler Yüksek Lisans ve Doktora Tezleri Etik İnceleme Komisyonu - SOBETİK) at Boğaziçi University. In order to participate in this study, you have to be between 18-29 years old. If you are in this age range and would like to participate in the study, your identifying information will not be asked, and you will be expected to fill a questionnaire on an online platform - that takes around 30 minutes to answer. The questionnaire you will answer consists of questions about your age, gender, educational, familial, and socioeconomic background in the first place, and then questions about some experiences you had with your parents during your childhood, some social cognitive abilities you have, your current state in terms of depression, anxiety and stress, and your psychological functioning.

Participation in this research is voluntary and participants will not receive any money or feedback. If you accept to participate in the research, you are free to withdraw at any time. This withdrawal will not cause any negative consequences for you. In this case, the answers you will have given will be deleted from the system by the researcher. All answers you give will be stored meticulously in the computer of the

M.A. student who conducts the research. Your student ID number, one of the information you are asked to share, is necessary for the verification of your participation and it will not be matched with any of your identifying information or your answers. All other information will be evaluated as a whole and used for scientific publication. When information is used in courses or presentations in congresses/seminars for educational purposes, results received from all participants will be shared as a whole.

This research is not expected to pose any risk to you. However, if you have any negative reaction, you may contact and ask the researcher to talk. You will be provided with an opportunity to have a meeting in a secure environment by protecting confidentiality.

If you would like to have additional information about the research, you may contact Yasemin Sohtorik İlkmen, Assistant Professor in Boğaziçi University Psychology Department, and Gizem Dal, the Researcher. If you have any complaints about the research, you may share them with the Ethics Committee for Master and PhD Theses in Social Sciences and Humanities (Sosyal ve Beşeri Bilimler Yüksek Lisans ve Doktora Tezleri Etik İnceleme Komisyonu - SOBETİK) through [sbe-ethics@boun.edu.tr](mailto:sbe-ethics@boun.edu.tr) e-mail address.

☐ **I have read the text above; and I fully understood the extent and purpose of the study and the responsibility I have as a volunteer. I understood that I may withdraw from the study at any time without explanation and without having any negative consequences due to the withdrawal. In these circumstances, I confirm that I want to participate in this research voluntarily, without any pressure or coercion.**

## APPENDIX K

### INFORMED CONSENT FORM (FOR BOĞAZIÇI UNIVERSITY STUDENTS)

#### PARTICIPANT INFORMATION AND CONSENT FORM

**Institution Supporting the Research:** Boğaziçi University

**Name of the Research:** Perceived parental rejection and psychological well-being in emerging adulthood: Moderator role of reflective functioning

**Project Coordinator:** Dr. Yasemin Sohtorik İlkmen

**E-mail Address of the Project Coordinator:** sohtorik@boun.edu.tr

**Phone Number of the Project Coordinator:** ...

**Name of the Researcher:** Gizem Dal

**E-mail Address of the Researcher:** gizm.dal@gmail.com

**Phone Number of the Researcher:** ...

Dear Participant,

Gizem Dal, who is an M.A. student in the Psychology Department at Boğaziçi University, has been conducting a scientific research project. The main purpose of this study is to investigate the relation of the acceptance-rejection received from parents during childhood and the reflective functioning as a social cognitive ability with the psychological wellbeing during adulthood. We would like to share some important information before you decide whether or not to participate in this research. If you would like to participate in this research, you can start it by clicking on the checkbox which is at the bottom of this page.

This research has been approved by the Ethics Committee for Master and PhD Theses in Social Sciences and Humanities (Sosyal ve Beşeri Bilimler Yüksek Lisans ve Doktora Tezleri Etik İnceleme Komisyonu - SOBETİK) at Boğaziçi University. In order to participate in this study, you have to be between 18-29 years old and a student in PSY 101 or PSY 241 courses. If you are in this age range and would like to participate in the study, your identifying information other than the school ID number will not be asked, and you will be expected to fill a questionnaire on an online platform - that takes around 30 minutes to answer. This online platform is a secure instrument that is created for scientific researches and where your responses are recorded safely. The questionnaire you will answer consists of questions about your age, gender, educational, familial, and socioeconomic background in the first place, and then questions about some experiences you had with your parents during your childhood, some social cognitive abilities you have, your current state in terms of depression, anxiety and stress, and your psychological functioning.

Participation in this research is voluntary. In exchange for participation in this study, the participant is rewarded only with 0,5 credits in PSY 101 or PSY 241 courses. Except for this, the participant will not receive any money or feedback. If you accept

to participate in the research, you are free to withdraw at any time. This withdrawal will not cause any negative consequences for you. In this case, the answers you will have given will be deleted from the system by the researcher. All answers you give will be stored meticulously in the computer of the M.A. student who conducts the research. Your student ID number, one of the information you are asked to share, is necessary for the verification of your participation and it will not be matched with any of your identifying information or your answers. All other information will be evaluated as a whole and used for scientific publication. When information is used in courses or presentations in congresses/seminars for educational purposes, results received from all participants will be shared as a whole.

This research is not expected to pose any risk to you. However, if you have any negative reaction, you may contact and ask the researcher to talk. You will be provided with an opportunity to have a meeting in a secure environment by protecting confidentiality.

If you would like to have additional information about the research, you may contact Yasemin Sohtorik İlkmen, Assistant Professor in Boğaziçi University Psychology Department, and Gizem Dal, the Researcher. If you have any complaints about the research, you may share them with the Ethics Committee for Master and PhD Theses in Social Sciences and Humanities (Sosyal ve Beşeri Bilimler Yüksek Lisans ve Doktora Tezleri Etik İnceleme Komisyonu - SOBETİK) through [sbe-ethics@boun.edu.tr](mailto:sbe-ethics@boun.edu.tr) e-mail address.

☐ **I have read the text above; and I fully understood the extent and purpose of the study and the responsibility I have as a volunteer. I understood that I may withdraw from the study at any time without explanation and without having any negative consequences due to the withdrawal. In these circumstances, I confirm that I want to participate in this research voluntarily, without any pressure or coercion.**

## REFERENCES

- Akın, A. (2008). The scales of psychological well-being: A study of validity and reliability. *Educational Sciences: Theory and Practice*, 8(3), 741-750.
- Ali, S., Khaleque, A., & Rohner, R. P. (2015). Pancultural gender differences in the relation between perceived parental acceptance and psychological adjustment of children and adult offspring: A meta-analytic review of worldwide research. *Journal of Cross-Cultural Psychology*, 46(8), 1059-1080.
- Allen, J. G., & Fonagy, P. (2006). *The handbook of mentalization-based treatment*. West Sussex, England: John Wiley & Sons Ltd.
- Allen, J. G., Fonagy, P., & Bateman, A. W. (2008). *Mentalizing in clinical practice*. Arlington, VA: American Psychiatric Publishing, Inc.
- Allport, G. W. (1961). *Pattern and growth in personality*. New York, NY: Holt, Rinehart & Winston.
- Antonsen, B. T., Johansen, M. S., Ro, F. G., Kvarstein, E. H., & Wilberg, T. (2016). Is reflective functioning associated with clinical symptoms and long-term course in patients with personality disorders? *Comprehensive Psychiatry*, 64, 46-58.
- Arnett, J. J. (2000). Emerging adulthood: A theory of development from the late teens through the twenties. *American Psychologist*, 55(5), 469-480.
- Arnett, J. J. (2014). *Emerging adulthood: The winding road from the late teens through the twenties*. New York, NY: Oxford University Press.
- Arnett, J. J., Žukauskienė, R., & Sugimura, K. (2014). The new life stage of emerging adulthood at ages 18–29 years: Implications for mental health. *The Lancet Psychiatry*, 1(7), 569-576.
- Atak, H., & Çok, F. (2010). İnsan yaşamında bir dönem: Beliren yetişkinlik. *Çocuk ve Gençlik Ruh Sağlığı Dergisi*, 17(1), 39-50.
- Badoud, D., Luyten, P., Fonseca-Pedrero, E., Eliez, S., Fonagy, P., & Debbané, M. (2015). The French version of the Reflective Functioning Questionnaire: Validity data for adolescents and adults and its association with non-suicidal self-injury. *PloS One*, 10(12), e0145892.
- Baldwin, M. W. (1992). Relational schemas and the processing of social information. *Psychological Bulletin*, 112(3), 461-484.
- Ballespí, S., Vives, J., Debbané, M., Sharp, C., & Barrantes-Vidal, N. (2018). Beyond diagnosis: Mentalization and mental health from a transdiagnostic point of view in adolescents from non-clinical population. *Psychiatry Research*, 270, 755-763.

- Ballespí, S., Vives, J., Sharp, C., Chanes, L., & Barrantes-Vidal, N. (2021). Self and other mentalizing polarities and dimensions of mental health: Association with types of symptoms, functioning and well-being. *Frontiers in Psychology*, 12, 1-13.
- Bateman, A. W., & Fonagy, P. E. (2012). *Handbook of mentalizing in mental health practice*. Arlington, VA: American Psychiatric Publishing, Inc.
- Berthelot, N., Lemieux, R., Garon-Bissonnette, J., Lacharité, C., & Muzik, M. (2019). The protective role of mentalizing: Reflective functioning as a mediator between child maltreatment, psychopathology and parental attitude in expecting parents. *Child Abuse & Neglect*, 95, 104065.
- Bilgel, N., & Bayram, N. (2010). Turkish version of the Depression Anxiety Stress Scale (DASS-42): Psychometric properties. *Archives of Neuropsychiatry*, 47(2), 118-126.
- Bion, W. R. (1962). The psycho-analytic study of thinking. *International Journal of Psycho-Analysis*, 43, 306-310.
- Borelli, J. L., Brugnera, A., Zarbo, C., Rabboni, M., Bondi, E., Tasca, G. A., & Compare, A. (2019). Attachment comes of age: Adolescents' narrative coherence and reflective functioning predict well-being in emerging adulthood. *Attachment & Human Development*, 21(4), 332-351.
- Borelli, J. L., Ensink, K., Gillespie, M. L., Falasiri, E., Bernazzani, O., Fonagy, P., & Berthelot, N. (2020). Mothers' self-focused reflective functioning interacts with childhood experiences of rejection to predict current romantic relationship quality and parenting behavior. *Family Process*, 1-15. doi:10.1111/famp.12603
- Borelli, J. L., Compare, A., Snavely, J. E., & Decio, V. (2015). Reflective functioning moderates the association between perceptions of parental neglect and attachment in adolescence. *Psychoanalytic Psychology*, 32(1), 23-35.
- Bowlby, J. (1982). *Attachment and loss: Vol. 1. Attachment* (2nd ed.). New York, NY: Basic Books.
- Bowlin, S. L., & Baer, R. A. (2012). Relationships between mindfulness, self-control, and psychological functioning. *Personality and Individual Differences*, 52(3), 411-415.
- Bradburn, N.M. (1969). *The structure of psychological well-being*. Chicago, IL: Aldine.
- Bretherton, I., & Munholland, K. A. (2008). Internal working models in attachment relationships: Elaborating a central construct in attachment theory. In J. Cassidy & P. R. Shaver (Eds.), *Handbook of attachment: Theory, research, and clinical applications* (2nd ed., pp. 102-127). New York, NY: Guilford Press.

- Brown, T. A. (2015). *Confirmatory factor analysis for applied research*. New York, NY: Guilford Publications.
- Brown, K. W., & Ryan, R. M. (2003). The benefits of being present: Mindfulness and its role in psychological well-being. *Journal of Personality and Social Psychology*, 84(4), 822.
- Brugnera, A., Zarbo, C., Compare, A., Talia A., Tasca G.A., Jong, K., Greco, A., Greco, F., Pievani, L., Auteri, A. & Coco, G.L. (2021). Self-reported reflective functioning mediates the association between attachment insecurity and well-being among psychotherapists. *Psychotherapy Research*, 31(2), 247-257.
- Buhler, C. (1935). The curve of life as studied in biographies. *Journal of Applied Psychology*, 19(4), 405-409.
- Burt, K. B., & Paysnick, A. A. (2012). Resilience in the transition to adulthood. *Development and Psychopathology*, 24(2), 493-505.
- Chen, Y., Kubzansky, L. D., & VanderWeele, T. J. (2019). Parental warmth and flourishing in mid-life. *Social Science & Medicine*, 220, 65-72.
- Choi-Kain, L. W., & Gunderson, J. G. (2008). Mentalization: Ontogeny, assessment, and application in the treatment of borderline personality disorder. *American Journal of Psychiatry*, 165(9), 1127-1135.
- Cicchetti, D., & Rogosch, F. A. (2002). A developmental psychopathology perspective on adolescence. *Journal of Consulting and Clinical Psychology*, 70(1), 6-19.
- Cowen, E. L. (1991). In pursuit of wellness. *American Psychologist*, 46(4), 404-408.
- Cowen, E. L. (1994). The enhancement of psychological wellness: Challenges and opportunities. *American Journal of Community Psychology*, 22(2), 149-179.
- Crugnola, C. R., Ierardi, E., Bottini, M., Verganti, C., & Albizzati, A. (2019). Childhood experiences of maltreatment, reflective functioning and attachment in adolescent and young adult mothers: Effects on mother-infant interaction and emotion regulation. *Child Abuse & Neglect*, 93, 277-290.
- Çok, F., & Atak, H. (2015). Emerging adulthood in Turkey: Does it (yet) exist? *Online Journal of Counseling & Education*, 4(3), 46-75.
- De Meulemeester, C., Vansteelandt, K., Luyten, P., & Lowyck, B. (2018). Mentalizing as a mechanism of change in the treatment of patients with borderline personality disorder: A parallel process growth modeling approach. *Personality Disorders: Theory, Research, and Treatment*, 9(1), 22-29.
- Dedeler, M., Akun, E., & Batigun, A. D. (2017). Turkish adaptation of adult parental acceptance-rejection questionnaire short form. *The Journal of Psychiatry and Neurological Sciences*, 30(3), 181-193.



- Diener, E., Sapyta, J. J., & Suh, E. (1998). Subjective well-being is essential to well-being. *Psychological Inquiry*, 9(1), 33-37.
- Dimitrijevic, A., Hanak, N., Altaras Dimitrijevic, A., & Jolic Marjanovic, Z. (2018). The Mentalization Scale (MentS): A self report measure for the assessment of mentalizing capacity. *Journal of Personality Assessment*, 100, 268-280.
- Disabato, D. J., Goodman, F. R., Kashdan, T. B., Short, J. L., & Jarden, A. (2016). Different types of well-being? A cross-cultural examination of hedonic and eudaimonic well-being. *Psychological Assessment*, 28(5), 471-482.
- Ensink, K., Berthelot, N., Bernazzani, O., Normandin, L., & Fonagy, P. (2014). Another step closer to measuring the ghosts in the nursery: Preliminary validation of the Trauma Reflective Functioning Scale. *Frontiers in Psychology*, 5, 1471.
- Erikson, E. H. (1951/1993). *Childhood and society*. New York, NY: WW Norton & Company.
- Erikson, E. H. (1959). Identity and the life cycle. *Psychological Issues*, 1, 18-164.
- Erikson, E. H. (1968). *Identity: Youth and crisis*. New York, NY: W.W. Norton & Company Ltd.
- Euler, S., Nolte, T., Constantinou, M., Griem, J., Montague, P. R., Fonagy, P., & Personality and Mood Disorders Research Net Work. (2019). Interpersonal problems in borderline personality disorder: Associations with mentalizing, emotion regulation, and impulsiveness. *Journal of Personality Disorders*, 33, 1-17.
- Faul, F., Erdfelder, E., Buchner, A., & Lang, A. G. (2009). Statistical power analyses using G\*Power 3.1: Tests for correlation and regression analyses. *Behavior Research Methods*, 41(4), 1149-1160.
- Ferguson, L. J., & Gunnell, K. E. (2016). Eudaimonic well-being: A gendered perspective. In Vittersø, J. (Ed.) *Handbook of eudaimonic well-being* (pp. 427-437). Cham: Springer International Publishing.
- Fischer-Kern, M., & Tmej, A. (2019). Mentalization and depression: Theoretical concepts, treatment approaches and empirical studies – An overview. *Zeitschrift für Psychosomatische Medizin und Psychotherapie*, 65(2), 162-177.
- Fişek, G. O. (1991). A cross-cultural examination of proximity and hierarchy as dimensions of family structure. *Family Process*, 30(1), 121-133.
- Fonagy, P., & Bateman, A. W. (2016). Adversity, attachment, and mentalizing. *Comprehensive Psychiatry*, 64, 59-66.

- Fonagy, P., Bateman, A. W., & Luyten, P. (2012). Introduction and overview: Attachment and mentalization. In A. W. Bateman & P. E. Fonagy (Eds.), *Handbook of mentalizing in mental health practice* (pp. 3-42). Arlington, VA: American Psychiatric Publishing, Inc.
- Fonagy, P., Gergely, G., Jurist, E., & Target, M. (2002). *Affect regulation, mentalization, and the development of the self*. New York, NY: Other Press.
- Fonagy, P., Leigh, T., Steele, M., Steele, H., Kennedy, R., Mattoon, G., Target, M., & Gerber, A. (1996). The relation of attachment status, psychiatric classification, and response to psychotherapy. *Journal of Consulting and Clinical Psychology*, 64(1), 22-31.
- Fonagy, P., & Luyten, P. (2018). *Attachment, mentalizing, and the self*. Retrieved from [https://discovery.ucl.ac.uk/id/eprint/1535395/1/Fonagy%20Luyten\\_with%20figures.pdf](https://discovery.ucl.ac.uk/id/eprint/1535395/1/Fonagy%20Luyten_with%20figures.pdf)
- Fonagy, P., Luyten, P., Allison, E., & Campbell, C. (2017). What we have changed our minds about: Part 1. Borderline personality disorder as a limitation of resilience. *Borderline Personality Disorder and Emotion Dysregulation*, 4(1), 11.
- Fonagy, P., Luyten, P., Moulton-Perkins, A., Lee, Y. W., Warren, F., Howard, S., Fearon, P. & Lowyck, B. (2016). Development and validation of a self-report measure of mentalizing: The reflective functioning questionnaire. *PLoS One*, 11(7), e0158678. doi:10.1371/journal.pone.0158678.
- Fonagy, P., Steele, M., Steele, H., Higgitt, A., & Target, M. (1994). The Emanuel Miller memorial lecture 1992 the theory and practice of resilience. *Journal of Child Psychology and Psychiatry*, 35(2), 231-257.
- Fonagy, P., & Target, M. (1997). Attachment and reflective function: Their role in self-organization. *Development and Psychopathology*, 9(4), 679-700.
- Fonagy, P., Target, M., Steele, H., & Steele, M. (1998). *Reflective-functioning manual, version 5.0, for application to adult attachment interviews*. Retrieved from <http://citeseerx.ist.psu.edu/viewdoc/download?doi=10.1.1.466.3207-&rep=rep1&type=pdf>
- Frankl, V. E. & Lasch, I. (1959/1992). *Man's search for meaning: An introduction to logotherapy*. Boston, MA: Beacon Press
- Gallese, V., Keysers, C., & Rizzolatti, G. (2004). A unifying view of the basis of social cognition. *Trends in Cognitive Sciences*, 8(9), 396-403.
- Gambin, M., Woźniak-Prus, M., Konecka, A., & Sharp, C. (2021). Relations between attachment to mother and father, mentalizing abilities and emotion regulation in adolescents. *European Journal of Developmental Psychology*, 18(1), 18-37.

- García Mendoza, M. D. C., Sánchez Queija, I., & Parra Jiménez, Á. (2019). The role of parents in emerging adults' psychological well-being: A person-oriented approach. *Family Process*, 58(4), 954-971.
- Giovazolias, T., Karagiannopoulou, E., & Mitsopoulou, E. (2017). Can the factor structure of Defense Style Questionnaire (DSQ-40) contribute to our understanding of parental acceptance/rejection, bullying, victimization and perceived well-being in Greek early adolescents? *Europe's Journal of Psychology*, 13(2), 269-285.
- Greenfield, E. A., & Marks, N. F. (2010). Identifying experiences of physical and psychological violence in childhood that jeopardize mental health in adulthood. *Child Abuse & Neglect*, 34(3), 161-171.
- Grossmann, K., Grossmann, K. E., Fremmer-Bombik, E., Kindler, H., Scheuerer-Englisch, H., & Zimmermann, A. P. (2002). The uniqueness of the child-father attachment relationship: Fathers' s sensitive and challenging play as a pivotal variable in a 16-year longitudinal study. *Social Development*, 11(3), 301-337.
- Guarnieri, S., Smorti, M., & Tani, F. (2015). Attachment relationships and life satisfaction during emerging adulthood. *Social Indicators Research*, 121(3), 833-847.
- Harrington, R., & Loffredo, D. A. (2010). Insight, rumination, and self-reflection as predictors of well-being. *The Journal of Psychology*, 145(1), 39-57.
- Hausberg, M. C., Schulz, H., Piegler, T., Happach, C. G., Klöpper, M., Brütt, A. L., Sammet, I., & Andreas, S. (2012). Is a self-rated instrument appropriate to assess mentalization in patients with mental disorders? Development and first validation of the Mentalization Questionnaire (MZQ). *Psychotherapy Research*, 22, 699–709.
- Herrenkohl, T. I., Klika, J. B., Herrenkohl, R. C., Russo, M. J., & Dee, T. (2012). A prospective investigation of the relationship between child maltreatment and indicators of adult psychological well-being. *Violence and Victims*, 27(5), 764-776.
- Herrmann, A. S., Beutel, M. E., Gerzymisch, K., Lane, R. D., Pastore-Molitor, J., Wiltink, J., Zwerenz, R., Banerjee, M. & Subic-Wrana, C. (2018). The impact of attachment distress on affect-centered mentalization: An experimental study in psychosomatic patients and healthy adults. *PloS One*, 13(4), e0195430. doi:10.1371/journal.pone.0195430
- Huppert, F. A. (2009). Psychological well-being: Evidence regarding its causes and consequences. *Applied Psychology: Health and Well-Being*, 1(2), 137-164.
- Huppert, F. A. (2014). The state of wellbeing science: Concepts, measures, interventions, and policies. In F. A. Huppert & C. Cooper (Eds.). (2014). *Wellbeing: A complete reference guide, interventions and policies to enhance wellbeing* (Vol. 6, pp. 1-49). Oxford, UK: John Wiley & Sons.

- Huppert, F. A., Abbott, R. A., Ploubidis, G. B., Richards, M., & Kuh, D. (2010). Parental practices predict psychological well-being in midlife: Life-course associations among women in the 1946 British birth cohort. *Psychological Medicine*, 40(9), 1507-1518.
- Huta, V. (2016). An overview of hedonic and eudaimonic well-being concepts. In L. Reinecke & M. B. Oliver (Eds.). *The routledge handbook of media use and well-being* (pp. 14-34). New York, NY: Routledge.
- Huta, V., & Waterman, A. S. (2014). Eudaimonia and its distinction from hedonia: Developing a classification and terminology for understanding conceptual and operational definitions. *Journal of Happiness Studies*, 15(6), 1425-1456.
- Jahoda, M. (1958). *Current concepts of positive mental health*. New York, NY: Basic Books.
- Jolliffe, D., & Farrington, D. P. (2006). Development and validation of the Basic Empathy Scale. *Journal of Adolescence*, 29(4), 589-611.
- Jung, C. G. (1933). *Modern man in search of a soul* (W. S. Dell & C. F. Baynes, Trans.). London, England: Kegan Paul, Trench, Trubner & Co Ltd.
- Kahneman, D., Diener, E., & Schwarz, N. (Eds.). (1999). *Well-being: Foundations of hedonic psychology*. New York, NY: Russell Sage Foundation.
- Kashdan, T. B., Biswas-Diener, R., & King, L. A. (2008). Reconsidering happiness: The costs of distinguishing between hedonics and eudaimonia. *The Journal of Positive Psychology*, 3(4), 219-233.
- Keyes, C. L. (2002). The mental health continuum: From languishing to flourishing in life. *Journal of Health and Social Behavior*, 43(2), 207-222.
- Keyes, C. L. (2007). Promoting and protecting mental health as flourishing: A complementary strategy for improving national mental health. *American Psychologist*, 62(2), 95-108.
- Keyes, C. L., & Annas, J. (2009). Feeling good and functioning well: Distinctive concepts in ancient philosophy and contemporary science. *The Journal of Positive Psychology*, 4(3), 197-201.
- Keyes, C. L., Dhingra, S. S., & Simoes, E. J. (2010). Change in level of positive mental health as a predictor of future risk of mental illness. *American Journal of Public Health*, 100(12), 2366-2371.
- Keyes, C. L., Shmotkin, D., & Ryff, C. D. (2002). Optimizing well-being: The empirical encounter of two traditions. *Journal of Personality and Social Psychology*, 82(6), 1007-1022.
- Khaleque, A., & Ali, S. (2017). A systematic review of meta-analyses of research on interpersonal acceptance-rejection theory: Constructs and measures. *Journal of Family Theory & Review*, 9(4), 441-458.

- Khaleque, A., & Rohner, R. P. (2002). Reliability of measures assessing the pancultural association between perceived parental acceptance-rejection and psychological adjustment: A meta-analysis of cross-cultural and intracultural studies. *Journal of Cross-Cultural Psychology*, 33(1), 87-99.
- Khaleque, A., & Rohner, R. P. (2012). Pancultural associations between perceived parental acceptance and psychological adjustment of children and adults: A meta-analytic review of worldwide research. *Journal of Cross-Cultural Psychology*, 43(5), 784-800.
- Ki, P., Rohner, R. P., Britner, P. A., Halgunseth, L. C., & Rigazio-DiGilio, S. A. (2018). Coping with remembrances of parental rejection in childhood: Gender differences and associations with intimate partner relationships. *Journal of Child and Family Studies*, 27(8), 2441-2455.
- Kim, H. Y. (2013). Statistical notes for clinical researchers: Assessing normal distribution (2) using skewness and kurtosis. *Restorative Dentistry & Endodontics*, 38(1), 52-54.
- Knoop, H. H. (2016). The eudemonics of education. In Vittersø, J. (Ed.) *Handbook of eudaimonic well-being* (pp. 453-473). Cham: Springer International Publishing.
- Kong, J. (2018). Childhood maltreatment and psychological well-being in later life: The mediating effect of contemporary relationships with the abusive parent. *The Journals of Gerontology: Series B*, 73(5), e39-e48.
- Kuyumcu, B., & Rohner, R. P. (2016). The relation between remembered parental acceptance in childhood and self-acceptance among young Turkish adults. *International Journal of Psychology*, 53(2), 126-132.
- Lamb, M. E., Pleck, J. H., Charnov, E. L., & Levine, J. A. (1987). A biosocial perspective on paternal behavior and involvement. In J.B. Lancaster, J. Altmann, A.S. Rossi & L.R. Sherrod (Eds.). *Parenting across the life span: Biosocial dimensions* (pp. 111-142). New York, NY: Taylor & Francis.
- Lambert, L., Passmore, H. A., & Holder, M. D. (2015). Foundational frameworks of positive psychology: Mapping well-being orientations. *Canadian Psychology/Psychologie Canadienne*, 56(3), 311-321.
- Lane, J. A., Leibert, T. W., & Goka-Dubose, E. (2017). The impact of life transition on emerging adult attachment, social support, and well-being: A multiple-group comparison. *Journal of Counseling & Development*, 95(4), 378-388.
- Leary, M. R. (2012). *Introduction to behavioral research methods* (6th Ed.). New Jersey, NJ: Pearson Education, Inc.
- Lecours, S., & Bouchard, M. A. (1997). Dimensions of mentalisation: Outlining levels of psychic transformation. *International Journal of Psycho-Analysis*, 78, 855-875.

- Lent, R. W. (2004). Toward a unifying theoretical and practical perspective on well-being and psychosocial adjustment. *Journal of Counseling Psychology*, 51(4), 482-509.
- Li, E. T., Carracher, E., & Bird, T. (2020). Linking childhood emotional abuse and adult depressive symptoms: The role of mentalizing incapacity. *Child Abuse & Neglect*, 99, 104253.
- Lieberman, M. D. (2007). Social cognitive neuroscience: A review of core processes. *Annual Review of Psychology*, 58, 259-289.
- Lovibond, P. F., & Lovibond, S. H. (1995). The structure of negative emotional states: Comparison of the Depression Anxiety Stress Scales (DASS) with the Beck Depression and Anxiety Inventories. *Behaviour Research and Therapy*, 33(3), 335-343.
- Luyten, P., Campbell, C., Allison, E., & Fonagy, P. (2020). The mentalizing approach to psychopathology: State of the art and future directions. *Annual Review of Clinical Psychology*, 16, 297-325.
- Luyten, P. & Fonagy, P. (n.d.). *The Reflective Functioning Questionnaire (RFQ)*. Retrieved from <https://www.ucl.ac.uk/psychoanalysis/research/reflective-functioning-questionnaire-rfq>.
- Luyten, P., & Fonagy, P. (2015). The neurobiology of mentalizing. *Personality Disorders: Theory, Research, and Treatment*, 6(4), 366-379.
- Luyten, P., & Fonagy, P. (2018). The stress–reward–mentalizing model of depression: An integrative developmental cascade approach to child and adolescent depressive disorder based on the Research Domain Criteria (RDoC) approach. *Clinical Psychology Review*, 64, 87-98.
- Luyten, P., Fonagy, P., Lowyck, B., & Vermote, R. (2012). Assessment of mentalization. In A. W. Bateman & P. E. Fonagy (Eds.), *Handbook of mentalizing in mental health practice* (pp. 43-66). Arlington, VA: American Psychiatric Publishing, Inc.
- Luyten, P., Nijssens, L., Fonagy, P., & Mayes, L. C. (2017). Parental reflective functioning: Theory, research, and clinical applications. *The Psychoanalytic Study of the Child*, 70(1), 174-199.
- Martin, P., & Martin, M. (2002). Proximal and distal influences on development: The model of developmental adaptation. *Developmental Review*, 22(1), 78-96.
- Maslow, A. H. (1968). *Toward a psychology of being* (2nd ed.). New York, NY: Van Nostrand Reinhold.
- Masten, A. S., Obradović, J., & Burt, K. B. (2006). Resilience in emerging adulthood: Developmental perspectives on continuity and transformation. In J. J. Arnett & J. L. Tanner (Eds.), *Emerging adults in America: Coming of age in the 21st century* (pp. 173-190). Washington, DC: American Psychological Association.

- Metindoğan, A. (2015). Fathering in Turkey. In Roopnarine, J. L. (Ed.) *Fathers across cultures: The importance, roles, and diverse practices of dads* (pp. 327-349). Santa Barbara, CA: ABC-CLIO LLC.
- Moran, K. M., Turiano, N. A., & Gentzler, A. L. (2018). Parental warmth during childhood predicts coping and well-being in adulthood. *Journal of Family Psychology*, 32(5), 610-621.
- Morandotti, N., Brondino, N., Merelli, A., Boldrini, A., De Vidovich, G. Z., Ricciardo, S., & Luyten, P. (2018). The Italian version of the Reflective Functioning Questionnaire: Validity data for adults and its association with severity of borderline personality disorder. *PloS One*, 13(11), e0206433. doi:10.1371/journal.pone.0206433
- Müller, S., Wendt, L. P, Spitzer, C., Masuhr, O., Back, S. N., Zimmermann, J. (2020, October 31). A critical evaluation of the Reflective Functioning Questionnaire. doi:10.31234/osf.io/5rhme
- Németh, N., Péterfalvi, Á., Czéh, B., Tényi, T., & Simon, M. (2020). Examining the relationship between executive functions and mentalizing abilities of patients with borderline personality disorder. *Frontiers in Psychology*, 11, 1583.
- Neugarten, B. L. (1968). The awareness of middle age. In B. L. Neugarten (Ed.), *Middle age and aging* (pp. 93-98). Chicago, IL: University of Chicago Press.
- Özyeşil, Z., Arslan, C., Kesici, Ş., & Deniz, M. E. (2011). Bilinçli Farkındalık Ölçeği'nin Türkçe'ye uyarlama çalışması. *Eğitim ve Bilim*, 36(160), 224-235.
- Reyes, M. E. S., Davis, R. D., Yapcengco, F. L., Bordeos, C. M. M., Gesmundo, S. C., & Torres, J. K. M. (2020). Perceived parental acceptance, transgender congruence, and psychological well-being of Filipino transgender individuals. *North American Journal of Psychology*, 22(1), 135-152.
- Ripoll, L. H., Snyder, R., Steele, H., & Siever, L. J. (2013). The neurobiology of empathy in borderline personality disorder. *Current Psychiatry Reports*, 15(3), 344.
- Rogers, C. R. (1961). *On becoming a person*. Boston, MA: Houghton Mufflin.
- Rohner, R. P. (2005a). Glossary of significant concepts in parental acceptance-rejection theory. In R.P. Rohner & A. Khaleque (Eds.), *Handbook for the study of parental acceptance and rejection* (4th ed., pp. 379–397). Storrs, CT: Rohner Research.
- Rohner, R. P. (2005b). Parental acceptance-rejection questionnaire (PARQ): Test manual. In R.P. Rohner, A. Khaleque (Eds). *Handbook for the study of parental acceptance and rejection*. Storrs, CT: Rohner Research Publications.
- Rohner, R. P. (2016). *Introduction to interpersonal acceptance-rejection theory (IPARTheory), methods, evidence, and implications*. Retrieved from <https://csiar.uconn.edu/wp-content/uploads/sites/494/2014/02/Interpersonal-ACCEPTANCE-for-web-07-19-16-1.pdf>

- Rohner, R. P., & Britner, P. A. (2002). Worldwide mental health correlates of parental acceptance-rejection: Review of cross-cultural and intracultural evidence. *Cross-Cultural Research*, 36(1), 16-47.
- Rohner, R. P., Khaleque, A., & Cournoyer, D. E. (2012). Introduction to parental acceptance-rejection theory, methods, evidence, and implications. *Journal of Family Theory & Review*, 2(1), 73-87.
- Rohner, R. P., & Lansford, J. E. (2017). Deep structure of the human affectional system: Introduction to interpersonal acceptance-rejection theory. *Journal of Family Theory & Review*, 9(4), 426-440.
- Rohner, R. P., & Rohner, E. C. (1980). Antecedents and consequences of parental rejection: A theory of emotional abuse. *Child Abuse & Neglect*, 4(3), 189-198.
- Rothrauff, T. C., Cooney, T. M., & An, J. S. (2009). Remembered parenting styles and adjustment in middle and late adulthood. *Journals of Gerontology Series B: Psychological Sciences and Social Sciences*, 64(1), 137-146.
- Ruini, C., & Ryff, C. D. (2016). Using eudaimonic well-being to improve lives. In A. M. Wood & J. Johnson (Eds.), *The Wiley handbook of positive clinical psychology: An integrative approach to studying and improving well-being* (pp. 153-166). Chichester, West Sussex, UK: John Wiley & Sons.
- Ryan, R. M., & Deci, E. L. (2001). On happiness and human potentials: A review of research on hedonic and eudaimonic well-being. *Annual Review of Psychology*, 52(1), 141-166.
- Ryff, C. D. (1989). Happiness is everything, or is it? Explorations on the meaning of psychological well-being. *Journal of Personality and Social Psychology*, 57(6), 1069-1081.
- Ryff, C. D. (2014). Psychological well-being revisited: Advances in the science and practice of eudaimonia. *Psychotherapy and Psychosomatics*, 83(1), 10-28.
- Ryff, C. D., Lee, Y. H., Essex, M. J., & Schmutte, P. S. (1994). My children and me: Midlife evaluations of grown children and of self. *Psychology and Aging*, 9(2), 195-205.
- Ryff, C. D., Magee, W. J., Kling, K. C., & Wing, E. H. (1999). Forging macro-micro linkages in the study of psychological well-being. In C. D. Ryff & V. W. Marshall (Eds.), *The self and society in aging processes* (pp. 247-278). New York, NY: Springer Publishing Company, Inc.
- Ryff, C. D., & Singer, B. (1996). Psychological well-being: Meaning, measurement, and implications for psychotherapy research. *Psychotherapy and Psychosomatics*, 65(1), 14-23.
- Ryff, C. D., & Singer, B. (1998). The contours of positive human health. *Psychological Inquiry*, 9(1), 1-28.



- Ryff, C. D., & Singer, B. H. (2008). Know thyself and become what you are: A eudaimonic approach to psychological well-being. *Journal of Happiness Studies*, 9(1), 13-39.
- Ryff, C. D., Singer, B. H., & Dienberg Love, G. (2004). Positive health: Connecting well-being with biology. *Philosophical Transactions of the Royal Society of London. Series B: Biological Sciences*, 359(1449), 1383-1394.
- Sandler, J., & Rosenblatt, B. (1962). The concept of the representational world. *The Psychoanalytic Study of the Child*, 17(1), 128-145.
- Sart, Z. H., Börkan, B., Erkman, F., & Serbest, S. (2016). Resilience as a mediator between parental acceptance-rejection and depressive symptoms among university students in Turkey. *Journal of Counseling & Development*, 94(2), 195-209.
- Scandurra, C., Dolce, P., Vitelli, R., Esposito, G., Testa, R. J., Balsam, K. F., & Bochicchio, V. (2020). Mentalizing stigma: Reflective functioning as a protective factor against depression and anxiety in transgender and gender-nonconforming people. *Journal of Clinical Psychology*, 76(9), 1613-1609.
- Schleicher, H., Alonso, C., Shirtcliff, E. A., Muller, D., Loevinger, B. L., & Coe, C. L. (2005). In the face of pain: The relationship between psychological well-being and disability in women with fibromyalgia. *Psychotherapy and Psychosomatics*, 74(4), 231-239.
- Schulenberg, J. E., & Zarrett, N. R. (2006). Mental health during emerging adulthood: Continuity and discontinuity in courses, causes, and functions. In J. J. Arnett & J. L. Tanner (Eds.), *Emerging adults in America: Coming of age in the 21st century* (pp. 135-172). Washington, DC: American Psychological Association.
- Spitzer, C., Zimmermann, J., Brähler, E., Euler, S., Wendt, L. P., & Müller, S. (2020). Die deutsche Version des Reflective Functioning Questionnaire (RFQ): Eine teststatistische Überprüfung in der Allgemeinbevölkerung [The German version of the Reflective Functioning Questionnaire (RFQ): A psychometric evaluation in the German general population]. *Psychotherapie-Psychosomatik – Medizinische Psychologie*. Advance online publication. doi:10.1055/a-1234-6317
- Sroufe, L. A. (1997). Psychopathology as an outcome of development. *Development and Psychopathology*, 9(2), 251-268.
- Stacks, A. M., Muzik, M., Wong, K., Beeghly, M., Huth-Bocks, A., Irwin, J. L., & Rosenblum, K. L. (2014). Maternal reflective functioning among mothers with childhood maltreatment histories: Links to sensitive parenting and infant attachment security. *Attachment & Human Development*, 16(5), 515-533.
- Steele, E. H., & McKinney, C. (2019). Emerging adult psychological problems and parenting style: Moderation by parent-child relationship quality. *Personality and Individual Differences*, 146, 201-208.

- Stein, H. (2006). Does mentalizing promote resilience. In J. G. Allen & P. Fonagy (Eds.) *Handbook of mentalization-based treatments* (pp. 307-326). West Sussex, England: John Wiley & Sons Ltd.
- Stoet, G. (2010). PsyToolkit - A software package for programming psychological experiments using Linux. *Behavior Research Methods*, 42(4), 1096-1104.
- Stoet, G. (2017). PsyToolkit: A novel web-based method for running online questionnaires and reaction-time experiments. *Teaching of Psychology*, 44(1), 24-31.
- Sunar, D. (2002). Change and continuity in the Turkish middle-class family. In E. Özdalga & R. Liljestrom (Eds.). *Autonomy and dependence in the family: Turkey and Sweden in critical perspective* (pp. 217-238). Istanbul: Swedish Research Institute.
- Sunar, D., & Fişek, G. (2005). Contemporary Turkish families. In U. Gielen & J. Roopnarine (Eds.), *Families in global perspective* (pp. 169-183). Boston, MA: Pearson/Allyn and Bacon.
- Tanner, J. L. (2006). Recentering during emerging adulthood: A critical turning point in life span human development. In J. J. Arnett & J. L. Tanner (Eds.), *Emerging adults in America: Coming of age in the 21st century* (pp. 21-56). Washington, DC: American Psychological Association.
- Topçu, Ç., Baker, Ö. E., & Aydın, Y. Ç. (2010). Temel empati ölçeği Türkçe uyarlaması: Geçerlik ve güvenirlik çalışması. *Türk Psikolojik Danışma ve Rehberlik Dergisi*, 4(34), 174-182.
- Trudeau, K. J., & Reich, R. (1995). Correlates of psychological mindedness. *Personality and Individual Differences*, 19(5), 699-704.
- Waterman, A. S. (1984). *The psychology of individualism*. New York, NY: Praeger.
- Waterman, A. S. (1993). Two conceptions of happiness: Contrasts of personal expressiveness (eudaimonia) and hedonic enjoyment. *Journal of Personality and Social Psychology*, 64(4), 678-691.
- Winefield, H. R., Gill, T. K., Taylor, A. W., & Pilkington, R. M. (2012). Psychological well-being and psychological distress: Is it necessary to measure both?. *Psychology of Well-Being: Theory, Research and Practice*, 2(1), 3.
- Winnicott, D. W. (1971). *Playing and reality*. London, England: Routledge.
- Wood, A. M., & Joseph, S. (2010). The absence of positive psychological (eudemonic) well-being as a risk factor for depression: A ten-year cohort study. *Journal of Affective Disorders*, 122(3), 213-217.
- World Health Organization (2018). *Mental health: Strengthening our response*. Retrieved from <https://www.who.int/news-room/fact-sheets/detail/mental-health-strengthening-our-response>.