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Comparing reports of peer rejection: Associations with rejection sensitivity, victimization, aggression, and friendship



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A B S T R A C T

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Perceiving that one is rejected is an important correlate of emotional maladjustment. Yet, self-perceptions can substantially differ from classmate-reports of who is rejected. In this study, discrepancies between self- and classmate-reports of rejection were identified in 359 Australian adolescents (age 10–12 years). As expected, adolescents who overestimated rejection reported more rejection sensitivity and felt more victimized by their peers, but were not seen by peers as more victimized. Adolescents who underestimated rejection identified themselves as high in overt aggression, and their peers identified them as high in overt and relational aggression and low in prosocial behavior. Yet, underestimators' feelings of friendship satisfaction did not seem to suffer and they reported low rejection sensitivity. Results suggest that interventions to promote adolescent health should explicitly recognize the different needs of those who do and do not seem to perceive their high rejection, as well as adolescents who overestimate their rejection.

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Theory and research identify peer rejection in adolescence as a significant risk for emotional maladjustment (Beeri & Lev-Wiesel, 2012; Zimmer-Gembeck, Hunter, Waters, & Pronk, 2009), but research also has identified the particular importance of adolescents' perceptions of whether they are accepted or rejected by their peers (Bowker & Spencer, 2010; Graham, Bellmore, & Juvonen, 2003). When adolescents perceive they are rejected, the link with emotional maladjustment is often even stronger, accounting for additional variance in depressive symptoms and other aspects of emotional health (White & Kistner, 2011).

Because of the importance of perceptions of belonging and rejection for understanding emotional health (Baumeister & Leary, 1995), perceptual differences have been an increasing focus of recent research. Results show that some adolescents have perceptions of their peer rejection that agrees with their peers' reports, but others over- or underestimate their peer problems (Cole, Martin, Peeke, Serocynski, & Hoffman, 1998; Hoffman, Cole, Martin, Tram, & Seroczynski, 2000; Zimmer-Gembeck, Hunter, & Pronk, 2007). Overestimation of rejection, defined as an elevated perception of being disliked (i.e., rejected) when compared to reports from others about whom they do dislike, has been found to identify a group of young people that is at similar risk for mental health problems when compared to young people who are actually highly rejected (Graham et al., 2003; Hoffman et al., 2000; Sandstrom, Cillessen, & Eisenhower, 2003; White & Kistner, 2011). In fact, it is not even the case that many overestimators can actually be called rejected since their peers often say they are average or even

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more liked than average. Overestimators do, however, report high levels of emotional problems, such as depressive symptoms, that are similar to adolescents who are accurate about the extent of their rejection. In contrast, adolescents who agree with their peers about their level of acceptance, or who are rejected but underestimate it, do not show the same internalizing problems as overestimators and low accepted youth.

Young people who agree (i.e., are concordant) with their peers about their high rejection and those who overestimate rejection are at risk for mental health problems, but these groups are important to distinguish because each would likely benefit from different types of interventions. For example, those with accurate perceptions may need an individual intervention to improve their self-concept and their social skills, while having opportunities to practice new skills. In contrast, those young people who overestimate their rejection may need more personal assistance to identify the reasons for their misperceptions and individualized help to address them. Finally, a third group, underestimators of rejection, could have a positive self-system or other social strengths, but may also have some risk factors that might assist with intervention design. On the one hand, underestimators, by definition, underestimate their own social rejection, and this may reflect higher self-esteem and other positive attributes when compared to rejected adolescents who are aware of their rejection (or those who overestimate rejection; [David & Kistner, 2000](#)). On the other hand, previous research has found that they are higher in aggressive behavior than their typical peers, although almost all studies have been conducted with children rather than adolescents and almost all have focused on overt (i.e., physical and verbal) aggression only ([Brendgen, Vitaro, Turgeon, Poulin, & Wanner, 2004](#); [Edens, Cavell, & Hughes, 1999](#); [Guerra, Asher, & De Rosier, 2004](#); [White & Kistner, 2011](#)).

Thus, previous research has shown that there are groups of young people who overestimate or underestimate their rejection by peers. This information has been useful for identifying elevated symptoms of mental health problems, but no study has focused on identifying personal and social factors that are likely to account for youth's overestimation and underestimation of rejection. In the present study, the aim was to identify correlates of overestimation and underestimation of rejection focusing on factors amenable to intervention such as social cognitive biases and social behavior and experiences. It was anticipated that this information could be useful for developing interventions to address the diversity of needs of young people at risk of mental health problems. Such information could also identify personal and social factors associated with adolescents' positive self-perceptions despite the negative views of others.

Rejection sensitivity as a correlate of overestimation

The rejection sensitivity (RS) model ([Downey & Feldman, 1996](#); [Downey, Freitas, Michaelis, & Khouri, 1998](#)) has drawn attention to the particular expectations of others and interpretation of ambiguous social events, which differ between youth. RS has been defined as the tendency to anxiously expect rejection and to readily perceive and overreact to it ([Downey & Feldman, 1996](#)). Downey and colleagues proposed that rejection experiences instigate a disposition toward RS. Consistent with this, RS has been found to be an outcome of rejection experiences, even when rejection is collected by methods other than self-report ([London, Downey, Bonica, & Paltin, 2007](#); [Sandstrom et al., 2003](#)). RS is accompanied by, and foreshadows, emotional maladjustment, as well ([Marston, Hare, & Allen, 2010](#); [McDonald, Bowker, Rubin, Laursen, & Duchene, 2010](#); [Sandstrom et al., 2003](#)). In addition to being a concern for adjustment problems, a pattern of RS, which involves biased perceptions of social events, should identify young people who are particularly likely to overreport peer rejection ([Sandstrom et al., 2003](#)). Yet no previous study has directly addressed whether RS is associated with biased perceptions of rejection. Hence, our first purpose was to examine the association between RS and overestimation of rejection, with the expectation that early adolescents who were higher in RS would be more likely to overestimate their rejection.

Victimization, aggression, prosocial behavior and friendship

Focusing on peer rejection is only one way of identifying problems or success with peers and it may not completely capture all of the important peer social experiences that impact on adolescents' self-perceptions of how much they are accepted or rejected. Hence, a second purpose of the current study was to examine other aspects of the peer social environment, namely victimization, aggression, prosocial behavior and friendship satisfaction, in order to identify other social experiences that might explain overestimation and underestimation of peer rejection. Peer rejection is known to be higher among adolescents who are victimized or aggressive, whether it is physical/verbal ([Wei & Chen, 2009](#); [Zimmer-Gembeck, Geiger, & Crick, 2005](#)) or relational ([Crick & Grotpeter, 1995](#)). Yet, measures of rejection, victimization, aggression and prosocial behavior can capture different aspects of peer relationships and interactions. For example, not all victimized adolescents are rejected, and this particularly has been found for relational victimization, whereby some young people are both victimized and liked by their peers ([Geiger, Zimmer-Gembeck, & Crick, 2004](#); [Ray, Cohen, Secrist, & Duncan, 1997](#); [Zimmer-Gembeck, Pronk, Goodwin, Mastro, & Crick, 2013](#)). Hence, some victimized adolescents may overestimate their rejection.

A similar argument can be made about peer rejection and friendship quality. Some children who are disliked by the peer group (i.e., rejected children) report high quality friendships and the associations between peer rejection and friendship satisfaction among adolescents are often quite modest ([Hodges, Boivin, Vitaro, & Bukowski, 1999](#)). This suggests that friendship experiences may be somewhat disconnected from general peer group acceptance or rejection, and could play a unique role in adolescents' perceptions of their own rejection. Hence, when adolescents perceive their friendship quality as low, they may overestimate their peer rejection even when their broader peer group reports lower rejection. In the present

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