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Personality and Individual Differences 41 (2006) 395–406

PERSONALITY AND
INDIVIDUAL DIFFERENCES

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Adaptive and maladaptive dimensions of relatedness and self-definition: Relationship with postpartum depression and anxiety

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Received 30 November 2004; received in revised form 1 October 2005; accepted 28 November 2005

Available online 5 May 2006

Abstract

This study investigated the role of adaptive and maladaptive personality dimensions associated with self-definition and relatedness as measured by the Depressive Experiences Questionnaire (DEQ; Blatt, D’Afflitti, & Quinlan, 1976) in a sample of 244 young mothers. It was hypothesized that only maladaptive personality dimensions related to self-definition and relatedness (i.e., Self-Critical Perfectionism and Dependency), but not adaptive dimensions (i.e., Efficacy and Relatedness), would be associated with severity of depression and anxiety in the postpartum period. In addition, it was hypothesized that Dependency would be more strongly associated with anxiety symptoms, while Self-Critical Perfectionism was expected to be more strongly related to severity of depression.

Results showed that, as expected, Self-Critical Perfectionism, but not Efficacy, was related to depressive feelings in the postpartum period. However, contrary to expectations, Relatedness, but not Dependence, was associated with severity of depression and trait anxiety. Self-Critical Perfectionism was against expectations more strongly related to both severity of depression and anxiety. Results were similar for first-time versus multiparous mothers.

Although further research needs to replicate these findings, results of this study suggest that clinicians should pay attention to personality issues in working with pregnant women or young mothers.

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Keywords: Postpartum depression; Anxiety; Personality

1. Introduction

Both clinical theory (Cohen & Slade, 2000; Stern, 1995) and research findings (e.g., Hopkins, Marcus, & Campbell, 1984) suggest that the transition to motherhood is a stressful period that may interact with personality vulnerabilities to depression. In particular, the transition to motherhood can be understood as a time when issues of both relatedness and self-definition come to the fore imposing a reassessment of identity and autonomy as well as of close interpersonal relationships, thus putting mothers at increased risk for depression.

One approach to study these issues is offered by theoretical conceptualizations that have distinguished between adaptive and maladaptive dimensions of autonomy/identity and relatedness (e.g., Blatt & Schichman, 1983; Priel & Besser, 1999; for a review see Blatt, 2004). Originally, these models focused on maladaptive dimensions of autonomy and relatedness that is Self-Criticism and Dependency, as vulnerability factors for depression (Arieti & Bemporad, 1978; Blatt, 1974; Blatt et al., 1976). Self-Critical individuals are described as overly preoccupied with self-definition, control and perfection, dependent individuals as preoccupied with fears for abandonment and loss.

Later, Blatt and colleagues (e.g., Blatt & Schichman, 1983; Blatt, Zohar, Quinlan, Zuroff, & Mongrain, 1995) expanded their model in terms of a broad model of normal and pathological personality development. They conceptualized normal personality development as the result of a dialectical interaction between two developmental lines, i.e., an introjective line that leads to adaptive and stable feelings of autonomy and identity, and an anaclitic line that leads to the capacity for differentiated and complex interpersonal relationships, whereas psychopathology is considered to be characterized by an overemphasis on or neglect of one of these developmental lines. Thus two clusters of psychopathology can be identified. In the introjective cluster, psychopathology is focused around problems related to identity, autonomy, self-criticism, and guilt, whereas in the anaclitic clusters conflicts concerning interpersonal relationships predominate. In this context, Blatt (e.g., Blatt, 2004; Blatt et al., 1995) coined the notions of *relatedness* versus *dependence* to denote adaptive versus maladaptive dimensions of interpersonal relatedness. The less mature level of interpersonal relatedness, *dependence*, is characterized by strong wishes to be taken care of, feelings of abandonment, and fears for rejection and loss of gratification and support. The more mature level, *relatedness*, implies a more reciprocal attachment to a particular person.

This theoretical evolution was paralleled by the finding that the Depressive Experiences Questionnaire (DEQ; Blatt et al., 1976), originally designed to measure dependency and self-criticism, also measured adaptive aspects of autonomy and interpersonal relatedness. Using Small Space Analysis (SSA), a theory-driven clustering procedure, Blatt and colleagues (Blatt et al., 1995; Blatt, Zohar, Quinlan, Luthar, & Hart, 1996) identified two subfactors, i.e., Relatedness versus Dependency, within the DEQ Dependency factor. Likewise, recent studies suggest that whereas the DEQ Self-Criticism factor assesses a maladaptive level of autonomy and identity, the third DEQ factor, Efficacy, measures a more adaptive level, characterized by expressions of competence and confidence in one's self and in the future (Blatt, 2004).

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