

## CHAPTER 6



# Interpersonal Dependency

ROBERT F. BORNSTEIN

Interpersonal dependency—the tendency to rely on other people for protection and support even in situations in which autonomous functioning is warranted—is one of the more widely studied traits in social, personality, and clinical psychology, with more than 1,000 published studies during the past 50 years (Bornstein, 2005). Individual differences in dependency not only predict important features of social behavior (e.g., help seeking, conformity, suggestibility) but also have implications for illness risk (Bornstein, 1998c), health service use (Tyrer, Mitchard, Methuen, & Ranger, 2003), compliance with medical and psychotherapeutic regimens (Poldrugo & Forti, 1988), and success in adjusting to the physical and emotional challenges of aging (Baltes, 1996).

This chapter reviews research on the interpersonal dynamics of interpersonal dependency. Following a brief overview of classic and contemporary theoretical models and the most widely used dependency assessment tools, research on dependency as a social construct is discussed. As the ensuing review shows, the construct of dependency is more complex than psychologists initially thought, with investigations in this area shaped by two distinct trends. First, although dependent people often exhibit acquiescent, compliant behavior, studies suggest that in

certain situations they may actually behave quite actively—even aggressively. Second, although high levels of interpersonal dependency are associated with social and psychological impairment in a variety of contexts, in certain settings high levels of dependency may actually enhance adjustment and functioning.

### Conceptualizing Dependency

The first influential theoretical model of interpersonal dependency came from psychoanalytic theory, wherein a dependent personality orientation was conceptualized as the product of “oral fixation”—continued preoccupation during adulthood with the events and developmental challenges of the infantile oral stage. As Freud (1908/1959, p. 167) noted, “one very often meets with a type of character in which certain traits are very strongly marked while at the same time one’s attention is arrested by the behavior of these persons in regard to certain bodily functions.” Thus classical psychoanalytic theory postulated that the orally fixated (or oral dependent) person would: (1) continue to rely on others for nurturance, guidance, protection, and support and (2) exhibit behaviors in adulthood that mirror those of the

oral stage (e.g., preoccupation with activities of the mouth, reliance on food and eating as a strategy for coping with anxiety).

Empirical support for the classical psychoanalytic model of dependency was mixed (see Bornstein, 1996), and gradually this perspective was supplanted by an object relations model wherein dependency was conceptualized as resulting from the internalization of a mental representation of the self as weak and ineffectual (Blatt, 1974). Retrospective and prospective studies of parent–child interactions confirmed that those parenting styles that cause children to perceive themselves as powerless and vulnerable are in fact associated with high levels of interpersonal dependency later in life (Baker, Capron, & Azorloza, 1996; Blatt & Homann, 1992). Specifically, overprotective and authoritarian parenting, alone or in combination, are associated with the development of a dependent personality, in part because of the impact these two parenting styles have on the child’s sense of self. Overprotective parenting teaches children that they are fragile and weak and must look outward to others for protection from a harsh and threatening environment. Authoritarian parenting, by contrast, teaches the child that the way to get by in life is to accede passively to others’ demands and expectations (see Bornstein, 1993, 2005, for detailed reviews of studies in this area).

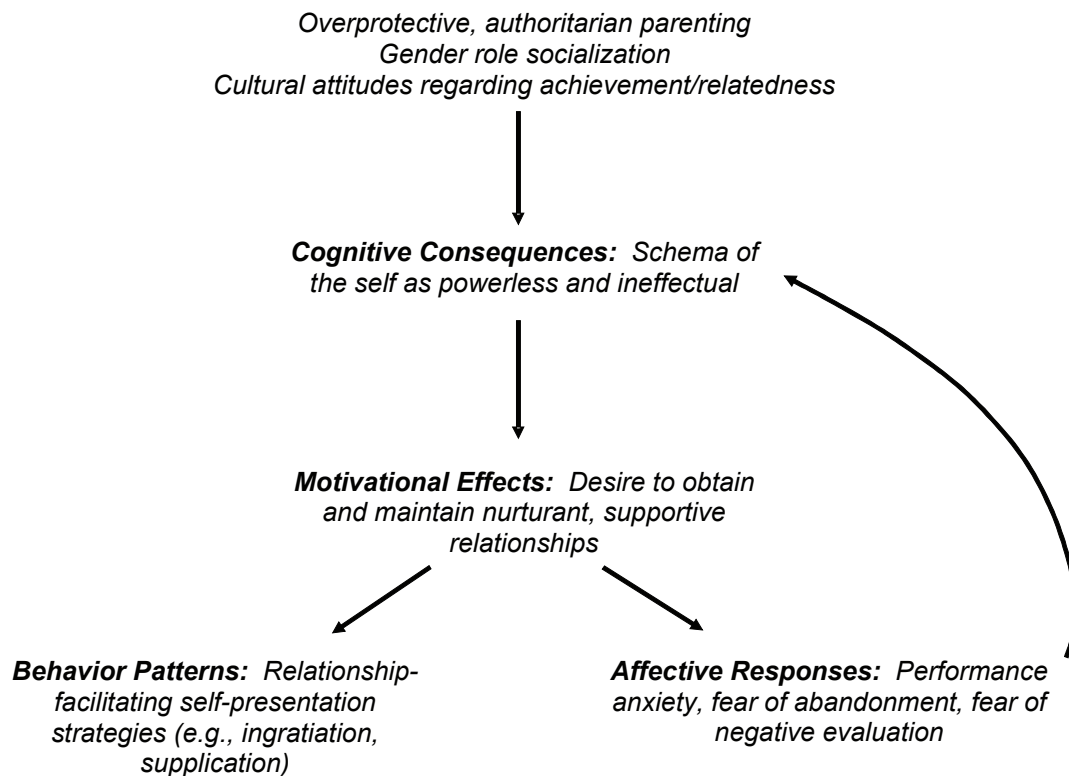
Behavioral and social learning models called psychologists’ attention to the role that learning—including observational learning—may play in the etiology and dynamics of dependency-related responding. As Ainsworth (1969) pointed out, intermittent reinforcement of dependency-related behavior will propagate this behavior over time and across situation; as Bandura (1977) noted, modeling—including symbolic modeling—can facilitate this learning/reinforcement process. Building on these initial social learning models, later researchers showed that traditional gender role socialization practices may help account for the higher levels of overt dependent behavior exhibited by women relative to men insofar as dependent responding is discouraged more strongly in boys than in girls in most Western societies (Cross, Bacon, & Morris, 2000). Analyses of cultural variations in dependency further indicated that traditionally sociocentric

cultures (e.g., India, Japan) have tended to be more tolerant of dependency in adults than are more individualistic cultures (e.g., America, Great Britain), wherein dependency is associated with immaturity, frailty, and dysfunction (Johnson, 1993; Yamaguchi, 2004).

Combining key elements of extant theoretical frameworks, Bornstein (1992, 1993, 1996, 2005) delineated an interactionist model wherein interpersonal dependency is conceptualized in terms of four primary components: (1) *cognitive* (i.e., a perception of oneself as powerless and ineffectual coupled with the belief that others are comparatively powerful and potent); (2) *motivational* (i.e., a strong desire to obtain and maintain relationships with potential protectors and caregivers); (3) *affective* (i.e., fear of abandonment, fear of negative evaluation by figures of authority); and (4) *behavioral* (i.e., use of relationship-facilitating self-presentation strategies to strengthen ties to others and preclude abandonment and rejection). The links among these four components of dependency are illustrated in Figure 6.1.

As Figure 6.1 shows, three variables (parenting style, gender role socialization, and cultural norms regarding achievement and relatedness) are central to the etiology of a dependent personality style, leading to the construction of a “helpless self-concept.” This helpless self-concept is the linchpin of a dependent personality orientation—the psychological mechanism from which all other manifestations of dependency originate. First, a perception of oneself as powerless and ineffectual helps create the motivational component of dependency: If one views oneself as weak and ineffectual, then one’s desire to curry favor with potential caregivers and protectors will increase. These dependency-related motivations in turn give rise to dependency-related behaviors (e.g., ingratiating, supplication) and to affective responses that reflect the dependent person’s core beliefs about the self. Finally, as the feedback loop in the right half of Figure 6.1 indicates, dependency-related affective responses actually reinforce the dependent person’s perception of the self as powerless and ineffectual. Thus, when a dependency-related affective response (e.g., fear of abandonment by a valued other) occurs, the helpless self-concept is primed (i.e., brought into working memory),

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**FIGURE 6.1.** An interactionist model of interpersonal dependency. As this figure shows, dependent personality traits reflect the interplay of cognitive, motivational, emotional, and behavioral features, all of which stem from early learning and socialization experiences within and outside the family.

and dependency-related responding is more likely to occur (see Bornstein, Ng, Gallagher, Kloss, & Regier, 2005).

Although several researchers have examined links between dependency and attachment to ascertain whether interpersonal dependency may be best conceptualized in terms of a characteristic pattern of attachment-related behavior, for the most part results in this area have been inconclusive. Some investigations have found high levels of interpersonal dependency to be associated with an insecure attachment style (Collins & Read, 1990; Pincus & Wilson, 2001), but others have found that dependent children and adults tend to show preoccupied or secure attachment (see Meyer & Pilkonis, 2005; Sperling & Berman, 1991). Differences in the findings obtained in these studies may be due in part to the different populations assessed and different attachment-style measures used (Bornstein, 2005), but given researchers' interest in attachment-based models of personality and interpersonal functioning, continued exploration of

dependency–attachment links is clearly warranted.

### Assessing Dependency

Because interpersonal dependency is of interest to social, personality, and clinical psychologists, numerous measures of dependency have been developed during the past several decades; at least 30 different measures are currently in use (Bornstein, 1999, 2005). The vast majority of these are either self-report or free-response tests.

#### *Self-Report Scales*

Self-report dependency scales typically consist of a series of dependency-related self-statements, each of which is evaluated by the respondent using a true–false or Likert rating scale. Most self-report dependency tests are fairly transparent, so respondents (especially psychologically minded respondents) are at least partially aware that test items are tap-

ping dependency-related traits, attitudes, and behaviors. For this reason self-report measures are best conceptualized as assessing *self-attributed dependency needs*—dependency needs that the respondent sees in him- or herself and is willing to acknowledge when asked. Among the more widely used self-report dependency tests are Hirschfeld and colleagues' (1977) Interpersonal Dependency Inventory (IDI, which yields a single score reflecting overall level of dependency); Pincus and Gurtman's (1995) 3-Vector Dependency Inventory (3VDI, which yields separate scores for three dependency subtypes—Exploitable, Submissive, and Love Dependency); and Bornstein and colleagues' (2003) Relationship Profile Test (RPT, which includes three subscales measuring Destructive Overdependence, Dysfunctional Detachment, and Healthy Dependency).

### *Free-Response Measures*

In contrast to the situation involving self-report scales, a single free-response measure—Masling, Rabie, and Blondheim's (1967) Rorschach Oral Dependency (ROD) scale—has dominated dependency research for the past several decades, being used in more than 80% of studies involving free-response dependency scores. As with all free-response tests, the ROD scale requires respondents to provide open-ended descriptions of ambiguous stimuli (in this case, Rorschach inkblots); these descriptions are then scored for the proportion of responses containing oral and/or dependent imagery. Although free-response tests in general (and the Rorschach in particular) have been the subject of considerable controversy in recent years, construct validity data for the ROD scale are quite strong, and Rorschach proponents and critics alike acknowledge the utility of the scale as a measure of interpersonal dependency (see, e.g., Hunsley & Bailey, 1999). Because the purpose of the ROD scale is not obvious, ROD scores are unaffected by respondents' degree of insight regarding their underlying dependency needs or by self-presentation and self-report biases. ROD scores are best conceptualized as assessing *implicit dependency needs*—dependency needs that the person might not be aware of but that nonetheless help shape dependency-related responding.

### *Test Score Convergences and Discontinuities*

For many years researchers viewed self-report and free-response tests as alternative methods for assessing the strength of a psychological need or motive. However, as McClelland, Koestner, and Weinberger (1989) pointed out, the traditional view of self-report and free-response test scores as equivalent and interchangeable is inaccurate. McClelland and colleagues (1989, pp. 698–699) noted instead that “measures of implicit motives provide a more direct readout of motivational and emotional experiences than do self-reports that are filtered through analytic thought and various concepts of self and others, [because] implicit motives are more often built on early, prelinguistic affective experiences whereas self-attributed motives are more often built on explicit teaching by parents as to what values or goals it is important for a child to pursue.”

A key corollary of McClelland and colleagues' (1989) framework is that even when self-report and free-response dependency tests show evidence of good concurrent and predictive validity, scores on these tests should be only modestly intercorrelated because they tap different psychological processes and assess different manifestations of dependency. Support for this corollary came from two meta-analyses. First, Bornstein (1999) assessed the behaviorally referenced validity coefficients of widely used dependency scales, finding that the mean validity coefficient ( $r$ ) for self-report tests (number of studies = 54) was .26, whereas the mean validity coefficient for free-response tests (number of studies = 32) was .37. These validity coefficients are comparable to those typically obtained when trait-based measures are pooled across different contexts, settings, and dimensions of trait-related behavior (see Baldwin & Sinclair, 1996; Mischel, Shoda, & Mendoza-Denton, 2002). Second, Bornstein (2002) found that in published studies wherein both types of dependency measures were used (number of studies = 12), the mean self-report/free-response test score correlation was .24.

The modest intercorrelations of self-report and free-response dependency tests provide an opportunity to examine naturally occurring discontinuities between implicit and

self-attributed dependency needs. Although many people score consistently high or consistently low on these two measures and may therefore be described as being generally *dependent* or *nondependent*, others obtain inconsistent scores on self-report and free-response tests. Some people obtain high free-response scores but low self-report scores; these people have *unacknowledged dependency strivings*. In contrast, some people obtain low free-response scores but high self-report scores; these people may be described as having a *dependent self-presentation*.

Self-attributed dependency needs seem to best predict mindful, goal-directed dependent behavior, whereas implicit dependency needs predict more spontaneous, reflexive expressions of dependency. Using an in vivo experience sampling methodology over 4 weeks, Bornstein (1998a) found that college students who were *dependent* or showed a *dependent self-presentation* made a large number of direct requests for help from professors, friends, and family members; in contrast, college students with *unacknowledged dependency strivings* made few direct requests but many indirect requests for help (e.g., hinting to roommates that they needed assistance on a homework assignment, implying that a ride to the mall was needed without explicitly asking for a ride). A second experiment demonstrated that when participants completed self-report and free-response dependency tests (the IDI and the ROD scale) and then took part in a laboratory problem-solving task in which they were permitted to ask an experimenter for assistance, the way in which the task was labeled altered the predictive power of the two dependency scales. When the laboratory task was identified to participants as a measure of help seeking, number of requests for assistance was more strongly related to IDI than to ROD scores, but when the task was identified as a measure of problem solving, number of requests for assistance was more strongly related to ROD than to IDI scores (Bornstein, 1998a). Apparently, the way participants perceive and interpret a given situation will determine whether dependency-related behavior is best predicted by self-report or free-response dependency scores (see also Bornstein, 2005, for a discussion of this issue).

Although self-report and free-response dependency scales differ in myriad ways, they do have one important feature in common: On both types of measures a low score merely reflects an absence of dependent behavior; it does not necessarily indicate high levels of autonomous, independent, or counterdependent behavior. Increasingly, theoreticians and researchers conceptualize dependency, autonomy, and independence as distinct constructs, with *autonomy* characterized by self-confidence, self-directedness, and healthy connectedness and *independence* characterized by some degree of isolation and detachment, along with an unwillingness to rely on or be influenced by others (see Bornstein, 2005, and Bornstein et al., 2003, for detailed discussions of these three personality styles).

### Dependency as a Social Construct

Although there have been about a half dozen investigations exploring discontinuities between implicit and self-attributed dependency needs (Bornstein, 1998a, 1998b, 2007; Bornstein, Bowers, & Bonner, 1996a, 1996b), the vast majority of studies to date have used a single self-report or free-response measure to assess level of dependency and examine links between dependency and various indices of social behavior. Following a brief summary of seminal theoretical writings on the interpersonal correlates and consequences of dependency, empirical studies of dependency and social behavior are reviewed.

#### *The Traditional View: Dependency as Passivity*

Kraepelin (1913) and Schneider (1923) were among the first theoreticians to discuss the dependency-passivity link, but the notion that high levels of dependency are associated with a compliant, acquiescent stance in interpersonal interactions was popularized primarily by psychoanalytic theorists who wrote extensively on this topic during the first decades of the 20th century. Abraham (1927, p. 400) summarized nicely the prevailing view of dependency at that time when he argued that dependent persons “are

dominated by the belief that there will always be some kind person—a representative of the mother, of course—to care for them and give them everything they need. This optimistic belief condemns them to inactivity ... they make no kind of effort, and in some cases they even disdain to undertake a breadwinning occupation.” Twenty years later Fromm (1947, p. 62) extended this characterization of the dependent person, noting that these individuals “are dependent not only on authorities for knowledge and help, but on people in general for any kind of support. They feel lost when alone because they feel that they cannot do anything without help. It is characteristic of these people that their first thought is to find somebody else to give them needed information rather than make even the slightest effort on their own.”

Given these views, it is not surprising that throughout much of the 20th century social research emphasized the passive aspects of dependency, documenting links between dependency and suggestibility (Jakubczak & Walters, 1959; Tribich & Messer, 1974), help seeking (Diener, 1967; Shilkret & Masling, 1981), interpersonal yielding in an Asch-type paradigm (Kagan & Mussen, 1956; Masling, Weiss, & Rothschild, 1968), and compliance with the perceived expectations of experimenters (Weiss, 1969) and professors (Masling, O’Neill, & Jayne, 1981). Even today researchers tend to focus primarily on the passive, acquiescent features of interpersonal dependency (e.g., Leising, Sporberg, & Rehbein, 2006; Vittengl, Clark, & Jarrett, 2003).

### *From Pervasive Passivity to Goal-Driven Activity*

When Bornstein, Masling, and Poynton (1987) conducted a modified replication of Masling and colleagues’ (1968) yielding experiment, an unexpected pattern emerged. In Bornstein and colleagues’ study, dependent and nondependent undergraduates were selected using the ROD scale. Same-sex pairs consisting of one dependent and one nondependent student were constructed, and participants were informed that they were taking part in a study of the decision-making process. They were asked to determine indi-

vidually the gender of 10 poets after reading brief poem excerpts; the experimenter then compared the two participants’ judgments and selected three poems on which they had disagreed. The experimenter asked the two participants to discuss these three poems for 10 minutes and come to a consensus decision regarding the gender of the poets.

In line with previous results in this area, Bornstein and colleagues (1987) expected that the dependent participants would change their opinions in the majority of dyads, but in fact the opposite occurred: In 35 of 50 dyads (70%) the nondependent participant yielded to the initial opinion of the dependent participant on at least two of the three poems. Postexperiment interviews provided some insight regarding the psychological processes that led to this unexpected pattern: A majority of dependent participants indicated that they chose not to alter their initial opinions because they wanted to impress the experimenter (who—in contrast to the typical Asch paradigm—was aware of the participant’s initial opinion before the discussions took place). In other words, when confronted with choosing between impressing a figure of authority by holding their ground or accommodating a peer by yielding, the dependent participants opted to stand by their initial opinions and impress the authority figure.

### *Context-Driven Variability in Responding*

Following Bornstein and colleagues’ (1987) study, researchers became increasingly interested in identifying contextual cues that help shape dependency-related behavior. A study by Bornstein, Riggs, Hill, and Calabrese (1996) was among the first to document some of these cues. In Bornstein and colleagues’ investigation, same-sex pairs of college students were brought to the laboratory and told they were taking part in a study of the personality–creativity link. Each pair consisted of one dependent and one nondependent student, classified using Hirschfeld and colleagues’ (1977) IDI. The two students were told that because they had obtained similar personality profiles in an earlier testing (actually the dependency prescreening), they were expected to obtain comparable creativity scores.

Half the participants were told that their creativity test data would be seen only by the other student (the *no-authority* condition); the remaining participants were told their tests would be reviewed by two psychology professors who would contact them later in the semester to discuss their results (the *authority* condition). Participants were then given several opportunities to engage in behaviors they believed would enhance or undermine their test performance (e.g., choosing to do many or few practice items before taking the test, choosing to listen to relaxing or distracting music while being tested).

The results of the experiment were clear: Dependent students “self-handicapped” (i.e., did few practice items, chose distracting background music) in the *no-authority* condition, because their primary goal in this situation was to be liked by the peer. However, dependent students “self-enhanced” (i.e., did many practice items, chose relaxing background music) in the *authority* condition, because their primary goal had changed: Now, impressing the professors became more important than getting along with a peer. Nondependent students’ behavior was unaffected by authority condition.

These findings illustrate the predictable variability in dependency-related behavior and confirm that this variability is largely a function of the dependent person’s perceptions of interpersonal risks and opportunities. With no authority figure present, being liked by a peer was paramount, but once a figure of authority entered into the equation, impressing this person became more important than getting along with a peer. Thus dependent students exhibited a very rational social influence strategy: They chose to curry favor with the person best able to offer protection and support over the long term.

Using a very different paradigm, Thompson and Zuroff (1998, 1999) assessed context-driven variability in mothers’ responses to their adolescent sons and daughters. In their first investigation Thompson and Zuroff (1998) divided a sample of mothers into dependent and nondependent groups, then provided each mother false feedback regarding her daughter’s problem-solving skill (competence) and desire to partner with her mother on a problem-solving task (autonomy). Dependent mothers responded to their daughters’ autonomy and competence

with authoritarian behavior and negative performance feedback but provided positive feedback under conditions of low daughter competence. When Thompson and Zuroff (1999) replicated this study with mother–son pairs, a similar pattern emerged, with dependent mothers providing the most positive feedback to sons who displayed average competence and low autonomy. Apparently dependent mothers are threatened by competent and autonomous behaviors in their sons and daughters and respond to these behaviors by subtly undermining their offspring’s confidence through negative feedback.

### *An Interactionist Perspective on Dependency*

These findings, taken together, confirm that dependency-related responding is proactive, goal-driven, and guided by beliefs and expectations regarding the self, other people, and self–other interactions. Thus the behavior of dependent persons varies considerably from situation to situation, but the dependent person’s underlying cognitions and motives remain constant. With this in mind, it is not surprising that dependent college students who believe they performed well on a major-specific aptitude test choose to wait significantly longer than high-performing nondependent college students to go over their test results with one of their major professors (approximately 15 minutes for the dependent students versus 8 minutes for nondependent students). These waiting-time differences increase when the dependent student’s helpless self-concept is activated via a series of subliminal lexical primes (Bornstein, 2006b, Experiment 1). However, when participants are informed that the professor who is to go over their test results with them will be leaving the college at the end of the semester (and therefore cannot offer future help and support), dependent–nondependent waiting-time differences disappear (Bornstein, 2006b, Experiment 2).

Other examples of goal-driven “active dependency” emerge in the medical and academic arenas. For example, studies indicate that dependent women show shorter latencies than nondependent women in seeking medical help following detection of a serious medical symptom (e.g., a possible lump in the breast), in part because the dependent women

are more comfortable seeking help from potential caregivers (Greenberg & Fisher, 1977). Dependent patients also adhere more conscientiously than nondependent patients to medical and psychotherapeutic treatment regimens (Fisher, Winne, & Ley, 1993; Pol-drugo & Forti, 1988). Other investigations indicate that dependent college students are more willing than nondependent students to seek advice from professors and advisors when they are having difficulty with class material. As a result, dependent college students have significantly higher grade point averages than nondependent college students with similar demographic backgrounds and comparable Scholastic Aptitude Test (SAT) scores (Bornstein & Kennedy, 1994).

These findings should not be taken to suggest that all active manifestations of dependency lead to positive outcomes. On the contrary, dependent elementary school students who make frequent contact with the teacher are perceived by classmates as being clingy and demanding, and these students tend to score low on peer ratings of sociometric status and high on self-report measures of loneliness (Mahon, 1982; Overholser, 1992; Wiggins & Winder, 1961). Other studies suggest that dependency-related insecurity can lead to difficulties in friendships and romantic relationships and increased conflict with college roommates (Mongrain, Lubbers, & Struthers, 2004; Mongrain, Vettese, Shuster, & Kendal, 1998). Dependent psychiatric patients tend to have a higher number of "pseudo-emergencies" than nondependent patients (Emery & Leshner, 1982) and to overuse medical and consultative services when hospitalized (O'Neill & Bornstein, 2001), a pattern also displayed by dependent nursing home residents (Baltes, 1996).

In addition, studies consistently show that highly dependent men are at significantly increased risk for perpetrating partner abuse, in part because these men are fearful of being abandoned by their partner (Bornstein, 2006a; Holtzworth-Monroe, Stuart, & Hutchinson, 1997; Kane, Staiger, & Ricciardelli, 2000). As a result they tend to overperceive abandonment risk, becoming jealous of even casual contacts between their partner and other men (Babcock, Costa, Green, & Eckhardt, 2004). Murphy, Meyer, and O'Leary (1994, p. 734) described this dependency-abuse dynamic well when they

noted that high levels of interpersonal dependency "contribute to an escalating cycle of coercive control regulated by changes in emotional distance. Although coercive tactics may engender short-term behavioral compliance or intense emotional reunion, a frequently coerced partner is likely to withdraw emotionally ... in the long run. As the batterer's emotional vulnerabilities are further activated, he may engage in more intense, frequent, and diverse coercive behavior."

## Conclusion

In some ways the evolution of research on interpersonal dependency has paralleled the broader changes taking place in social psychology during the past 50 years. What was once conceptualized as a personality pattern that manifested itself consistently across different contexts and settings has come to be seen in a more nuanced way, as a set of traits that may be expressed very differently depending on the opportunities and constraints characterizing different situations. What was once conceptualized primarily in terms of expressed behavior has come to be understood in terms of the synergistic interplay of underlying cognitive, motivational, and affective processes. And like many variables in social psychology that were initially conceptualized as reflecting flaws or deficits in functioning (e.g., high self-monitoring, external locus of control), interpersonal dependency has come to be seen as a personality style that can impair adjustment in certain ways but enhance it in others.

Two trends characterize research on interpersonal dependency today. First, researchers have begun to explore the possibility that there are trait-like individual differences in the degree to which people express underlying dependency needs in adaptive (versus maladaptive) ways. The concept of *healthy dependency* overlaps with several other constructs in psychology, sociology, and medicine, including compensatory dependency (Baltes, 1996), connectedness (Clark & Ladd, 2000), and mature dependency (Baumeister & Leary, 1995). Research on healthy dependency is still in its infancy, but studies suggest that in contrast to unhealthy dependency (which is characterized by in-



tense, unmodulated dependency strivings exhibited indiscriminately across a broad range of situations), healthy dependency is characterized by dependency strivings that—even when strong—are exhibited selectively (i.e., in some contexts but not others) and flexibly (i.e., in situation-appropriate ways). In general, people with a healthy dependent personality orientation show greater insight into their dependency needs than do unhealthy dependent persons, better social skills, more effective impulse control, greater cognitive complexity, and a more mature defense and coping style (see Bornstein, 2005, and Pincus & Wilson, 2001, for reviews of research in this area).

Second, researchers have devoted increasing attention to exploring the mental representations and information processing dynamics associated with a dependent personality orientation. In the former realm, researchers have documented features of the dependent person's self-concept (Mongrain, 1998), representations of significant others (Pincus & Wilson, 2001), and internal working models of self–other interactions (Meyer & Pilkonis, 2005). In the latter realm, researchers have assessed the impact of subliminal lexical priming on dependency-related interpersonal Stroop latencies (Bornstein et al., 2005), the impact of self-relevant personality trait feedback (both accurate and false) on perceptions of dependency-related Rorschach imagery (Bornstein, 2007), and cognitive distortions associated with positively and negatively toned experiences in close relationships (Mongrain et al., 1998). Given the impact of dependency-related cognitions on the motivational, affective, and behavioral sequelae of interpersonal dependency, continued exploration of these cognitive features is needed.

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