

**Examining the interplay of rejection sensitivity, self-compassion,
and communication in romantic relationships**

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Jennifer Anne Christman
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Abstract

This cross-sectional study examined the potential associations between rejection sensitivity, self-compassion, self-silencing, and couple communication patterns in a college undergraduate population. Participants (n=205) attended group data collection sessions in campus computer labs where they completed an online survey. Multivariate path analyses did not support the hypothesis that self-silencing mediates the relationship between rejection sensitivity and couple communication patterns. Self-compassion also did not moderate the relationship between rejection sensitivity and self-silencing. However, post-hoc analyses revealed that self-compassion moderated the previously established relationships between rejection sensitivity and depression, and rejection sensitivity and relationship satisfaction. These findings indicate that self-compassion may serve as a buffer between rejection sensitivity and specific intrapersonal and interpersonal outcomes. Implications and future directions are discussed.

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Chapter 1

Introduction and General Information

Rejection sensitivity (RS) is a construct developed from attachment and social-cognitive perspectives that is conceptualized as a disposition to anxiously expect, readily perceive, and overreact to rejection (Downey & Feldman, 1996; Feldman & Downey, 1994). RS has particularly negative implications for interpersonal relationships, in that it is associated with relationship dissatisfaction, depressive symptomatology, hostility, aggression, jealousy, and violence (e.g., Downey & Feldman, 1996; Feldman & Downey, 1994; Purdie & Downey, 2000; Ayduk, Downey, & Kim, 2001; Downey, Freitas, Michaelis, & Khouri, 1998). Furthermore, RS has been strongly associated with poor communication behaviors in relationships (i.e., self-silencing, overt hostility, and hostile withdrawal, e.g., Harper, Dickson, & Welsh, 2006; Downey & Feldman, 1996; Purdie & Downey, 2000; Downey et al., 1998). However, there is evidence of possible buffers of the negative consequences of rejection sensitivity. More specifically, research has found that people high in both rejection sensitivity and executive control were less likely to engage in negative behaviors (e.g., hostility) than people high in rejection sensitivity and low in executive control (Ayduk, Vayas, Downey, Cole, Shoda, & Mischel, 2008).

Self-compassion has recently emerged in the literature as an intrapersonal skill that allows for self-kindness, viewing oneself as part of the greater human condition, and being mindful of one's emotions (Neff, 2003a; Neff, 2003b). It is possible that the presence of self-compassion also might moderate the effects of RS on interpersonal

relationships by influencing the rejection sensitive individual's choice of behaviors in relationships. Therefore, this study will explore the effects of self-compassion on rejection sensitivity and relationship functioning.

Overview of Rejection Sensitivity

Highly rejection sensitive people are more likely to perceive rejection in ambiguous situations than low rejection sensitive people (Downey & Feldman, 1996). Adolescent girls who reported greater expectations of rejection, which is a key component of RS, were more likely to endorse that they would “do anything to keep my partner with me, even things I know are wrong” (Purdie & Downey, 2000). Furthermore, girls who anxiously expected and readily perceived rejection often engaged in direct verbal hostility, hostile withdrawal, and indirect hostility (Purdie & Downey, 2000), which could be an effect of having developed poor interpersonal skills from previous relational maltreatment. Following a rejecting situation, the girls, who anxiously expected rejection, readily perceived rejection and reacted with hostility to these perceptions, also reported their partners to be verbally hostile and indirectly hostile (Purdie & Downey, 2000).

It is important to note that not only do high RS people typically lack adaptive interpersonal skills, but they also experience significantly more distress about their relationships than do low RS people. For example, over a six-month period, women who experienced a partner initiated break-up exhibited significantly more depressive symptoms if they were highly rejection sensitive (Ayduk, Downey, & Kim, 2001). Comparatively, low RS women did not exhibit a significant change in depressive

symptoms from pre to post break-up. It is possible that high RS people are less able to soothe themselves after a rejection than low RS people.

Furthermore, to prevent the great distress they experience in relationships many people who are high in RS engage in behaviors they believe will prevent rejection, but in fact facilitate rejection; consequently, RS has been shown to be a self-fulfilling prophecy in romantic relationships. High RS people were significantly more likely than low RS people to experience a relationship break-up over a one year period, even when controlling for partner's RS, commitment, and relationship satisfaction at the initial data collection (Downey, Freitas, Michaelis, & Khouri, 1998). In an interaction in which conflict was induced, partners of high RS women were more angry post-conflict than partners of low RS women, which was most likely due to high RS women engaging in more negative behaviors (e.g., hostile or negative voice tone, deny responsibility, put-downs, poor non-verbal gestures, and dysphoric affect) during the conflict than low RS women (Downey et al., 1998). Additionally, high RS women perceived their partners to be less accepting and more withdrawn on days preceded by a conflict. These perceptions might be partially accurate, as well. Partners of high RS people are overall more dissatisfied within the relationship (Downey & Feldman, 1996) and experience more frequent thoughts of ending the relationship than partners of low RS people (Downey et al., 1998). At the same time, even though partners of high RS people report lower levels of relationship satisfaction, high RS people appear to exaggerate their partners' dissatisfaction with the relationship (Downey & Feldman, 1996). This exaggeration could be a result of misinterpreting a partner's cues as rejection.

In order to manage their expectations of rejection, highly rejection sensitive people are more likely to engage in two possible relational strategies, avoidance and overinvestment. Single people are more likely to use the avoidance strategy, which involves avoiding romantic relationships, delaying the transition into romantic relationships (i.e., during adolescence), and avoiding investing in romantic relationships (Downey, Bonica, & Rincon, 1999). The overinvestment strategy of RS states that a high RS person can be very compliant and tolerate emotional, physical, or sexual abuse in order to maintain a relationship (Downey et al., 1999). High RS people believe that changing themselves to comply with their partners' expressed or imagined wish will prevent rejection that they so fear (Downey et al., 1999). Even though the use of compliance can prolong a relationship, it has potentially serious and long-term effects on a person. For example, rejection sensitivity has been shown to have a positive relationship with depressive symptoms, and this relationship was partially mediated by self-silencing behaviors (Harper et al., 2006). Self-silencing may serve as a way to avoid investment and intimacy in the relationship, or may serve as a way to be compliant to maintain the relationship, and both methods have been described as a control strategy to avoid the painful effects of rejection. Thus, self-silencing can be used as a strategy to protect against rejection, and may result in the loss of personal individuality and/or identity within a relationship.

Despite these documented relationship problems, and whereas previous RS research has shown that high RS is predictive of relationship termination (Downey et al., 1998), other studies have not reported an effect of RS on length of relationship (e.g.,

Downey & Feldman, 1996), which may indicate that some people high in RS are able to maintain long relationships. Therefore, some people high in rejection sensitivity might have some characteristics or skills that buffer them from some of the consequences of rejection sensitivity. These skills also might enable them to engage in healthy interpersonal processes, such as positive communication patterns that would allow them to remain in relationships and potentially successfully navigate difficult interactions, which could be perceived as rejection. For example, a previous study found that individuals high in RS and executive control (e.g., impulse control, emotion regulation skills, etc.) were less likely to engage in negative behaviors (e.g., hostility, withdrawal, self-harm, etc.) than individuals high in RS and low in executive control. Until recently there has been very little research that explores possible treatments or buffers against the negative effects of rejection sensitivity. Understanding how rejection sensitivity can lead to problematic relational behaviors and prevent healthy processes such as positive communication patterns in their relationships, as well as examining potential moderators of these relationships might help lead to more effective treatments for people with this characteristic.

Communication, Self-Silencing, and Rejection Sensitivity

As described earlier, people high in rejection sensitivity most likely do not engage in constructive communication, as high RS people have been found to engage in verbal hostility and self-silencing (e.g., Harper et al., 2006; Downey et al., 1998; Purdie & Downey, 2000). Self-silencing might serve as a strategy to withdraw from potential conflict, and the verbal hostility might serve as a strategy to further engage a withdrawn

partner in conflict. These behaviors might thus feed into common couple communication patterns, such as the demand-withdraw interaction and mutual avoidance (Christensen & Heavey, 1990; Christensen & Shenk, 1991).

The demand-withdraw pattern is particularly destructive for couples and typically, women are in the demand role and men in the withdraw role (Christensen & Heavey, 1990). The demand-withdraw communication pattern accounts for unique variability in relationship distress (Caughlin & Huston, 2002). However, research suggests that above the typical demand-withdraw pattern, the mutual avoidance pattern with women's withholding and avoidance has stronger negative effects on relationship satisfaction (Smith, Ciarrochi, & Heaven, 2008). It was speculated that because women have been shown to initiate more problem solving discussions (Ball, Cowan, & Cowan, 1995) and men, more often than women, engage in the withdrawing role (Christensen & Heavey, 1990), if women also become avoidant, relationship problems are unlikely to be discussed and resolved (Smith, Ciarrochi, & Heaven, 2008).

These findings on communication have several implications for rejection sensitive individuals. Even though the communication patterns and RS literatures have not been directly combined and explored, high RS people have been found to engage in self-silencing behaviors, which may be similar to the withdraw role, and the verbal hostility that is also associated with high RS may be similar to the demand role in the demand-withdraw communication pattern. Thus people with high RS might be highly likely to engage in both demand-withdraw patterns and mutual avoidance. Consequently, a focus of this study is to examine the potential relationships among rejection sensitivity, self-

silencing, and couple communication patterns. It is hypothesized that high RS people will be more likely than low RS people to engage in increased self-silencing behaviors, which in turn will lead to poorer dyadic communication patterns.

Self-Compassion as a Potential Moderator of the RS and Self-Silencing Link

Self-compassion is a new construct to the psychological literature and was described as having three main components, including: (1) self-kindness; (2) common humanity; and (3) mindfulness (Neff, 2003a). Neff (2003a) theorized that self-compassionate individuals are able to be kind to themselves particularly in instances of pain or failure, instead of engaging in harsh self-criticism. Interestingly, it is likely that high RS people's rejection sensitivity is rooted in feelings of low self-worth and is further exacerbated by self-critical thoughts and beliefs. However, if these individuals are able to gain some self-compassion, that process might temper the self-criticism and reduce the negative consequences of rejection sensitivity.

Neff (2003a) defines common humanity as viewing one's experiences as part of the larger human experience, instead of seeing oneself as isolated and separate. Thus, those individuals who have compassion for themselves are able to recognize that even though their experience may be painful or embarrassing, it is something that happens to others, which can allow for self-forgiveness, if necessary. Even though it has not been tested, it is most likely that those high in rejection sensitivity are not able to see their experiences in the larger human experience, but instead allow their experiences of rejection to further separate and isolate themselves from others. However, if those with high rejection sensitivity are able to master the skills of self-compassion, they may be

less likely to experience the multitude of negative interpersonal consequences that are associated with rejection sensitivity.

The final component of self-compassion, mindfulness, was defined as having a balanced awareness of painful thoughts and feelings instead of over-identifying with them (Neff, 2003a). Notably, an inability to hold a balanced awareness of painful thoughts and feelings and a tendency to over-identify with these painful thoughts and feelings are features of borderline personality disorder and research has found a positive association between features of borderline personality disorder and rejection sensitivity (Ayduk, Zayas, Downey, Cole, Shoda, & Mischel, 2008). Furthermore, being skilled in executive control (e.g., ability to override impulsive and automatic reactions, in favor of more appropriate reactions), a skill that is similar to mindfulness, moderated the relationship between RS and BPD features. In other words, executive control mitigated the likelihood that a high RS person would exhibit BPD features (Ayduk et al., 2008). Gilbert (2005) suggests that benefits of experiencing increased levels of self-compassion are that one is able to feel cared for, connected, and is emotionally calm, by activating a self-soothing system. Again, these aspects of self-compassion are likely to reduce negative consequences of being highly rejection sensitive.

It has been suggested that the construct of self-compassion should be viewed as a skill that can be developed, instead of as a stable personality trait (Neff, Rude, & Kirkpatrick, 2007). This formulation is important because it implies that self-compassion is something that can be taught and utilized by anyone to help increase psychological well-being. In fact, Leary and colleagues (2007) found that increases in self-compassion

buffered those with low levels of self-esteem from experiencing increased levels of negative affect after receiving ambiguous feedback. Thus, self-compassion may be beneficial in dealing with difficult interpersonal events, especially with individuals who are sensitive to rejection. Those who experienced increases in their self-compassion scores, over a one month interval, experienced decreases in self-criticism, depression, rumination, thought suppression, and anxiety, even when controlling for changes in anxiety symptoms (Neff et al., 2007).

Self-compassionate people seem to be highly intrapersonally skilled; however, whether these intrapersonal skills positively influence interpersonal skills has had very limited examination. Even though research in this area is limited, there is support that self-compassionate people function better in relationships than those low in self-compassion. For instance, Baker and McNulty (2011) found that men high in self-compassion were more motivated to fix interpersonal mistakes, demonstrated increased problem solving behaviors, demonstrated accommodation, and reported fewer declines in relationship satisfaction over time, than men low in self-compassion. However, it should be noted that these findings were moderated by their reported level of conscientiousness. Thus, men high in self-compassion, but low in conscientiousness were found to have the inverse effects as those described above (Baker & McNulty, 2011). Interestingly, in females, regardless of conscientiousness, self-compassion was related to motivation to fix interpersonal mistakes and changes in relationship satisfaction (Baker & McNulty, 2011), indicating that the effects self-compassion has on interpersonal skills is multifaceted and complex. It might be that people who are self-compassionate are able to use their healthy

self-views to have a more compassionate perspective regarding others. However, this does not mean that a self-compassionate person will be passive, but that a self-compassionate person might be kind to others, view others' flaws in the greater human experience, and have an awareness of one's feelings toward another. Consequently, it is hypothesized that self-compassion will moderate the relationship between rejection sensitivity and self-silencing, creating more positive couple communication patterns. More specifically, high rejection sensitive people with high self-compassion will be less likely to engage in self-silencing behaviors, and consequently demonstrate healthier couple communication patterns than high rejection sensitive people with low self-compassion (See Figure 1). Additionally, given that rejection sensitivity has primarily been studied in females, this study will explore whether gender moderates the effects of rejection sensitivity and thus examine whether these relationships change as a function of gender.

Summary of Study Aims

Rejection sensitivity has been defined as a disposition to anxiously expect, readily perceive, and overreact to rejection, even in ambiguous situations (Downey & Feldman, 1996; Feldman & Downey, 1994). The established relationship between RS and negative outcomes (e.g., depressive symptoms, relationship dissatisfaction, etc.), in some cases, has been found to be mediated by negative behaviors (e.g., self-silencing, etc.). It seems reasonable, given the tendencies of a person high in RS to overreact to rejection (Downey & Feldman, 1996), to become hostile and/or aggressive during conflict (Purdie & Downey, 2000), and to engage in avoidance strategies and increased self-silencing

behaviors (Downey, Bonica, & Rincon, 1999; Harper, Dickson, & Welch, 2006), to expect that high RS will be positively predictive of negative communication patterns, and that this hypothesized association will be mediated by self-silencing behaviors.

Furthermore, RS seems to be buffered by increased impulse control and could be buffered or moderated by other characteristics and/or skills. Emerging research on self-compassion, which is the ability to be kind to oneself, perceiving one's experiences as part of the greater human experience, and holding painful thoughts and emotions in mindful awareness, indicates that people high in self-compassion are better able to react to and handle negative or traumatic events. Little research to date has examined the effects of self-compassion in the context of interpersonal relationships. It is a goal of the present study to examine the interplay of rejection sensitivity and self-compassion in the context of interpersonal relationships. More specifically, it is hypothesized that self-compassion will moderate the association between high rejection sensitivity and self-silencing behaviors, such that higher levels of self-compassion will decrease the likelihood of self-silencing behaviors among highly rejection sensitive people, which, in turn, will be related to healthier communication patterns within the relationship (See Figure 1). Additionally, rejection sensitivity and communication patterns have been found to have strong associations with reported levels of depression and relationship satisfaction, thus, the above hypothesized model will control for the effects of depression and relationship satisfaction. By controlling for the effects of depression and relationship satisfaction, it increases the likelihood that the potential association among the study variables is unique and not due to potential shared variance with depression and

relationship satisfaction. Finally, exploratory analyses will also be included to examine the potential effect of gender as a moderator of the effects of rejection sensitivity on the hypothesized model.

Chapter 2

Materials and Methods

Participants

Data collection included 205 participants, who were enrolled in the introductory psychology class at the University of Tennessee, Knoxville.

To participate in the study, individuals must have been in a heterosexual dating relationship for at least one month (reported mean length of relationship was 15.19 months; $SD=13.71$). Participants in this study ranged from 18 years old to 42 years old ($M=19.1$ years; $SD=2.46$) and had completed a mean of 13.62 years ($SD=2.00$) of education. Within the current sample, 71.8% were females. The ethnicity of this sample was somewhat diverse and representative of the university population (Caucasian 76.6%; African American 13.9%; Asian 2.9%, Hispanic 1.4%; Other 3.9%). Participants were recruited through the University of Tennessee Human Participation in Research (HPR) website. HPR was an online system that allowed students to search for ongoing research projects to participate in that fulfilled their research participation class requirement.

Measures

Brief Demographic Data Form. This form obtained the basic demographic information necessary to provide a description of the study's sample (e.g., age, ethnicity, length of relationship, etc).

Rejection Sensitivity Questionnaire (RSQ; Downey & Feldman, 1996). The RSQ is an 18 item measure consisting of hypothetical situations with peers, family, and romantic partner. (e.g., “You ask someone in class if you can borrow his/her notes”, “You ask your parents for extra spending money”, and “You approach a close friend to talk after doing or saying something that seriously upset him/her.”) For each hypothetical situation the participants are asked to rate their level of anxiety about the outcome and to what extent they expect to be accepted or rejected. Each dimension, level of anxiety and expected acceptance or rejection, is rated on a six point Likert scale with one represented the lowest level of anxiety or highest expectation of acceptance, respectively. In the current sample the mean score on the RSQ was 8.42 (SD = 3.05) and showed high internal reliability with a Cronbach’s Alpha of .88. Additionally this measure has shown high test-retest reliability with .83 ($p < .001$) at three weeks and .78($p < .001$) at four months. Previous research has shown the RSQ to significantly predict participants’ reactions to experimental manipulations of ambiguous feedback, such that those high in RS felt rejected and attributed hurtful intent to the ambiguous feedback and those low in RS did not report feeling rejected (Downey and Feldman, 1996). Additionally, people high in RS readily perceived rejection and hurtful intent in their romantic partners’ behaviors and this relationship remained significant even when controlling for theoretically similar constructs, such as romantic attachment, neuroticism, and social anxiety (Downey and Feldman, 1996; Brookings, Zembar, & Hochstetler, 2003), while also being significantly correlated with these constructs. This indicates that the RSQ demonstrates both concurrent and discriminant validity. The RSQ continues to correlate

significantly with commonly used measures of personality, indicating that even with new developments in this area, the RSQ remains consistent and valid in measuring one's propensity to anxiously expect and overreact to perceived rejection (Brookings, Zembar, & Hochstetler, 2003).

Self-Compassion Scale (SCS; Neff, 2003b). The SCS is a 26 item measure consisting of six subscales: self-kindness (e.g., "I try to be loving towards myself when I'm feeling emotional pain."), self-judgment (e.g., "I'm disapproving and judgmental about my own flaws and inadequacies."), common humanity (e.g., "When things are going badly for me, I see the difficulties as part of life that everyone goes through."), isolation (e.g., "When I think about my inadequacies, it tends to make me feel more separate and cut off from the rest of the world."), mindfulness (e.g., "When something upsets me I try to keep my emotions in balance."), and over-identification (e.g., "When I fail at something important to me I become consumed by feelings of inadequacy."). Responses are given in a five point Likert type scale from "almost never" to "almost always". The SCS has been shown to have good convergent validity, significantly correlating with autonomy ($r=.42, p<.01$) and social relatedness ($r=.25, p<.01$), and good discriminant validity, not correlating with narcissism ($r=.11, p>.05$) and only moderately correlating with self-esteem at ($r=.59, p<.01$) (Neff, 2003b). The SCS also demonstrated good reliability ($\alpha=.92$) and was normally distributed ($M=18.01$; $SD=3.95$).

Silencing the Self Subscale (STSS; Jack & Dill, 1992). The STSS is a 9-item scale assessing the extent to which participants inhibit self-expression in order to avoid conflict or possible dissolution of an intimate relationship (e.g., "Instead of risking

confrontations in close relationships, I would rather not rock the boat” and “I rarely express my anger to those close to me”). Participants rate how strongly they agree with each item on a five point scale from “strongly disagree” to “strongly agree” regarding their current romantic relationship. This subscale demonstrated good internal reliability ($\alpha=.81$). The mean score on the STSS in the current sample was 22.30 (SD = 6.69). Research has also demonstrated that the STSS has good construct validity, such that it significantly correlated with depression scores in several different populations and mean scores of the STSS varied in expected directions across various social contexts (e.g., Jack & Dill, 1992; Stevens & Galvin, 1995; Remen, Chambless, & Rodebaugh, 2002).

Communication Patterns Questionnaire (CPQ; Christensen & Sullaway, 1984).

The CPQ is a 35 item self-report measure assessing couple’s communication patterns during conflict. Participants are asked to rate each item on a one to nine Likert type scale. The measure consists of three subscales: Demand-Withdraw Communication (e.g., “Man nags and demands while woman withdraws, becomes silent, or refuses to discuss the matter further” or “Woman nags and demands while man withdraws, becomes silent, or refuses to discuss the matter further.”) (M = 22.51, SD = 8.94), Mutual avoidance (e.g., “Both members avoid discussing the problem.”) (M = 7.70, SD = 7.70), and Mutual Constructive Communication (e.g., “Both feel each other has understood his/her position.”) (M = 11.08, SD = 9.85). The reliability for each subscale was .64, .56, and .79 respectively, which is similar to other studies using the CPQ (Heavey, Laynen, & Christensen, 1993; Heavey, Larson, Zumtobel, & Christensen, 1996; Hahlweg, Kaiser, Christensen, Fehm-Wolfsdorf, & Groth, 2000). Previous research has found that

clinically distressed and/or divorcing couples are more likely to engage in demand-withdraw communication and mutual avoidance communication than non-distressed couples, and that non-distressed couples were more likely to engage in mutual constructive communication than distressed and/or divorcing couples (Christensen & Shenk, 1991). Indeed, using the CPQ, researchers were able to discriminate couples in happy marriages versus unhappy marriages (Noller & White, 1990). Additionally, when examining the demand-withdraw communication pattern, researchers found participant ratings of communication patterns to be significantly correlated with trained observers' ratings of communication patterns (Christensen & Heavey, 1990).

Couple Satisfaction Index (CSI-16; Funk & Rogge, 2007). The CSI-16, a shorter version of the CSI-32, is a 16 item measure of relationship satisfaction. This measure demonstrated excellent internal consistency ($\alpha=.96$), and has been found to be highly correlated with other commonly used measures of relationship satisfaction, such as the Dyadic Adjustment Scale ($r=.89$, $p>.001$), Quality of Marriage Index ($r=.96$, $p<.001$), and the Marital Adjustment Test ($r=.90$, $p<.001$) (Funk & Rogge, 2007). Additionally, this scale's items have been shown to have increased precision and power over the above mentioned relationship satisfaction measures by using Item Response Theory (Funk & Rogge, 2007; Rogge, Funk, Lee, & Saavedra, 2009). It includes items such as, "Please indicate the degree of happiness, all things considered, of your relationship" using a 6-point Likert scale ranging from "extremely unhappy" to "perfect", "I have a warm and comfortable relationship with my partner" using a 5-point Likert scale ranging from "not at all true" to "completely true", and "How rewarding is your relationship with your

partner?” using a 5-point Likert scale ranging from “not at all” to “completely”. This scale also asks participants to rate their feelings on their relationship using a 5-point Likert scale between descriptions such as “interesting” or “boring”, “good” or “bad”, “full” or “empty”, and “sturdy” or “fragile”. In the current sample, the mean score of the CSI-16 was 65.06 (SD = 13.80).

Center of Epidemiological Studies Depression Scale (CES-D; Radloff, 1977). This 20 item measure is widely used in psychological research for the detection of depression in the general population. The items are descriptions of how the participants may have possibly felt over the past week, for example, “I thought my life had been a failure”, “My sleep was restless”, and “I felt everything I did was an effort.” The participants used a 4-point Likert scale ranging from 0 (Rarely or none of the time/less than 1 day) to 3 (Most or all of the time/5-7 days) to respond to each item (M = 13.74, SD = 10.25). This measure demonstrated an excellent reliability coefficient of .92. Previous research has also demonstrated significant concordance with other self-report measures of depression and affective functioning, and ratings of clinical professionals (Radloff, 1977; Shafer, 2006). A recent meta analysis of several common depression measurements found the CES-D to be consistent with its initial four factors, Positive Affect, Negative Affect, Somatic Symptoms, and Interpersonal Problems (Shafer, 2006). This study also described the CES-D to be balanced and representative, potentially due to the four factor model, versus the three factor model found in other common depression measures, such as the Beck Depression Inventory and the Zung Self-Rating Depression Scale.

Additionally, confirmatory factor analysis suggests that the CES-D four factor model is sensitive to most racial/ethnic groups (Kim, DeCoster, Huang, & Chiriboga, 2011).

Procedure

Participants were recruited through the HPR system. The study was advertised as research to better understand how individual characteristics influence romantic relationships. Before signing up for this study, the undergraduate students were informed that to be eligible for the study they must be at least 18 years of age, and in a current heterosexual relationship lasting at least one month. Upon selecting the present study on HPR, students selected an available time and location for data collection. Participants attended one data collection in an assigned room on campus. The data collections took place in campus computer labs, as the data was collected through an online survey. In the data collections, participants were told to sit where they were comfortable. They were then given log on information for the survey and provided with a brief description of the study and an Informed Consent to sign before completing the above described measures. After completing the measures packet the students were allotted the appropriate research credit through the HPR system.

Data Analyses

The hypothesized model shown below was tested using path analyses. This approach to analyzing the data tested each variable's unique contribution and the predictive utility of the model as a whole.

Prior to analyses, issues related to path analysis were examined, such as the recommendation that there be at least ten cases per parameter in a path model for

adequate power (e.g., Kline, 2005). The models assessed in this study exceeded this minimum; there are nine parameters and 205 cases. Additionally, with regard to normality, it is recommended that indices of skew and kurtosis not exceed three and ten, respectively, which was met by all variables (no variables had values exceeding 1.49 and 2.57 for skew and kurtosis, respectively e.g., Kline, 2005).

For all analyses, raw data were submitted to the Mplus program, version 5.1 (Muthen & Muthen, 2008). Prior to computing the multivariate models, we calculated and interpreted the bivariate correlation matrix of all of the observed study variables (See Table 1). Multivariate path models were used to test the hypothesized model. A bootstrapping technique was used as it has been shown to be more accurate in assessing mediation, particularly in smaller samples, than methods that assume that the sampling distributions of the multivariate effects of both the total and indirect effects are normal (Shrout & Bulger, 2002), such as Sobel's (1986) method. Missing data was assessed using the full information maximum likelihood method. However, it should be noted that less than 5% of data was missing for each scale, which is considered acceptable (e.g., Kline, 2011).

Chapter 3

Results

Bivariate Correlations Among Study Variables

Table 1 (all tables and figures are provided in the Appendix) provides the bivariate correlation analyses, which revealed significant associations in the expected directions for most of the models' variables. The strongest correlations, which would be considered large by Cohen's (1988) guidelines, were found to be between self-compassion and rejection sensitivity, and self-silencing, as well as rejection sensitivity and self-silencing, constructive communication, and mutual avoidance. More specifically, negative relationships were found between self-compassion and rejection sensitivity and between self-compassion and self-silencing. As expected, there also was a negative association between rejection sensitivity and positive communication styles, and positive relationships were found between rejection sensitivity and negative communication styles. However, no significant correlations were found between self-compassion and communication patterns. These findings indicate that, in general, rejection sensitivity and self-silencing are related to poor interpersonal and intrapersonal functioning, whereas self-compassion was associated with more positive intrapersonal functioning. Additionally, the correlation matrix revealed significant associations between study variables and depression and relationship satisfaction, which were expected based on previous research mentioned above; consequently, these constructs were controlled in the final analyses.

Path Analyses

The path model was assessed to test the hypothesized relationships among study variables. The hypothesized model of self-silencing mediating the relationship between the interaction of rejection sensitivity and self-compassion and communication patterns was shown to have an acceptable model fit, as indicated by a non-significant chi-square (Figure 2; $\chi^2(9, N = 205) = 11.58, p = 0.24$). Additionally, the comparative fit index (CFI; Bentler, 1990) and root-mean-square error of approximation (RMSEA), which have been found to be more appropriate fit indices by which to judge model fit, indicated acceptable model fit as well. The CFI was .99, exceeding the recommended 0.95, and the RMSEA estimate of 0.03 fell below its suggested maximum value of 0.08 (e.g., Hu & Bentler, 1998). The indirect effect paths of the interaction between self-compassion and rejection sensitivity onto the communication patterns through self-silencing were not significant. In summary, although the hypothesized general model was found to have an acceptable fit, the hypotheses regarding the specific paths were not statistically supported (i.e., the interaction of rejection sensitivity and self-compassion in predicting silencing the self, as well as the indirect effect of said interaction on communication patterns, through silencing the self).

The exploratory analyses examining the effect of gender on the initial model was found to have good model fit with a non-significant chi-square (Figure 3; $\chi^2(12, N = 205) = 10.32, p = 0.59$). The CFI was 1.00 and the RMSEA estimate was less than .001. Similar to the study's initial model, many of the specific paths were not statistically predictive (See Figure 3).

Post-Hoc Analyses

To gain a better understanding of the findings described above, exploratory analyses were performed. Using path analyses with the Mplus program, I explored possible associations among the initial model variables (e.g., self-compassion, rejection sensitivity, self-silencing, communication patterns, depression, and relationship satisfaction) and other variables that were included in the study but were not part of the original hypotheses, which included attachment, shame, and schemas. These additional analyses did not yield significant results, indicating that even though many of these variables are correlated, self-silencing does not mediate a relationship between the interaction term (rejection sensitivity X self-compassion) and other variables included in this dataset. However, additional analyses revealed that self-compassion, rejection sensitivity, and their interaction significantly predicted both depression and relationship satisfaction (See Figure 4) and was shown to have an acceptable model fit, as indicated by the CFI at 1.00, exceeding the recommended 0.95, and the RMSEA estimate of less than 0.001 fell below its suggested maximum value of 0.08 (e.g., Hu & Bentler, 1998). More specifically, depression was simultaneously regressed onto rejection sensitivity, self-compassion, and their interaction. Rejection sensitivity and self-compassion were centered before the forming the product term to reduce collinearity among the main effects and the product term, as well as, to aid in the interpretation of the of the interaction term, (Cohen, Cohen, West, & Aiken, 2003). The rejection sensitivity x self-compassion interaction was significantly predictive of depression ($\beta = -.73$), $p=.04$. The interaction was decomposed by testing the simple slope of RS for high and low self-

compassion (i.e., 1 standard deviation above and below the mean level of identification). Depression and RS were significantly and positively associated for low self-compassion ($B = .86$), $p = .02$, and unrelated for high self-compassion ($B = -.11$), $p = .71$ (See Figure 5). Additionally, the rejection sensitivity $\times$ self-compassion interaction was significantly predictive of relationship satisfaction ($\beta = 1.05$), $p = .04$. The interaction was decomposed by testing the simple slope of RS for high and low self-compassion (i.e., 1 standard deviation above and below the mean level of identification). Relationship Satisfaction and RS were significantly and negatively associated for low self-compassion ($B = -1.80$), $p < .0001$, and unrelated for high self-compassion ($B = -.42$), $p = .36$ (See Figure 6).

Chapter 4

Discussion and Conclusions

Findings

The findings of the hypothesized model indicate that self-compassion does not have an impact on the relationship between rejection sensitivity and self-silencing. Even though the hypothesized model showed acceptable model fit the individual paths were not significantly predictive. This pattern could be due to shared variance among the study and control variables. As noted in Table 1, the main study variables and control variables are moderately correlated with each other, and may share too much variance for individual paths to be uniquely predictive within this model. Interestingly, in the hypothesized model, RS is not significantly predictive of self-silencing, even though this relationship has been found in previous research (e.g., Harper, Dickson, & Welsh, 2006). This lack of correlation was most likely due to the inclusion of depression and relationship satisfaction, which are strong correlates of self-silencing and couple communication patterns. Indeed, in post-hoc analyses in which depression and relationship satisfaction were removed from the model, RS significantly predicted self-silencing. Additionally, when gender was added to the hypothesized model there was a main effect in which RS was significantly predictive of self-silencing, indicating a need for further examination of how gender plays a role among rejection sensitivity and interpersonal functioning. It should be noted that within the hypothesized model, self-silencing was significantly predictive of the mutual avoidance couple communication pattern, over and above all the variables included in the analyses. Also, within the

current sample, there does not appear to be a three-way interaction between self-compassion, rejection sensitivity, and gender when predicting self-silencing. However, there a main effect between rejection sensitivity and self-silencing emerged when controlling for gender and the association between self-silencing and mutual avoidance remained significant. The indirect effect of RS on mutual avoidance was not tested in this model, and thus, even though the direct paths are significantly predictive, it is unclear if a mediation model is present.

Furthermore, post hoc analyses revealed that self-compassion moderated the effects of rejection sensitivity on levels of depression and levels of relationship satisfaction. Previous research has found RS to be significantly and negatively associated with relationship satisfaction (Downey & Feldman, 1996) and positively related with depression (Ayduk, Downey, & Kim, 2001). Interestingly, the current study replicated these findings, but only for those who have low self-compassion. The current results indicate some of the negative consequences of rejection sensitivity, namely poor relationship satisfaction and increased levels of depression may depend on the level of self-compassion, such that with high levels of self-compassion, there were no significant associations between RS and and depression, and RS and relationship satisfaction. Relationship satisfaction and reported levels of depression can be conceptualized as perceptions and/or cognitions related to the self and the relationship, whereas self-silencing and communication patterns are behavioral skill sets. Within the current sample, it seems that self-compassion is impacting some of the cognitive/perceptual consequences of rejection sensitivity (i.e., depression and perceived relationship

satisfaction), but might not reduce potential negative behavioral consequences of rejection sensitivity (i.e., self-silencing and couple communication patterns).

Limitations

Before discussing the implications of this study and future directions in research it is important to note the limitations of this study. First, this sample is comprised of over 70% females even though both male and female students who are at least 18 years of age and in a heterosexual relationship for at least one month were invited to participate in a study investigating individual functioning within a romantic relationship. This imbalance in male and female participants indicates a potential selection bias. It is possible that the brief description of this study as a study investigating individual functioning within a romantic relationship appealed to females more than males. Previous studies investigating the effects of rejection sensitivity on interpersonal functioning, have focused only on females, suggesting a potential gender effect. However, with this sample, there did not appear to be an effect from gender. Further exploration of the potential effects of gender on interpersonal processes as they relate to rejection sensitivity, self-compassion, and communication behaviors is warranted because identifying gender differences within interpersonal processes has important implications on treatment, such as an increased understanding of the potentially different roles that males and females play in their interpersonal relationships. Increased understanding of the potential roles that partners play in their relationships can aid in the identification of the interpersonal vicious cycles that can develop in unhealthy relationships. Additionally, this sample is over 75% Caucasian and had a mean age of 19.1 years, which

is not representative of the general population, but is representative of a large university in the Southeast region of the United States. Thus, it is important to note that the results of this study are not generalizable to the general population, but are applicable to young dating university students in the Southeastern United States.

Another limitation of this study was that all of the data was collected entirely through self-report and from a single source regarding couple functioning. It would have been informative for the partners of the participants to also complete the measures, as well as to have observations of the couple in their communication patterns and conflict styles, which could have provided rich data on how individuals actually interacted with one another.

Finally, this study is cross sectional in nature and cannot truly assess for mediation. The statistics used in the current study provide a good estimate of mediation, but the data used in the current study was collected at one time point and cannot definitively assess for causation among the study variables.

Implications

Even though the hypothesis of this study was not supported, this study has several potential implications. First, self-compassion did not impact the association between rejection sensitivity and a previously identified behavioral consequence of rejection sensitivity (i.e., self-silencing), which may suggest that even though self-compassion is related to psychological well-being (Neff, 2003a), it does not buffer rejection sensitive individuals from dysfunctional relationship behaviors. It is also possible that due to strong correlations among many of the study variables and the issue of shared variance, it

is difficult to truly dissect how these variables are influencing one another.

It is important to note that self-silencing was found to be significantly and uniquely predictive of the mutual avoidance communication pattern above and beyond the other study variables. This suggests that self-silencing might be an important variable for further examination in couple research to increase understanding of why individuals and couples engage in the mutual avoidance communication pattern. Furthermore, assessing for variables such as self-silencing and rejection sensitivity in couples seeking treatment may highlight areas of vulnerability within the individuals and relationships, which may be important in gaining insight into relational difficulties and vicious cycles within the relationship.

Furthermore, post-hoc analyses suggest that self-compassion may buffer rejection sensitive individuals from increased maladaptive perceptions of the self and the relationship. It is possible that self-compassion aids rejection sensitive individuals in tempering their interpretations of relational events and their ability to cope internally, but rejection sensitive individuals may continue to lack behavioral skills to manage negative relational events. These findings may correspond to models of change, in which awareness is needed before changes can be made. Thus, gaining an awareness of one's internal reactions and interpretations is key to potentially being able to learn techniques and skills to change one's reaction to perceived rejection.

However, this study also indicates that awareness is not the sole ingredient necessary for change. Indeed, attachment and social information process theories dictate that individuals perceive and behaviorally respond to relational events based on their

“internal working models” or stable beliefs about the self and other (Bowlby, 1973; Furman & Simon, 1999), but even if one is able to alter how they perceive relational events, he or she may lack the necessary skills to effectively respond to or cope with negative relational events (Gordon & Christman, 2008). In fact, couple therapy has begun to incorporate skills training with insight oriented theories, such as Enhanced Cognitive Behavioral Therapy for Couples (Epstein & Baucom, 2002) and Affective Reconstructive Therapy (Snyder & Mitchell, 2008). Given the advancements in couple therapy to go beyond behavioral skills training to include cognitive and affective components, it will be important to continue exploring how various variables, such as rejection sensitivity, self-compassion, personality traits, and conflict style impact each other so that we can tailor treatments to individual and couple strengths and weaknesses. Furthermore, assessing for these variables at the outset of treatment may provide valuable information regarding individual and couple processes for the treatment provider.

Further, Baker and McNulty (2011) found that increased levels of self-compassion were related to increased problem solving skills and fewer declines in relationship satisfaction in males only when males rated themselves high in conscientiousness. It was suggested that self-compassion may decrease one’s motivation to correct interpersonal mistakes, thus resulting in increased relational difficulties if one is not already a conscientious person (Baker & McNulty, 2011). However, in females, regardless of conscientiousness, self-compassion was associated with increased motivation to address interpersonal mistakes and changes in relationship satisfaction (Baker & McNulty, 2011). Thus, it is possible that even though evidence is emerging

regarding self-compassion's influence on relational functioning, the potential benefits and consequences self-compassion has on relationship functioning appears to be very nuanced and will require additional investigation.

Additionally, it is possible that self-compassion is less likely to impact behavioral consequences of rejection sensitivity, such as poor communication patterns, due to continued lack of interpersonal skill sets, but may impact other negative consequences of rejection sensitivity, such as negative cognitions related to self and/or other. In fact, self-compassion is comprised of self-kindness, common humanity, and mindfulness (Neff, 2003a), which can be conceptualized as techniques in cognitive restructuring with an affective twist. Thus it is possible that self-compassion may not buffer against some behavioral forms of relational dysfunction, but may affect cognitions related to relational dysfunction. Previous literature has highlighted the importance of integrating how one processes relational events with interpersonal skills to maximize potential relationship benefits (Gordon & Christman, 2008).

Future Directions

The concept of self-compassion is still relatively new to the psychological literature and all of the benefits and potential consequences are not fully understood. To date very limited research has been conducted to explore and understand the effects self-compassion has on relationship functioning. Therefore, exploratory work to identify potential associations among self-compassion and relationship functioning is still needed. For example, are the main tenets of self-compassion, kindness towards self, viewing experiences within common humanity, and mindfulness capabilities, related to concepts

similar to having compassion for others, such as forgiveness, which is associated with increased relationship satisfaction (Fincham, 2000; Fincham & Beach, 2001)? It will also be important to further explore the mechanisms through which self-compassion affects psychological well-being and relationship functioning. Given the already identified intrapersonal benefits of being self-compassionate, understanding the mechanisms at play may contribute to clinical interventions. For instance, self-kindness, viewing experiences within common humanity, and mindfulness capabilities may allow for increased perspective taking, which is often a goal of couple therapy, and can create more understanding within a relationship. Furthermore, if self-compassion skills buffer some of the negative cognitive and perceptual consequences of rejection sensitivity, these results suggest that it still might be important to follow through with appropriate skills training, such as social skills and communication skills.

Additionally, research examining potential buffers of rejection sensitivity is limited. Given what is known about the negative individual and interpersonal consequences of rejection sensitivity, it will be important to continue studying various individual variables (e.g., personality traits, psychological well-being, etc.) therapeutic techniques (e.g., behavioral modification, cognitive restructuring, affective regulation, etc.), and contextual variables (e.g., choices in romantic partners, conflict styles, etc.) and how they may or may not affect the various consequences of rejection sensitivity. Furthermore, gaining insight into how rejection sensitive individuals react to and cope with rejection is warranted. For example, future studies should investigate why some rejection sensitive individuals react to rejection with hostility as opposed to avoidance

and/or self-silencing and whether these reactions are based on personality variable, previous experiences, or other contextual issues. Even though this study did not find a three-way interaction between self-compassion, rejection sensitivity, and gender, the presence of gender did slightly change the results of the hypothesized model. Thus, it is important to continue examining potential differences among males and females in relation to rejection sensitivity, self-compassion, and communication patterns due to previous studies indicating gender differences in the above mentioned variables.

Finally, this study was based on data collected from a single report on relational variables. In the future it will be important to explore the associations of these variables for both partners in the relationship. For example, collecting data from both partners in the relationship may yield insightful information about the communication patterns that develop within a relationship when at least one partner is highly rejection sensitive. Additionally, exploring potential trends in the types of partners rejection sensitive individuals seek out may inform individual therapy for people who are highly rejection sensitive, especially if they report a history of interpersonal difficulties, which research indicates is common among this population.

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Appendix

Table 1

Bivariate Correlations between Independent, Dependent, and Control Variables (N=205)

	1.	2.	3.	4.	5.	6.	7.	8.
1. Self-Compassion	1.00							
2. Rejection Sensitivity	-.34**	1.00						
3. Self-Silencing	-.22**	.30**	1.00					
4. Constructive Communication	.14	-.22**	-.18*	1.00				
5. Mutual Avoidance	-.10	.18**	.23**	-.62**	1.00			
6. Demand/Withdraw	-.08	.12	.11	-.65**	.48**	1.00		
7. Depression	-.50**	.29**	.18*	-.29**	.16*	.09	1.00	
8. Relationship Satisfaction	.11	-.30**	-.17*	.57**	-.49**	-.28**	-.41**	1.00

*p<.05, **p<.01

Figure 1
Hypothesized Model

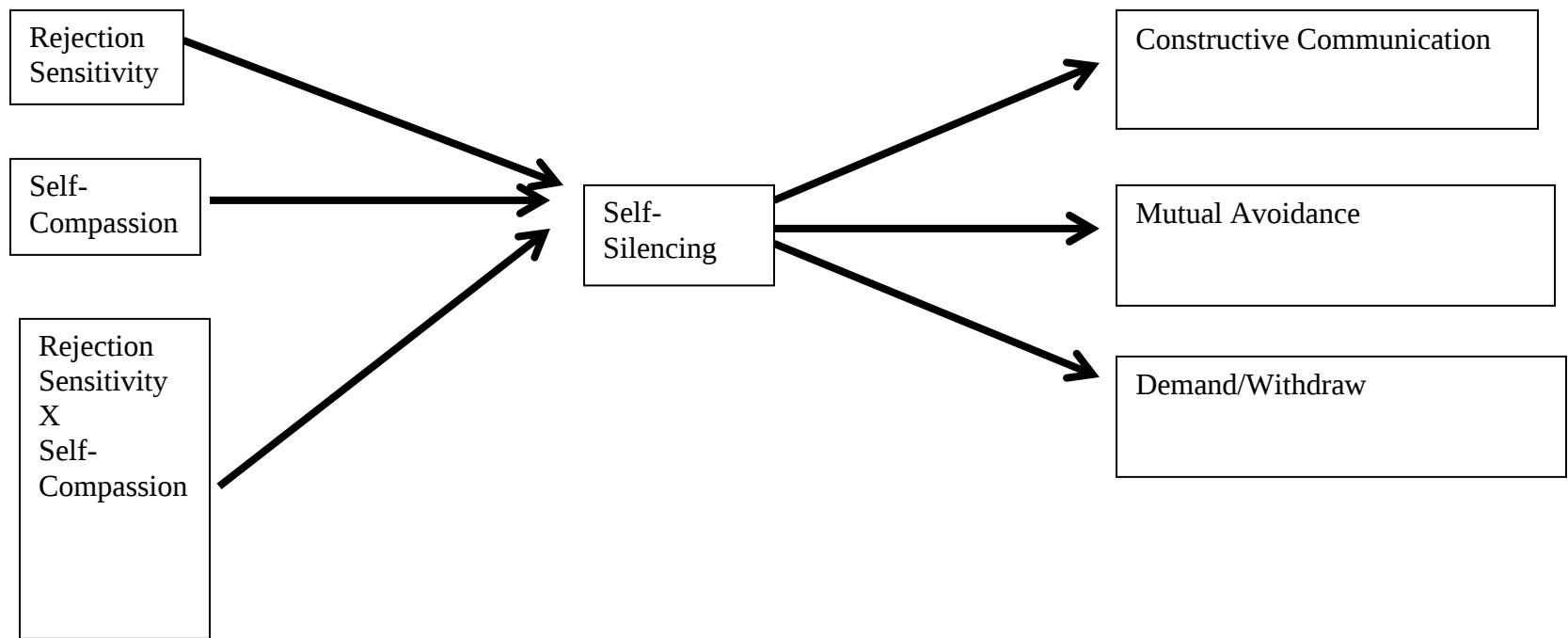
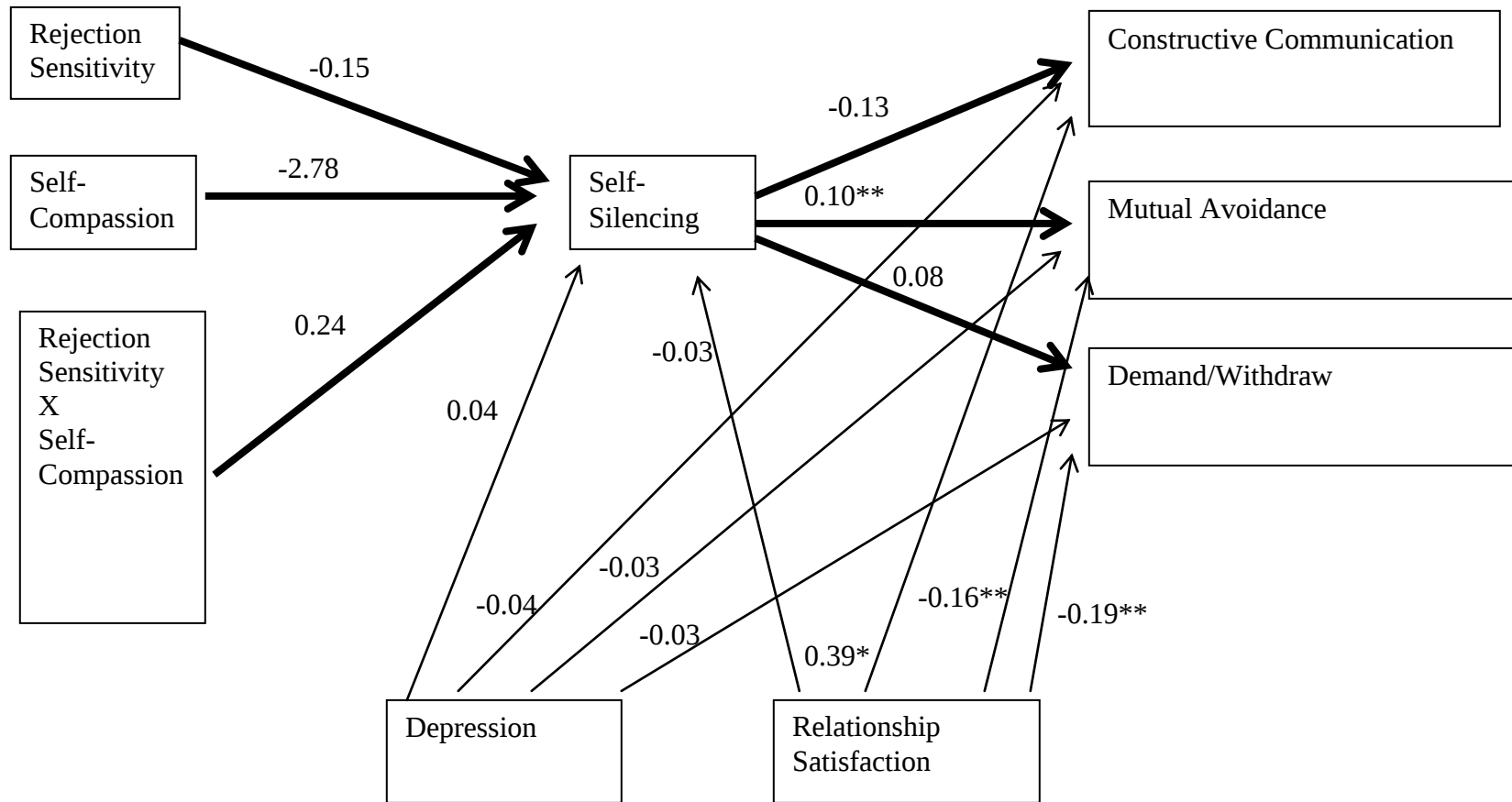


Figure 2

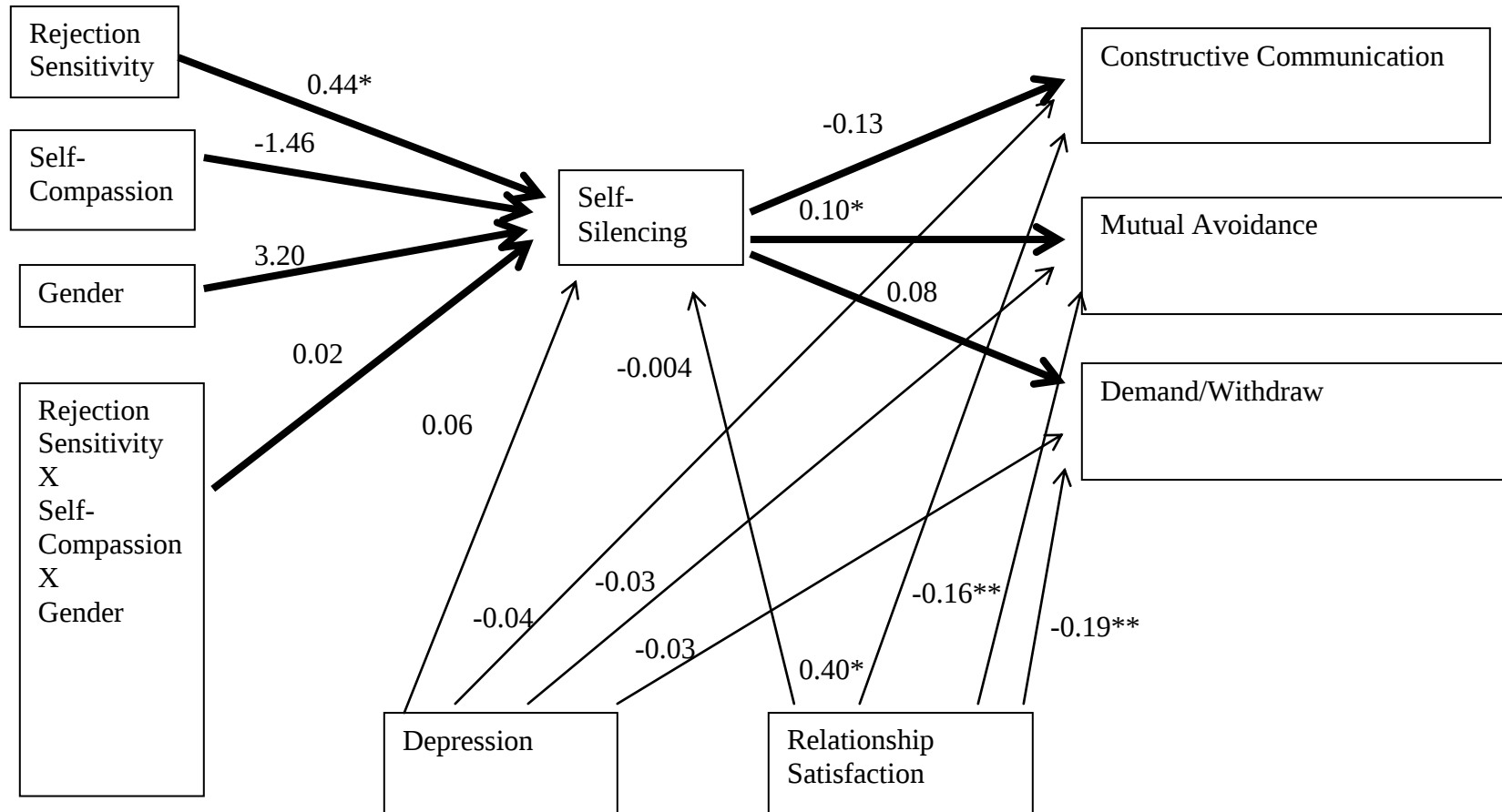
Model including Independent, Dependent, and Control Variables with Direct Paths



Note: All indirect paths were NS; All coefficients reported in this model are unstandardized

* $p < .05$, ** $p < .01$

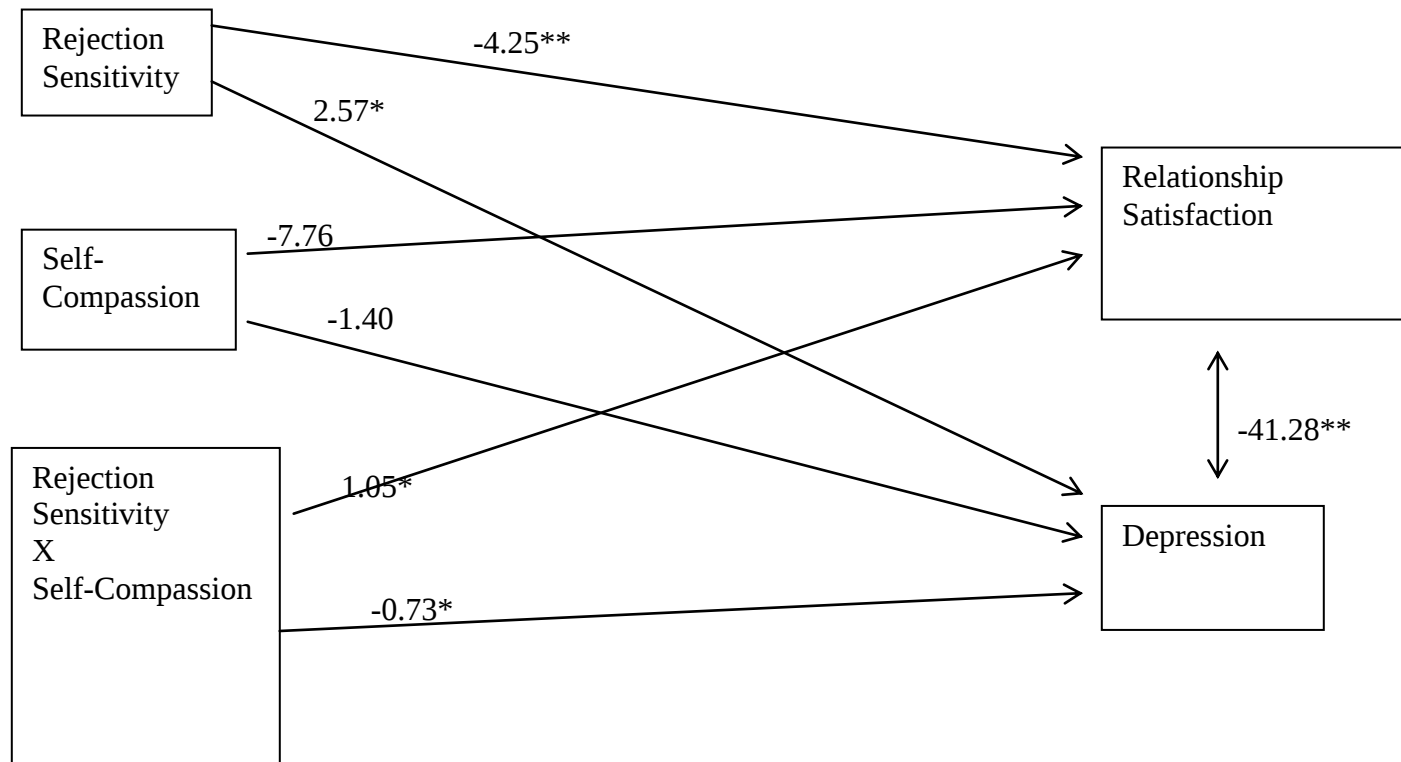
Figure 3

Hypothesized model including gender as a moderator

Note: All indirect paths were NS; All coefficients reported in this model are unstandardized

* $p < .05$, ** $p < .01$

Figure 4

Post-hoc Model

Note: All coefficients reported in this model are unstandardized.

$^*p < .05$; $^{**}p < .01$

Figure 5
Interaction Between Rejection Sensitivity and Self-Compassion Predicting Depression

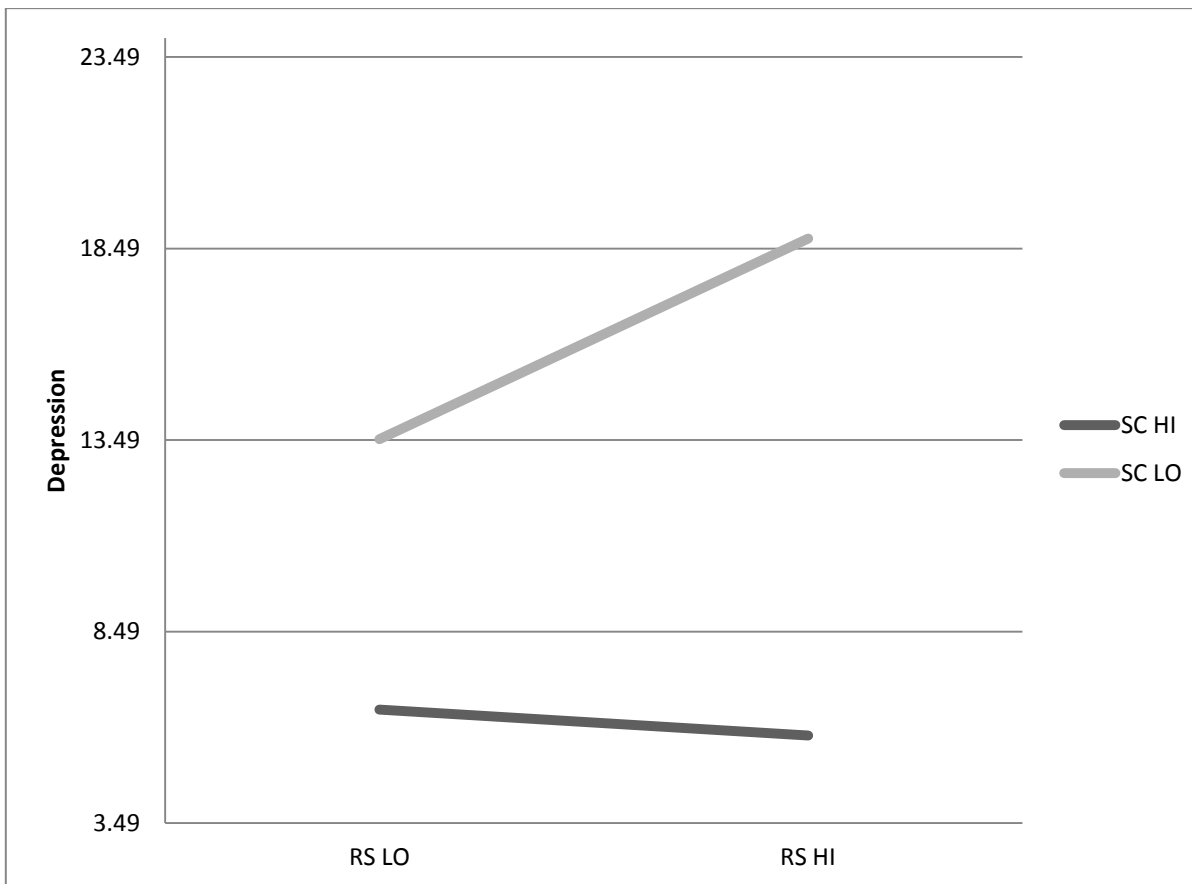
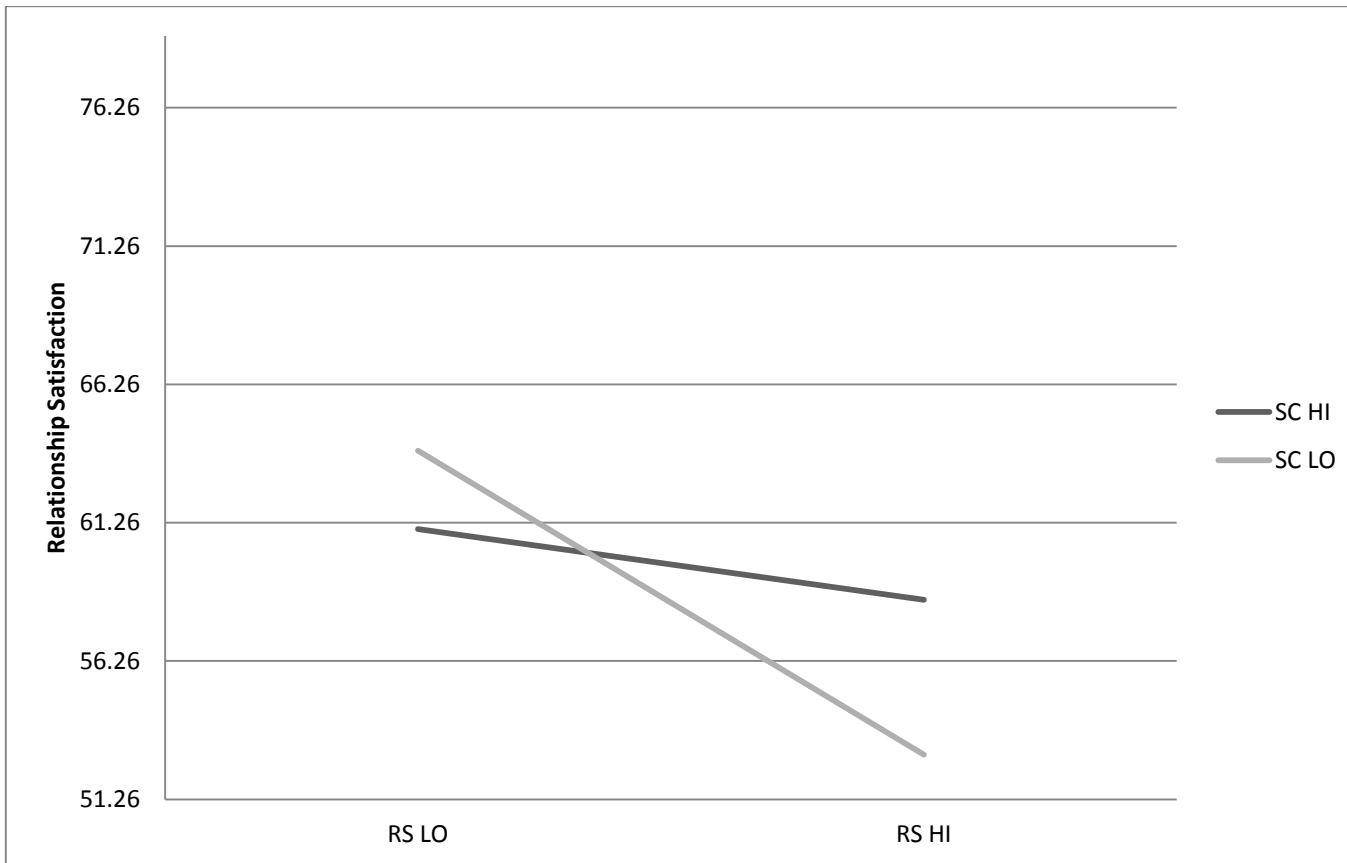


Figure 6

The Interaction Between Rejection Sensitivity and Self-Compassion Predicting Relationship Satisfaction



Biographical Data

Before you begin the questionnaires, please tell us a little about yourself. This information, and all information that you give us, will be kept strictly confidential.

What is your age? _____

How many years of education have you had? _____

What is your gender? Female Male

What is your racial group?

Asian African-American Hispanic Native American Caucasian

Multiracial Other _____

What is your sexual orientation?

Heterosexual Homosexual Bisexual

How long have you and your partner been in a romantic relationship? _____

How many times have you been in a serious relationship before this one? _____

What is the status of your current romantic relationship? (check all that apply)

Dating other people _____

Committed to each other (dating exclusively) _____

Living together _____

Engaged _____

Married _____

Are your biological parents currently married to each other? _____

If not, are either of your biological parents married to other people (or co-habiting)? _____

How many times has your biological mother been married/cohabiting? _____

How many times has your biological father been married/cohabiting? _____

What was your household's yearly income while you were living at home with your parents?

1. Less than \$10,000 2. \$10,000 - \$24,999 3. \$25,000 - \$49,999
4. \$50,000 - \$74,999 5. \$75,000 - \$99,999 6. \$100,000 - \$249,999
7. Over \$250,000

What is your household's yearly income currently?

1. Less than \$10,000 2. \$10,000 - \$24,999 3. \$25,000 - \$49,999
4. \$50,000 - \$74,999 5. \$75,000 - \$99,999 6. \$100,000 - \$249,999

7. Over \$250,000

Are you currently employed? Yes No

If so, what is your occupation? _____

What is your religious denomination?

1. Christian, please specify _____
2. Jewish, please specify _____
3. Muslim, please specify _____
4. Other, please specify _____

RSQ

Directions: *Each of the items below describes things college students sometimes ask of other people. Please imagine that you are in each situation.*

You ask someone in class if you can borrow his/her notes.

1. How concerned or anxious would you be over whether or not the person would want to lend you his/her notes?

very unconcerned 1 2 3 4 5 6 very
concerned

2. I would expect that the person would willingly give me his/her notes.

very unlikely 1 2 3 4 5 6 very likely

You ask your boyfriend/girlfriend to go steady.

3. How concerned or anxious would you be over whether or not he/she also would want to go steady with you?

very unconcerned 1 2 3 4 5 6 very
concerned

4. I would expect that he/she would want to go steady with me.

very unlikely 1 2 3 4 5 6 very likely

You ask someone you don't know well out on a date.

5. How concerned or anxious would you be over whether or not the person would want to go out with you?

very unconcerned 1 2 3 4 5 6 very
concerned

6. I would expect that the person would want to go out on a date with me.

very unlikely 1 2 3 4 5 6 very likely

Your boyfriend/girlfriend has plans to go out with friends tonight, but you really want to spend that time with him/her, and you tell him/her so.

7. How concerned or anxious would you be over whether or not your boyfriend/girlfriend would decide to stay with you instead?

very unconcerned 1 2 3 4 5 6 very
concerned

8. I would expect that he/she would willingly choose to stay with me.

very unlikely 1 2 3 4 5 6 very likely

You ask your parents for extra spending money.

9. How concerned or anxious would you be over whether or not your parents would give it to you?

very unconcerned 1 2 3 4 5 6 very
concerned

10. I would expect that my parents would not mind giving it to me.

very unlikely 1 2 3 4 5 6 very likely

After class, you tell your teacher that you have been having some trouble with a section of the course and ask if he/she can give you some extra help.

11. How concerned or anxious would you be over whether or not your teacher would want to help you out?

very unconcerned 1 2 3 4 5 6 very
concerned

12. I would expect that the teacher would want to help me.

very unlikely 1 2 3 4 5 6 very likely

You approach a close friend to talk after doing or saying something that seriously upset him/her.

13. How concerned or anxious would you be over whether or not your friend would want to talk with you?

very unconcerned 1 2 3 4 5 6 very
concerned

14. I would expect that he/she would want to talk with me to try to work things out.

very unlikely 1 2 3 4 5 6 very likely

You ask someone in one of your classes to go out for ice cream.

15. How concerned or anxious would you be over whether or not the person would want to go?

very unconcerned 1 2 3 4 5 6 very
concerned

16. I would expect that he/she would want to go with me.

very unlikely 1 2 3 4 5 6 very likely

After graduation you can't find a job and you ask your parents if you can live at home for a while.

17. How concerned or anxious would you be over whether or not your parents would want you to stay home?

very unconcerned 1 2 3 4 5 6 very
concerned

18. I would expect that I would be welcome at home.

very unlikely 1 2 3 4 5 6 very likely

You ask your friend to go out for a movie.

19. How concerned or anxious would you be over whether or not your friend would want to go out with you?

very unconcerned 1 2 3 4 5 6 very
concerned

20. I would expect that he/she would want to go with me.

very unlikely 1 2 3 4 5 6 very likely

You call your boyfriend/girlfriend after a bitter argument and tell him/her you want to see him/her.

21. How concerned or anxious would you be over whether or not your boyfriend/girlfriend would want to see you?

very unconcerned 1 2 3 4 5 6 very
concerned

22. I would expect that he/she would want to see me.

very unlikely 1 2 3 4 5 6 very likely

You ask a friend if you can borrow something of his/hers.

23. How concerned or anxious would you be over whether or not your friend would want to loan it to you?

very unconcerned 1 2 3 4 5 6 very
concerned

24. I would expect that he/she would willingly loan it to me.

very unlikely 1 2 3 4 5 6 very likely

You ask your parents to come to an occasion that is important to you.

25. How concerned or anxious would you be over whether or not your parents would want to come?

very unconcerned 1 2 3 4 5 6 very
concerned

26. I would expect that they would want to come.

very unlikely 1 2 3 4 5 6 very likely

You ask a friend to do you a big favor.

27. How concerned or anxious would you be over whether or not your friend would want to help you out?

very unconcerned 1 2 3 4 5 6 very
concerned

28. I would expect that he/she would willingly agree to help me out.

very unlikely 1 2 3 4 5 6 very likely

You ask your boyfriend/girlfriend if he/she really loves you.

29. How concerned or anxious would you be over whether or not your boyfriend/girlfriend would say yes?

very unconcerned 1 2 3 4 5 6 very concerned

30. I would expect that he/she would answer yes sincerely.

very unlikely 1 2 3 4 5 6 very likely

You go to a party and notice someone on the other side of the room, and then you ask them to dance.

31. How concerned or anxious would you be over whether or not the person would want to dance with you?

very unconcerned 1 2 3 4 5 6 very concerned

32. I would expect that he/she would want to dance with me.

very unlikely 1 2 3 4 5 6 very likely

You ask your boyfriend/girlfriend to come home to meet your parents.

33. How concerned or anxious would you be over whether or not your boyfriend/girlfriend would want to meet your parents?

very unconcerned 1 2 3 4 5 6 very concerned

34. I would expect that he/she would want to meet my parents.

very unlikely 1 2 3 4 5 6 very likely

SCS

HOW I TYPICALLY ACT TOWARDS MYSELF IN DIFFICULT TIMES

Please read each statement carefully before answering. To the left of each item, indicate how often you behave in the stated manner, using the following scale:

**Almost
never**

1

2

3

4

**Almost
always**

5

- _____ 1. I'm disapproving and judgmental about my own flaws and inadequacies.
- _____ 2. When I'm feeling down I tend to obsess and fixate on everything that's wrong.
- _____ 3. When things are going badly for me, I see the difficulties as part of life that everyone goes through.
- _____ 4. When I think about my inadequacies, it tends to make me feel more separate and cut off from the rest of the world.
- _____ 5. I try to be loving towards myself when I'm feeling emotional pain.
- _____ 6. When I fail at something important to me I become consumed by feelings of inadequacy.
- _____ 7. When I'm down and out, I remind myself that there are lots of other people in the world feeling like I am.
- _____ 8. When times are really difficult, I tend to be tough on myself.
- _____ 9. When something upsets me I try to keep my emotions in balance.
- _____ 10. When I feel inadequate in some way, I try to remind myself that feelings of inadequacy are shared by most people.
- _____ 11. I'm intolerant and impatient towards those aspects of my personality I don't like.

- _____ 12. When I'm going through a very hard time, I give myself the caring and tenderness I need.
- _____ 13. When I'm feeling down, I tend to feel like most other people are probably happier than I am.
- _____ 14. When something painful happens I try to take a balanced view of the situation.
- _____ 15. I try to see my failings as part of the human condition.
- _____ 16. When I see aspects of myself that I don't like, I get down on myself.
- _____ 17. When I fail at something important to me I try to keep things in perspective.
- _____ 18. When I'm really struggling, I tend to feel like other people must be having an easier time of it.
- _____ 19. I'm kind to myself when I'm experiencing suffering.
- _____ 20. When something upsets me I get carried away with my feelings.
- _____ 21. I can be a bit cold-hearted towards myself when I'm experiencing suffering.
- _____ 22. When I'm feeling down I try to approach my feelings with curiosity and openness.
- _____ 23. I'm tolerant of my own flaws and inadequacies.
- _____ 24. When something painful happens I tend to blow the incident out of proportion.
- _____ 25. When I fail at something that's important to me, I tend to feel alone in my failure.
- _____ 26. I try to be understanding and patient towards those aspects of my personality I don't like.

SSS

Instructions: Please rate each item with the scale below that best describes how you feel about each of the statements listed below. For questions regarding relationships, please answer in terms of your CURRENT dating relationship. NOTICE responses range from (1) strongly disagree to (5) strongly agree.

Strongly Disagree	Somewhat Disagree	Neither Agree Nor Disagree	Somewhat Agree	Strongly Agree
1	2	3	4	5

1. ____ I don't speak my feelings in an intimate relationship when I know they will cause a disagreement.
2. ____ when my partner's needs and feelings conflict with my own, I always state mine clearly.
3. ____ Instead of risking confrontations in close relationships, I would rather not rock the boat.
4. ____ I speak my feelings with my partner, even when it leads to problems or disagreements.
5. ____ When my partner's needs or opinions conflict with mine, rather than asserting my own point of view I usually end up agreeing with him/her.
6. ____ When it looks as though certain of my needs can't be met in a relationship, I usually realize that they weren't very important anyway.
7. ____ I rarely express my anger at those close to me.
8. ____ I think its better to keep my feelings to myself when they conflict with my partner's.
9. ____ I try to bury my feelings when I think they will cause trouble in my close relationship(s).

CPQ

Directions: We are interested in how you and your partner typically deal with problems in your relationship. Please rate each item on a scale of 1 (Very Unlikely) to 9 (Very Likely). Please answer these items with regards to your current romantic partner.

A. WHEN SOME PROBLEM IN THE RELATIONSHIP ARISES

	Very Unlikely							Very Likely	
1. <u>Mutual Avoidance.</u> Both members avoid discussing the problem.	1	2	3	4	5	6	7	8	9
2. <u>Mutual Discussion.</u> Both members try to discuss the problem.	1	2	3	4	5	6	7	8	9
3. <u>Discussion/Avoidance.</u> Man tries to start discussion while woman tries to avoid discussion.	1	2	3	4	5	6	7	8	9
Woman tries to start a discussion while man tries to avoid discussion.	1	2	3	4	5	6	7	8	9

B. DURING A DISCUSSION OF A RELATIONSHIP PROBLEM

	Very Unlikely							Very Likely	
1. <u>Mutual Blame.</u> Both members blame, accuse, and criticize each other.	1	2	3	4	5	6	7	8	9
2. <u>Mutual Expression.</u> Both members express their feelings to each other.	1	2	3	4	5	6	7	8	9
3. <u>Mutual Threat.</u> Both members threaten each other with negative consequences.	1	2	3	4	5	6	7	8	9
4. <u>Mutual Negotiation.</u> Both members suggest possible solutions or compromises.	1	2	3	4	5	6	7	8	9
5. <u>Demand/Withdraw.</u> Man nags and demands while Woman withdraws, becomes silent, or refuses to discuss the matter further.	1	2	3	4	5	6	7	8	9

Woman nags and demands while Man withdraws, becomes silent, or refuses to discuss the matter further.	1	2	3	4	5	6	7	8	9
	Very Unlikely							Very Likely	
6. <u>Criticize/Defend.</u>									
Man criticizes while Woman defends herself.	1	2	3	4	5	6	7	8	9
Woman criticizes while Man defends himself.	1	2	3	4	5	6	7	8	9
7. <u>Pressure/Resist.</u>									
Man pressures Woman to take some action or stop some action, while Woman resists.	1	2	3	4	5	6	7	8	9
8. <u>Emotional/Logical.</u>									
Man expresses feelings while Woman offers reasons and solutions.	1	2	3	4	5	6	7	8	9
Woman expresses feelings while Man offers reasons and solutions.	1	2	3	4	5	6	7	8	9
9. <u>Threat/Back down.</u>									
Man threatens negative consequences and Woman gives in or backs down.	1	2	3	4	5	6	7	8	9
10. <u>Verbal Aggression.</u>									
Man calls Woman names, swears at her, or attacks her character.	1	2	3	4	5	6	7	8	9
Woman calls Man names, swears at him, or attacks his character.	1	2	3	4	5	6	7	8	9
11. <u>Physical Aggression.</u>									
Man pushes, shoves, slaps, hits, or kicks Woman.	1	2	3	4	5	6	7	8	9
Woman pushes, shoves, slaps, hits or kicks Man.	1	2	3	4	5	6	7	8	9

C. AFTER A DISCUSSION OF A RELATIONSHIP PROBLEM

	Very Unlikely							Very Likely	
1. <u>Mutual Understanding.</u> Both feel each other has understood his/her position.	1	2	3	4	5	6	7	8	9
2. <u>Mutual Withdrawal.</u> Both withdraw from each other after the discussion.	1	2	3	4	5	6	7	8	9
	Very Unlikely							Very Likely	
3. <u>Mutual Resolution.</u> Both feel that the problem has been solved.	1	2	3	4	5	6	7	8	9
4. <u>Mutual Withholding.</u> Neither partner is giving to the other after the discussion.	1	2	3	4	5	6	7	8	9
5. <u>Mutual Reconciliation.</u> After the discussion, both try to be especially nice to each other.	1	2	3	4	5	6	7	8	9
6. <u>Guilt/Hurt.</u> Man feels guilty for what he said or did while Woman feels hurt.	1	2	3	4	5	6	7	8	9
Woman feels guilty for what she said or did while Man feels hurt.	1	2	3	4	5	6	7	8	9
7. <u>Reconcile/Withdraw.</u> Man tries to be especially nice, acts as if things are back to normal, while Woman acts distant.	1	2	3	4	5	6	7	8	9
Woman tries to be especially nice, acts as if things are back to normal, while Man acts distant.	1	2	3	4	5	6	7	8	9
8. <u>Pressure/Resist.</u> Man pressures Woman to apologize or promise to do better, while Woman resists.	1	2	3	4	5	6	7	8	9
Woman pressures Man to apologize or promise to do better, while Man resists.	1	2	3	4	5	6	7	8	9
9. <u>Support Seeking.</u> Man seeks support from others	1	2	3	4	5	6	7	8	9

(parent, friend, children).

Woman seeks support from others
(parent, friend, children).

1 2 3 4 5 6 7 8 9

Couples Satisfaction Index (CSI-16)

1. Please indicate the degree of happiness, all things considered, of your relationship.

Extremely Unhappy	Fairly Unhappy	A Little Unhappy	Happy	Very Happy	Extremely Happy	Perfect
0	1	2	3	4	5	6

All the time	Most of the time	More often than not	Occa- sionally	Rarely	Never
5	4	3	2	1	0

2. In general, how often do you think that things between you and your partner are going well?

Not at all TRUE	A little TRUE	Some- what TRUE	Mostly TRUE	Almost Completely TRUE	Completely TRUE
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3. Our relationship is strong

0 1 2 3 4 5

4. My relationship with my partner makes me happy

0 1 2 3 4 5

5. I have a warm and comfortable relationship with my partner

0 1 2 3 4 5

6. I really feel like part of a team with my partner

0 1 2 3 4 5

Not at all	A little	Some- what	Mostly	Almost Completely	Completely
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7. How rewarding is your relationship with your partner?

0 1 2 3 4 5

8. How well does your partner meet your needs?

0 1 2 3 4 5

9. To what extent has your relationship met your original expectations?

0 1 2 3 4 5

10. In general, how satisfied are you with your relationship?

0 1 2 3 4 5

For each of the following items, select the answer that best describes how you feel about your relationship. Base your responses on your first impressions and immediate feelings about the item.

11.	INTERESTING	5	4	3	2	1	0	BORING
12.	BAD	0	1	2	3	4	5	GOOD
13.	FULL	5	4	3	2	1	0	EMPTY
14.	STURDY	5	4	3	2	1	0	FRAGILE
15.	DISCOURAGING	0	1	2	3	4	5	HOPEFUL
16.	ENJOYABLE	5	4	3	2	1	0	MISERABLE

CES-D

Directions: Below is a list of the ways you might have felt or behaved. Please tell us how often you have felt this way during the past week.

0 = Rarely or None of the Time (Less than 1 day)

1 = Some or a Little of the Time (1-2 days)

2 = Occasionally or a Moderate Amount of Time (3-4 days)

3 = Most or all of the Time (5-7 days)

1. I was bothered by things that usually don't bother me.	0	1	2	3
2. I did not feel like eating; my appetite was poor.	0	1	2	3
3. I felt that I could not shake off the blues even with help from family or friends.	0	1	2	3
4. I felt that I was just as good as other people.	0	1	2	3
5. I had trouble keeping my mind on what I was doing	0	1	2	3
6. I felt depressed.	0	1	2	3
7. I felt everything I did was an effort.	0	1	2	3
8. I felt hopeful about the future.	0	1	2	3
9. I thought my life had been a failure.	0	1	2	3
10. I felt fearful.	0	1	2	3
11. My sleep was restless.	0	1	2	3
12. I was happy.	0	1	2	3
13. I talked less than usual.	0	1	2	3
14. I felt lonely.	0	1	2	3
15. People were unfriendly.	0	1	2	3
16. I enjoyed life.	0	1	2	3
17. I had crying spells.	0	1	2	3

18. I felt sad.	0	1	2	3
19. I felt that people dislike me.	0	1	2	3
20. I could not get “going”.	0	1	2	3

Vitae

Jennifer Anne Christman was born in Toledo, Ohio on January 15, 1982 and was raised in Perrysburg, Ohio. She attended Bowling Green State University, where she earned a Bachelor of Arts in Psychology with departmental honors in 2004. While at Bowling Green State University she was nominated for and accepted into Phi Beta Kappa for her academic and leadership accomplishments.

She was then accepted into the Clinical Psychology Doctoral Program at the University of Tennessee, Knoxville, where she earned her Master of Arts Degree in Psychology from the University of Tennessee, Knoxville in 2005 and is currently pursuing her Ph.D. She completed her pre-doctoral internship at the Lexington Veteran Affairs Medical Center in Lexington, Kentucky.