



*Interpersonal  
Acceptance*



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*We are delighted to invite you...*



5<sup>th</sup> International Congress  
on Interpersonal  
Acceptance and Rejection

*Location:*  
**Chisinau  
Republic of Moldova**

**June 24 – June 27  
2014**

[www.isiparmoldova2014.org](http://www.isiparmoldova2014.org)

**Call For Papers:**

**Early Abstract Submission ends February 28, 2014**

**Final Submission Deadline is April 15, 2014**

Refer to [www.isiparmoldova2014.org](http://www.isiparmoldova2014.org) for Instructions on Submission.  
Contact Karen Ripoll-Nuñez ([kripoll@uniandes.edu.co](mailto:kripoll@uniandes.edu.co)) with questions.  
Conference Registration must be paid when abstract is accepted.

# Fifth International Congress on Interpersonal Acceptance and Rejection

June 24– June 27, 2014 in Chisinau, Moldova

The International Society for Interpersonal Acceptance and Rejection (ISIPAR) has the pleasure to announce that the Fifth International Congress on Interpersonal Acceptance and Rejection (ICIAR) will be held in Chisinau, Moldova, June 24–June 27, 2014. The Congress will focus on the study and applied practice of interpersonal acceptance and rejection. Areas of particular focus will be teacher acceptance-rejection, intimate partner acceptance-rejection, ostracism and social exclusion, mother/father love, psychotherapy and psycho-educational interventions, neurobiological concomitants of perceived rejection, as well as many other topics.

**This is your personal invitation. We look forward to seeing you there!**

Prospective participants are encouraged to submit proposals for papers, symposia, workshops, and poster presentations on any aspect of interpersonal acceptance-rejection.

**Details about abstract submission and conference registration can be found at <http://www.isiparmoldova2014.org/>.**

## Relevant Topics Include:

- Acceptance-rejection in intimate adult relationships
- Acceptance-rejection in the context of immigration & acculturation
- Acceptance-rejection in the context of adult offspring's caregiving of aging parents
- Acceptance-rejection of children with special needs
- Affectionate communication
- Clinical and developmental implications of interpersonal acceptance-rejection
- Cultural & social contexts of acceptance-rejection
- Educational implications of teacher, peer, and parental acceptance-rejection
- Father love
- Ostracism & social exclusion
- Parental acceptance-rejection
- Peer & sibling acceptance-rejection
- Methodological issues in the study of interpersonal acceptance-rejection
- Neurobiological concomitants of perceived rejection
- Resilience & coping with perceived rejection
- Psychological and emotional maltreatment
- Psychotherapy and psycho-educational interventions
- Rejection sensitivity
- Relation between acceptance-rejection & attachment
- Victimization and bullying in school age children
- And others

# Childhood Victimization's Tragic Legacy:

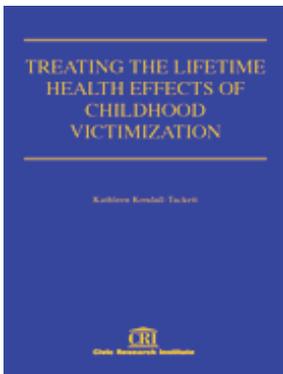
## A Biopsychosocial Perspective

**A Review of**

**Kathleen Kendall-Tackett**

**Reviewed by Julian Ford**  
**University of Connecticut**

**[jford@uchc.edu](mailto:jford@uchc.edu)**



If indeed “the body keeps the score” (van der Kolk, 1994) when psychological trauma occurs in the lives of children, a thorough understanding of how children’s bodies are affected by trauma and post-traumatic stress is essential for clinicians, researchers, and educators who work with children – and for those who work with adults who either were exposed to psychological trauma in their own childhoods or who are parenting and caring for traumatized children.

When childhood psychological trauma involves actual or perceived parental rejection (Rohner, 2004), this betrayal of trust (Goldsmith, Freyd, & DePrince, 2012) – whether intentional or unintentional – is associated with not only psychosocial but also profound biological alterations that include involuntary survival-based adaptations by the brain (Ford, 2009). The psychosocial sequelae of childhood interpersonal rejection and victimization are well documented by hundreds of empirical studies (D’Andrea, Ford, Stolbach, Spinazzola, & van der Kolk, 2012; Ford, 2010; Khaleque & Rohner, 2012). The toll that childhood rejection and victimization take on physical health and lifetime vulnerability to medical illness has become increasingly clear from findings such as those of the Adverse Childhood Experiences ([www.acestudy.org](http://www.acestudy.org)).

For an integration of these two vast but essential research literatures, readers can turn to the 2nd Edition of *Treating the Lifetime Effects of Childhood Victimization* by Kathleen

Kendall-Tackett. The book begins with a helpful primer on the effects of childhood victimization and persistent post-traumatic stress on the brain and body, which is particularly informative regarding the relationship of traumatic victimization and alterations in the body’s crucial defenses against illness, the body’s immune system. A dysregulated immune system not only cannot ward off disease effectively, but also may generate harmful inflammatory responses that are associated with some of the most costly and debilitating (and potentially life-threatening) diseases. A body overburdened in childhood by trauma-related stress reactivity may place the individual at risk not only for a lifetime of psychological problems such as depression or PTSD, but also for severe medical illnesses such as cancers, asthma, diabetes, cardiovascular disease, and auto-immune syndromes. While there is still much to be known about how childhood victimization alters – or is altered by – the body and brain’s responses to stress and pathogens, this book systematically reviews studies which elucidate several pathways potentially linking childhood victimization to lifetime risk of illness. These include impaired sleep, substance use, smoking, eating disorders, suicidality, high-risk sexual behaviors, shame, hostility, isolation, poverty, homelessness, revictimization, depression, PTSD, pain, and perinatal compromise to maternal health and mother-child bonding. The review of pain’s role as both a sequelae of victimization and debilitating

health problem is particularly illuminating.

The book concludes with an introduction to considerations in screening patients for abuse history and clinical management of depression, PTSD, and pain in the health care setting. Although potentially helpful as a broad overview for physical healthcare providers in training or practice, this section lacks the thoroughness of earlier ones. It fails to do justice to the complexities of managing the primary healthcare of adults who have widely varying histories of childhood (often also adulthood) victimization, and even greater varieties of both impairment and resilience. The field also has developed a broader array of evidence based pharmacological and psychotherapy treatments for victimization-related PTSD and depression in childhood (Ford & Courtois, 2013) and adulthood (Courtois & Ford, 2013) than the modalities described in this section.

Although she does not explicitly refer to the role of perceived parental acceptance and rejection in the origins or sequelae of childhood victimization, the constructs are clearly relevant in all of the domains discussed by Kendall-Tackett. For example, parental criticism is noted as potentially contributing to sleep problems. The research cited in this book demonstrates that parent-child relationships, parenting stress, and attachment security often are compromised when children are victimized and are risk (e.g., parental conflict, stress, disengagement) or protective (e.g., parental responsiveness, availability, emotional support) factors for persistent post-victimization problems. The wide range of biopsychosocial domains relevant to childhood victimization described in this important book affords clinicians and researchers a valuable opportunity to systematically apply the interpersonal

acceptance and rejection framework to better understand how childhood victimization can lead to a lifetime of health problems – or to healing and recovery.

## References

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**“This book systematically reviews studies which elucidate several pathways potentially linking childhood victimization to lifetime risk of illness.”**

[Check out the ISIPAR Facebook Group!](#)

## ISIPAR Member's Activity Page



*Artemis Giotsa* presented at an Early Childhood Congress October 18-20, 2013 in Ioannina, Greece. She also has published the following:

Giotsa, A. (2013) They love me, they love me not. An Early Childhood Acceptance-Rejection Questionnaire.

Giotsa, A. Theodoropoulos, C. (2013) Relationships between parents and early childhood children: How the children draw their family and how they perceive parents' behavior.



*Nadia Koltcheva* is currently taking part in early child development research projects such as the National Standards for Early Childhood Development and Learning, National Screening Test for Children, and Assessment of Childhood Development of Roma children in Bulgaria. She also took part in a European project "Trauma, Trust and Memory" in Belgrade, Serbia. In November, at the National Congress in Psychology in Bulgaria, Nadia made a presentation about the research she conducted with 10 other students and their use of PARTHEORY.



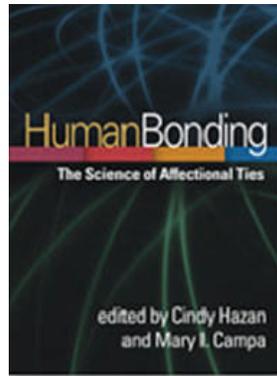
*Ronald P. Rohner* sponsored by UNED Facultad de Psicología in Madrid, Spain, spoke on "the Benefits of Affection Given and Affection Received: Introduction to Parental Acceptance-Rejection Theory." The conference was held Wednesday, November 6, 2013. The conference presentation is available at this link: <http://canal.uned.es/teleacto/56.html>. The organizer of the conference, *Miguel Angel Carrasco*, hosted the Rohners. Assistance in planning and execution of the conference came from *Victoria del Barrio* and *Francisco P. Holgado*.

Following a week in Madrid, Dr. and Mrs. Rohner travelled to Porto, Portugal, where a day-long Symposium on Rejection took place under Drs. *Francisco* and *Márcia* from *Nuno Baptista* and Dr. audience of 300 benefited following which faculty and over Portugal presented related to interpersonal



the organizing efforts of *Machado*, with assistance *Marisalva Favero*. An from Rohner's introduction, graduate students from all their work on topics acceptance and rejection.

# “Human Bonding: The Science of Affectional Ties”



**Edited by Cindy Hazan and Mary I. Campa**

**Reviewed by Aaron Burrick and Preston A. Britner  
University of Connecticut**

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*Human Bonding: The Science of Affectional Ties* provides a comprehensive overview of attachment theory, human bonding, and relationship science in the 21st century. From modern perspectives on partner selection to social behavior in animals, Hazan and Campa have compiled a strong and current collection of research that is understandable, informative, and grounded in theory.

The contents of *Human Bonding* are split into four sections: bonding phenomena in infancy and adolescence; contemporary approaches to mating; new topics and developments; and, relationship effects on health and mortality. Each section of the book contains three chapters that bring readers from an opening “aim” statement to a conclusion. These chapters, many of which are written by leaders in the field, create a book that is comprehensible and useful to students and professionals alike. The editors state in their introduction that the “central aim of this book is to provide an integrative, science-based overview of human bonding across the lifespan.” (Hazan & Campa, 2013, p. 1). They have definitely hit the mark on the science-based approach and the lifespan focus. With just a seven-page introduction that

foreshadows each chapter, and no end-of-section or end-of-book commentary or synthesis, the integration, however, is left to the reader. Thus, the classes (e.g., close relationships; human attachment; lifespan human development) for which this book might serve as a supplemental text are probably at the graduate (or perhaps advanced undergraduate) level, in fields like family studies or developmental/family psychology.

In the first section of the book, chapter authors outline the basics of attachment theory and the nature of emotional bonds in early life. Chapter 1 describes the development and function of attachment theory. The authors create a historical context for the theory and emphasize its focus on individual differences in the infant-caregiver relationship. Chapter 2 explains how attachment and emotional bonds are maintained and changed through reciprocal interactions. Using a variety of examples, these interactions and co-regulatory behaviors are related to individual differences in human bonds. The influence of the environment is also considered. In Chapter 3, the authors outline several developmental outcomes of early attachment security: social competence in school, increased emotion regulation, peer cooperation, and enhanced security in later

romantic relationships. Throughout the first section of *Human Bonding*, the authors emphasize how humans are “born to bond” and provide a concise overview of the importance and impact of early attachment behavior and a set-up for later sections that focus on adult relationships.

In the second section of the book, attachment and bonding theories are applied to mating strategies in humans and animals. Chapter 4 focuses exclusively on the “process model” or “filter theory” of mate selection. This model, conceptualized as an upside down triangle, describes how humans use filters of accessibility, appeal, and mutual interest to select a partner from their “pool of eligible.” This chapter’s narrow focus on the process model of selection fails to provide readers with a broad, diverse overview of mating theories in psychology. Chapter 5 gives an overview of evolutionary psychology and its influence on human mating. Starting with Darwin’s work on survival of the fittest, the authors describe male and female dating preferences, sexual strategies, and the role of jealousy in relationships. From Trivers’ research on inclusive fitness to genetics, the authors critically examine strategic pluralism theory and the physiology of different sexual strategies. Chapter 6 concludes the second section of *Human Bonding* with an interesting comparison of social behavior, physiological correlates, and social bonding between human and animal models.

The third section of *Human Bonding* is concerned with modern developments and individual differences in human romantic bonds. This section is one of *Human Bonding’s* greatest assets. Through empirical research, it applies scientific knowledge to current social trends and societal changes. Chapter 7 compares traditional, 20th

century dating scripts with the social networking, self-presentation, and “targeted relationships” of online dating. The chapter also provides a scientific perspective on casual sexual relationships like “one-night stands” and “friends with benefits.” Chapter 8 focuses on another contemporary issue: attachment, physiology, and behavioral dynamics in same-sex relationships. In their discussion of same-sex couples, the authors make important distinctions between love/affection and desire/sex, and they emphasize similarities between homosexual and heterosexual relationships despite reproductive differences. Chapter 9 applies the concept of new developments to measuring attachment behaviors and internal working models of close relationships. The authors provide a thorough explanation of the Adult Attachment Interview, its degree of convergence with self-report measures of adult attachment, and other current issues in measuring attachment.

In the final section of the book, the authors discuss how emotional bonds contribute to psychological well-being and mortality. The effects of relationship dissolution are also considered. Chapter 10 discusses the importance of perceived partner responsiveness, or how partners support one another’s needs, goals, and values. Empathic accuracy and secure base behavior are related to a couple’s well-being. Using attachment theory, interdependence theory, and self-determination theory, there is an interesting convergence on the importance of perceived (more so than “objective” actual) responsiveness to the self. Chapter 11 focuses on the important theories, predictors, and outcomes of relationship dissolution. The predictors, which range from personality factors to interaction patterns like Gottman’s “Four Horsemen of the Apocalypse,” and consequences, which range from mood

**The authors emphasize how humans are “born to bond” and provide a concise overview of the importance and impact of early attachment behavior and a set-up for later sections that focus on adult relationships.**

disorders to disruptive co-parenting dynamics capture the variability of breakups, divorces, and other forms of dissolution. The bridging of social baseline theory (which maintains that the human brain is designed for social networks) and attachment theory was particularly provocative. Chapter 12 discusses loneliness and the long-term effects of separation. Over the final pages of the book, loneliness is described and related to increased health risks and an earlier death. Whereas this material makes sense in context and emphasizes the vital importance of social connections, its “risk” focus ends the book on a down note, rather than reviewing the promotion of healthy relationships and well-being across the lifespan.

To conclude, this book can serve as a valuable resource for students and researchers alike. As a reader of this Interpersonal Acceptance newsletter, you might be disappointed to know that there are no linkages or references to parental acceptance-rejection theory in the book. There are certainly a number of connections that would be apparent to PARTheory researchers in terms of the formation of emotional bonds, the establishment of relationship patterns (in child-parent and adult-adult romantic partner dyads), and the consequences of acceptance vs. rejection, relationship quality, and relationship dissolution. In fact, there have been relatively few attempts to bridge PARTheory and attachment theory (and other theories related to human bonding). (For exceptions related to child-parent relationships and adult romantic partner relationships, see Hughes, Blom, Rohner, and Britner, 2005, and Carrillo and Ripoll-Nunez, 2014, respectively). Despite the fact that the connections to PARTheory from the theories and scientific findings presented in the book haven’t been made for the reader, there is plenty to recommend *Human Bonding* to those interested in studying these important relational concepts.

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*Found in a Chinese Fortune Cookie*

[Check out the new ISIPAR Website!](#)

# Results of Elections: ISIPAR Officers and Regional Representatives for 2014-2015



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# PARTheory and Evidence Make a Difference in Human Life

In case we ever forget that a major point of parental acceptance-rejection theory, measures, and evidence is to change lives in healthy, happy ways, here's an affirmation that the theory and evidence seem to work as well as we intend it to.

As background you should know that the grandfather of the woman who wrote the following letter brutalized his son as a boy. The rejection left him with years of depression and despair. Here is what the daughter wrote after she and her father heard Ronald P. Rohner's presentation about PARTheory and evidence. Please note that personally identifying information has been deleted to protect their family's privacy:

Dear Ron,

When you came to [city] I told you that you had changed my life when I found PARTheory. I'm writing to thank you for changing my life yet again.

Since you were here my father's mood is much improved. Of course we still expect that he will have bouts of depression, but not only does he seem to be more equipped in fighting them, he is also more able to talk about his past. Even the way he talks about it is different: A huge deep black shadow seems to have lifted from his eyes.

He always showed me he loved me, I always knew that. But now he can hug me for a long time; I don't feel him become tense when I hug him; he doesn't pull away. I can't explain or express it. I don't know when it had become difficult for him to be physically affectionate with me but now I feel as if my daddy, from back when I was a child, is back. I can't, I will never be able to thank you enough.

I told you my [grandparents died] when I was [a child]. A day hasn't gone by when I don't think about them. I feel they still take care of me, and have sent me two wonderful [new] grandparents to love me.

Thank you, so, so much.

Love,

[Name]