



Short Communication

Excessive reassurance-seeking and interpersonal dependency: Assessing incremental associations



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ABSTRACT

Several researchers have claimed that excessive reassurance-seeking (ERS), a maladaptive interpersonal pattern, is unique and exclusive to depression. However, there is reason to believe that ERS is also related to interpersonal dependency, given the core features of dependency (e.g., fear of negative evaluation). The current study analyzed psychometric data collected from 78 undergraduate students. Results indicated that interpersonal dependency was positively associated with ERS, even after controlling for depressive symptoms. Fear of negative evaluation accounted for unique variance in ERS, above and beyond both dependency and depressive symptoms. These findings contradict the widely-held belief that ERS is exclusive to depression.

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1. Introduction

Excessive reassurance seeking (ERS) is the relatively stable tendency to repeatedly seek assurances from others that one is loveable and worthy, regardless of whether such assurance has already been provided (Joiner, Metalsky, Katz, & Beach, 1999). ERS seems to contribute to interpersonal rejection and depressive symptoms (Joiner et al., 1999). Indeed, some researchers (Haeffel, Volez, & Joiner, 2007; Joiner & Metalsky, 2001; Joiner, Metalsky, Gencoz, & Gencoz, 2001; Joiner & Schmidt, 1998) have claimed that ERS is relatively exclusive to depression. In reviewing the literature on ERS, Davila (2001) concludes, “findings largely confirm its specificity to depression” (p. 539).

However, there are theoretical reasons and empirical data to suggest that ERS is also related to interpersonal dependency. For example, individuals seem to engage in ERS to alleviate fears about how others are evaluating them (Coyne, 1976). It stands to reason that fear of negative evaluation (FNE) is integral to ERS, and that FNE motivates ERS behaviors. This is important because FNE is also a primary feature of interpersonal dependency (Bornstein, 2005), and thus dependent persons may likewise be motivated to seek reassurance in order to mollify their fears about how others are evaluating them.

In further support of an ERS-dependency link, research implies that dependent individuals frequently seek help from others

(Bornstein, Bowers, & Bonner, 1996; Diener, 1967; Shilkret & Masling, 1981; Sinha & Pandey, 1972). These studies, however, have serious limitations; not only are these studies dated and in some cases poorly controlled, but they also seem to be assessing help-seeking, which may be conceptually and empirically distinct from reassurance-seeking (i.e., ERS). In addition, these studies did not exclude depressed participants or attempt to control for the potential impact of depressive symptoms on help-seeking behavior.

Two psychometric studies have investigated the relationship between ERS and interpersonal dependency. Using large samples of undergraduate students, ERS was found to be significantly correlated with interpersonal dependency ($r = 0.25$; Shahar, Joiner, Zuroff, & Blatt, 2004) and general dependency ($r = 0.47$; Joiner & Metalsky, 2001). While informative, both Shahar et al. (2004) and Joiner and Metalsky (2001) did not statistically control for depressive symptoms in their analyses. That is, any link between ERS and dependency may be spurious and due to a highly-relevant third variable, like depression.

The present research will examine the association between dependency and ERS, above and beyond the influence of depression. Given that FNE is common to conceptualizations of dependency (e.g., Bornstein, 2005) and to conceptualizations of ERS (e.g., Coyne, 1976), we will investigate relationships with FNE as well. The results of this research are likely to be most directly applicable to a clinical population and symptomatic individuals, thus we will study these constructs in a symptomatic sample (i.e., participants with elevated levels of depression and dependency).

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It is hypothesized that: (a) all four measures (i.e., of ERS, depression, interpersonal dependency, and FNE) will be significantly and positively correlated with each other; (b) interpersonal dependency will account for a significant amount of variance in ERS, above and beyond depression; and (c) FNE will account for a significant amount of variance in ERS, above and beyond depression.

2. Methods

2.1. Participants and procedures

This research used data that had been collected in the context of a previous study (McClintock & Anderson, 2013). In this study, the Interpersonal Dependency Inventory (IDI; Hirschfeld et al., 1977) was administered to 1221 undergraduate students at a large Midwestern university to screen for high levels of interpersonal dependency. Respondents who scored at least one standard deviation above the mean on the IDI at this pre-screen were invited to participate in a laboratory study. A total of 78 participants agreed to participate and completed all study procedures.

Upon arriving to the laboratory, each participant was asked to read and sign an informed consent. Those willing to participate were escorted into an individual study room to complete a set of questionnaires, which included a demographics form, the IDI, the Excessive Reassurance-Seeking Scale (ERSS), the Brief-Fear of Negative Evaluation (BFNE), and the Depression, Anxiety, Stress Scales-21 (DASS). Because past research indicates that ERS is unrelated to trait anxiety in the presence of depressive symptoms (e.g., Joiner & Schmidt, 1998), we only included the Depression Subscale of the DASS (DASS-DEP) in the analyses.

Of the 78 participants in the final sample, 67 identified as female, and the remaining 11 identified as male. A total of 67 participants identified as Non-Hispanic White, five identified as Asian, three identified as Multiracial, two identified as Hispanic/Latino, and one identified as African American. The mean age of the final sample was 19.1 years ($SD = 1.2$). Consistent with the goals of this study, our sample reported elevated levels of depression and dependency; participants' DASS-DEP scores ($M = 8.8$; $SD = 10.3$) fell at the 92nd percentile for normative data (see Henry & Crawford, 2005), and their IDI scores ($M = 61.4$; $SD = 11.9$) were substantially higher than normative data (e.g., $M = 45.5$, $SD = 13.4$; see Bornstein, 1997).

2.2. Measures

2.2.1. Depression

The Depression Subscale of the Depression, Anxiety, Stress Scales-21 (DASS-DEP; Lovibond & Lovibond, 1995) contains 7 items that measure depressive symptoms. A typical item from the DASS-DEP is "I felt that life was meaningless." The DASS-DEP has strong construct validity (see Henry & Crawford, 2005), and it demonstrated good internal consistency (Cronbach's $\alpha = 0.92$) in the current study.

2.2.2. Excessive reassurance-seeking

Of all ERS measures, the Excessive Reassurance-Seeking Scale (ERSS; Joiner, 1994) has received the most empirical attention. The ERSS contains 4 items, which are rated on a 7-point Likert scale. A typical item is "In general, do you find yourself often asking the people you feel close to how they truly feel about you?" The ERSS predicts observer-rated reassurance-seeking behavior and has strong construct validity (Joiner & Metalsky, 2001). A Cronbach's α of 0.86 was found for the ERSS in this study.

2.2.3. Fear of negative evaluation

The Brief-Fear of Negative Evaluation Scale (BFNE; Leary, 1983), a measure of fear of negative evaluation, has been most often studied within the social anxiety literature. The FNEB contains 12 items that are rated on a 5-point Likert scale. An example item is "I am afraid that people will find fault with me." Convergent and divergent validity has been established (Collins, Westra, Dozois, & Stewart, 2005). The FNEB exhibited good internal consistency (Cronbach's $\alpha = 0.89$) in this study.

2.2.4. Interpersonal dependency

The most widely-used self-report measure of interpersonal dependency is the Interpersonal Dependency Inventory (IDI; Hirschfeld et al., 1977). The IDI contains 48 items, each of which is rated on a 4-point scale. A typical item is "When I have a decision to make I always ask for advice." IDI scores predict dependency-related behaviors and the presence and severity of DPD symptoms (Bornstein, 2005). A Cronbach's α of .72 was found for the IDI in this study.

3. Results

Pearson correlations were first used to assess the relationships between the IDI, DASS-DEP, BFNE, and ERSS. As hypothesized, all four measures were significantly and positively correlated with each other (see Table 1). Of note, both the IDI and BFNE had associations with ERSS that were at least as strong as the association between DASS-DEP and ERSS.

We conducted two hierarchical regression analyses to evaluate the hypotheses that our variables of interest (i.e., interpersonal dependency and fear of negative evaluation) would account for incremental variance in ERS, above and beyond depression. In the first hierarchical regression analysis (see a in Table 2), ERSS was treated as the criterion variable predicted by DASS-DEP in the first step and IDI in the second step. After partialling out variance due to DASS-DEP, IDI significantly predicted and accounted for 4.5% of the variance in ERSS ($\beta = 0.32$), $t(75) = 3.00$, $p = .004$. Nevertheless, DASS-DEP remained a significant predictor of ERSS in the second step ($\beta = 0.26$), $t(75) = 2.41$, $p = .019$. These results imply that depression and dependency each account for unique variance in ERS.

In the second hierarchical regression analysis (see b in Table 2), ERSS was treated as the criterion variable predicted by DASS-DEP in the first step and BFNE in the second step. After controlling for DASS-DEP, BFNE significantly predicted and accounted for 13.2% of the variance in ERSS ($\beta = 0.39$), $t(75) = 3.65$, $p < .001$. DASS-DEP did not predict ERSS in the second step.

Given the robust link between BFNE and ERSS, we conducted a post hoc hierarchical regression analysis (see c in Table 2) with ERSS treated as the criterion variable predicted by DASS-DEP and IDI in the first step and BFNE in the second step. Above and beyond both DASS-DEP and IDI, BFNE significantly predicted and

Table 1
Means (standard deviations) and Pearson correlations, $N = 78$.

	<i>M</i> (<i>SD</i>)	ERSS	DASS-DEP	IDI	BFNE
ERSS	14.5 (5.3)	—			
DASS-DEP	8.8 (10.3)	.36**	—		
IDI	61.4 (11.9)	.40**	.31*	—	
BFNE	42.3 (8.9)	.47**	.38**	.63**	—

Note. ERSS = Excessive Reassurance-Seeking Scale; DASS-DEP = Depression, Anxiety, Stress Scales-Depression Subscale; IDI = Interpersonal Dependency Inventory; BFNE = Brief-Fear of Negative Evaluation Scale.

* $p < .05$.

** $p < .01$.

Table 2
Hierarchical Regression Analyses, $N = 78$.

	<i>B</i>	<i>SE B</i>	β
ERSS^a			
Step 1			
DASS-DEP	0.19	0.06	0.36**
Step 2			
DASS-DEP	0.13	0.06	0.26*
IDI	0.14	0.05	0.32**
ERSS^b			
Step 1			
DASS-DEP	0.19	0.06	0.36**
Step 2			
DASS-DEP	0.11	0.06	0.21
BFNE	0.24	0.07	0.39**
ERSS^c			
Step 1			
DASS-DEP	0.13	0.06	0.26*
IDI	0.14	0.05	0.32**
Step 2			
DASS-DEP	0.10	0.06	0.19
IDI	0.07	0.06	0.15
BFNE	0.18	0.08	0.30*

Note. ERS = Excessive Reassurance-Seeking Scale; DASS-DEP = Depression, Anxiety, Stress Scales-Depression Subscale; IDI = Interpersonal Dependency Inventory; BFNE = Brief-Fear of Negative Evaluation Scale.

^a $R^2 = .128$ for Step 1 ($p = .001$); $\Delta R^2 = .045$ for Step 2 ($p = 0.004$).

^b $R^2 = .128$ for Step 1 ($p = .001$); $\Delta R^2 = .132$ for Step 2 ($p < 0.001$).

^c $R^2 = .221$ for Step 1 ($p < .001$); $\Delta R^2 = .052$ for Step 2 ($p = 0.025$).

* $p < .05$.

** $p < .01$.

accounted for 5.2% of the variance in ERSS ($\beta = 0.30$), $t(74) = 2.29$, $p = .025$. DASS-DEP and IDI were unrelated to ERSS in the second step.

4. Discussion

Though excessive reassurance seeking (ERS) has been tethered to the depression literature, this study provides evidence that ERS is characteristic of interpersonal dependency as well. A measure of interpersonal dependency was found to be significantly associated with ERS, even after controlling for depression symptoms. This finding contradicts the idea that ERS is exclusive to depression.

The link between ERS and dependency fits well within the broader conceptualization of dependency. Dependent individuals view themselves as weak and helpless and view others as strong and powerful (Bornstein, 2005). Therefore, it would make sense that dependent persons would forgo their own autonomous self-direction and instead would seek external guidance and reassurance. The repeated solicitation of reassurance may reinforce the belief that one is inept and helpless, which in turn may perpetuate continued dependence on others and reassurance-seeking behaviors. The results of this study also implicate ERS in dependent personality disorder (DPD), given that DPD represents the especially severe and abnormal expressions of trait dependency (Pincus & Wilson, 2001).

ERS was also strongly correlated with a core emotional feature of interpersonal dependency, fear of negative evaluation (FNE). In fact, with FNE, dependency, and depression simultaneously predicting ERS, only FNE remained a significant predictor of ERS. Therefore, the current results imply that ERS is related to depression and dependency due to shared variance with FNE. This finding substantiates the notion that FNE play a predominant role in ERS. It could be that a self-fulfilling prophecy is created, whereby FNE incites reassurance-seeking behaviors, which leads to interpersonal

criticism and rejection, thus confirming the individual's concerns about being evaluated negatively. In this way, FNE and ERS may be intimately linked and may have reciprocal influences on each other.

Given the robust association observed between ERS and FNE, the current research implicates ERS in other psychological disorders that are characterized by FNE. Extensive research has shown that FNE is a hallmark feature of social anxiety disorder (e.g., Collins et al., 2005) and borderline personality disorder (BPD; Selby, Anestis, Bender, & Joiner, 2009), and thus it is conceivable that social phobics and individuals with BPD would similarly seek reassurance to alleviate their fears about how others are evaluating them.

A few limitations of the current study are worth noting. Firstly, the sample used was mostly White, female college students, which could impact the generalizability of the findings to males and culturally diverse groups. Our sample also endorsed elevated levels of depression and dependency; a different pattern of results could have emerged using a more general, representative sample. Finally, we used the DASS-DEP, which is not the gold standard for measuring depression symptoms. However, this limitation is mitigated by the observed correlation between DASS-DEP and ERS ($r = .36$), which is similar to a depression-ERS correlation ($r = .32$) reported in a recent meta-analysis (Starr & Davila, 2008).

In future research, it would be prudent to examine and empirically verify additional components of ERS. ERS may be associated, for instance, with the proclivity to disqualify positive experiences (see Beck, 1995). That is, individuals who engage in ERS may disregard positive feedback because they have difficulty integrating positive information into their negative self-schemas. If disqualifying the positive is a key component of ERS, this may be a prime target for cognitive intervention. Furthermore, given that ERS is fundamentally an interpersonal problem, research should study the efficacy of couples and interpersonal therapies for eradicating ERS behaviors (Swann & Bosson, 1999). Continued research on ERS may illuminate channels for treating this debilitating interpersonal problem.

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