The Humanistic Psychologist

0887-3267/20/$12.00

2021, Vol. 49, No. 3, 400–422
http://dx.doi.org/10.1037/hum0000168

Unconditional Positive Self-Regard: The Role of Perceived Parental Conditional Regard

Carmel Proctor
Positive Psychology Research Centre, Saint Peter Port, Guernsey

Roger G. Tweed
Kwantlen Polytechnic University

Daniel B. Morris
Positive Psychology Research Centre, Saint Peter Port, Guernsey

This study investigated Rogerian unconditional positive self-regard (UPSR) among young adults. Based on the findings of extant research in support of the Rogerian metatheoretcial model, variables were selected based on the fully functioning person to represent characteristics predictive of UPSR. Using hierarchical regression, UPSR was assessed with young adults aged 16 to 19 years ($\bar{x}$ = 16.87). Participants completed emotional self-assessments (Block 1: depression, anxiety, and self-esteem), humanistic/positive psychology construct assessments (Block 2: authenticity, life satisfaction, aspirations), and a measure of perceived parental conditional regard (Block 3: domain-specific perceptions of parental conditional regard [PPCR]). Analyses revealed that each block of variables significantly accounted for the variance in UPSR. All scores (except PPCR–Sport) had significant zero-order correlations with UPSR, however when considered together this was no longer the case due to the significant intercorrelations of the predictor variables. Overall, the following significant predictors of unconditional positive self-regard among young adults emerged: self-esteem, authentic living, accepting external influence, life satisfaction, importance of intrinsic motivations, and perceived parental conditional regard on academic success. Implications are explored.

Keywords: unconditional positive self-regard, Rogerian perceived parental conditional regard, life satisfaction, young adults

The importance of humanistic theory to psychology broadly and positive psychology particularly, cannot be overstated. Indeed, positive psychology research extends the aims of humanistic theory by furthering investigation of positive traits and experiences (see DeRobertis, 2013 for a review; Robbins, 2008, 2015).

This article was published Online First March 23, 2020.

Carmel Proctor, Positive Psychology Research Centre, Saint Peter Port, Guernsey; Roger G. Tweed, Department of Psychology, Kwantlen Polytechnic University; Daniel B. Morris, Positive Psychology Research Centre.

Correspondence concerning this article should be addressed to Carmel Proctor, Positive Psychology Research Centre, P.O. Box 544, Saint Peter Port, Guernsey, GY1 6HL. E-mail: carmel@pprc.gg

Humanistic Psychology and Positive Psychology: Routes and Connections

In his chapter, "Toward a Positive Psychology," occurring in the first edition of *Motivation and Personality*, Maslow (1954) expressed his discontent with a psychology that unequally concerned itself with disorder and human potential and called for a "positive psychology." Without question, the debt that positive psychology today owes to humanistic psychology has not only been formally acknowledged (e.g., Ryff & Singer, 1998; Seligman & Csikszentmihalyi, 2001), but also more importantly evidenced by the growth and understanding of concepts prominent in humanistic psychology to mainstream psychology broadly, such as "flow" (Robbins, 2008). Indeed, Csikszentmihalyi may be one of the central founding fathers of modern positive psychology (Csikszentmihalyi & Nakamura, 2011), however his work on flow is humanistic in origin (see Csikszentmihalyi, 1975).

Further, positive psychology has reinvigorated investigations into what it means to flourish, become, self-actualize, and function fully, concepts that are firmly grounded in the humanistic traditions of Abraham Maslow and Carl Rogers (Maslow, 1968; Rogers, 1961). As is well known, there have been contentious divides between the two disciplines historically, including differences in philosophical grounding and research methodology, however as positive psychology has grown and evolved so has its affirmation of humanist principles—evidenced through increased theory and research in areas previously neglected by the discipline that make up the full range of human experience (e.g., happiness, optimal experience, hope, character, virtue, flow, authenticity, love, awe, wisdom, meaning, and the dark side of existence; see Kim, Doiron, Warren, & Donaldson, 2018 for a review; Churchill, 2014; Proctor, Tweed, & Morris, 2016; Robbins, 2008; Warmoth, Resnick, & Serlin, 2001; Wong, 2011a). Accordingly, prominent early proponents of positive psychology, such as Linley, Joseph, Harrington, and Wood (2006), argued that positive psychology and humanistic psychology both shared broad interests in the "fully functioning person (Rogers, 1961), self-actualization, and the study of healthy individuals (Maslow, 1968)" (p. 5) – admitting too, that early positive psychology gave insufficient credit to the work of humanistic psychology.

As evidenced, the links between positive psychology and humanistic psychology are foundational and extensive. Maslow (1971), for example, argued that transcendence is the highest possible human consciousness, and though he had a multifaceted definition for transcendence, he included the concept of rising above selfishness. Consistent with Maslow's ideal, modern positive psychology literature has often focused on the value of prosocial behavior (e.g., Aknin et al., 2013). Moreover, Maslow (1971) also interpreted transcendence as meaning rising above an egoistic perception of the self as a distinct and possibly even superior being. This theme concurs with the current article's focus on unconditional regard of others. Furthermore, Carl Rogers (1961) also called for a focus on human psychological growth. Similarly, positive psychologists have also often called for growth, and, in fact, one of positive psychology's seminal texts *Character Strengths and Virtues: A Classification and Handbook* (Peterson & Seligman, 2004) was devoted to the topic of human virtue—though admittedly Carl Rogers may have been less comfortable with using virtue as an ideal for human growth.

Further, positive psychology rests in existential philosophy, in particular Aristotelian philosophy, which posits that the human being is capable of engaging in a process of moving toward an ultimate self through the habituation and exercising of personal strengths of character. This journey of becoming, is private yet sympathetic with the journey of all human beings, involves recognizing the best within oneself and using our

best qualities virtuously in the process of self-actualization or eudaimonic well-being. Accordingly, founders of the humanistic tradition, such as Rollo May (1975) and James Bugental (1987), were proponents of the use of strengths, such as creativity and art, in actualizing our being as a means of healing (Warmoth et al., 2001). Moreover, as areas of positive psychology continue to develop a firmer integration with existential philosophy e.g., existential positive psychology (Wong, 2011b), a movement toward "a genuine rapprochement between humanistic and positive psychology" (Robbins, 2008, p. 107) becomes more likely. Furthermore, in closing the divide, these two closely related, but commonly separate, disciplines may be brought closer together through methodological and epistemological pluralism (Franco, Friedman, & Arons, 2008; Friedman, 2008) and meaningful and effective collaboration (Rich, 2017).

Study Aims

The aim of this study was to add to extant literature bridging the humanistic and positive psychology fields (Linley & Joseph, 2004; Patterson & Joseph, 2007). Predictor variables representative of the Rogerian fully functioning person were chosen for both humanistic and positive psychology constructs. In the following paragraphs, we will describe the origins of the unconditional positive self-regard (UPSR) concept within the person-centered theory of Carl Rogers, followed by discussion of perceived parental conditional regard as it applies. We will then describe our selection of predictor variables for unconditional positive self-regard, followed by presentation of the study hypotheses.

Person-Centered Psychology

Carl Rogers (1951, 1959, 1961) developed *person-centered psychology* or *person-centered therapy*, which postulates that all human organisms have an inbuilt tendency toward fulfillment and growth. According to Rogers' theory, all infants have an inherent motivational system (i.e., the *actualizing tendency*) and a regulatory system (i.e., the *organismic valuing process*), which by feedback keeps an organism attuned with satisfying motivational needs. Awareness and development of the self occurs through interaction (self-experience) with the environment. As the awareness of the self emerges, the individual naturally develops a need for *positive regard*. According to Rogers, self-regard develops out of the association of self-experiences and the innate need for positive regard. *Positive self-regard* develops from a positive regard satisfaction associated with a particular self-experience or a group of self-experiences independent of the positive regard of others—that is, positive regard has been experienced from others, which results in a positive gestalt attitude toward oneself that is no longer directly dependent on the attitudes of others. Key to the self-regard complex is the self-experience of *unconditional positive regard*: "When the individual perceives himself in such a way that no self-experience can be discriminated as more or less worthy of positive regard than any other, then he is experiencing unconditional positive self-regard" (Rogers, 1959, p. 209).

According to Rogers' theory, when self-experiences with significant others are discriminated as being more or less worthy of positive regard, the individual is said to have developed a condition of worth—that is, "*self-experiences* are avoided (or sought) solely because it is less (or more) worthy of *self-regard*" (Rogers, 1959, p. 224).

A condition of worth arises when the positive regard of a significant other is conditional, when the individual feels that in some respects he is prized and in others not.

Gradually this same attitude is assimilated into his own self-regard complex and he values and experience positively or negatively solely because of these conditions of worth which he has taken over from others, not because the experiences enhances or fails to enhance his organism. (Rogers, 1959, p. 209)

Therefore, developed conditions of worth inform behavior with significant others, such that the resultant positive regard is secured from significant others with behavior that departs from those that would enhance one's organism. Thus, conditions of worth disturb the organismic valuing process, preventing individuals from functioning freely—that is, being one's true self. Consequently, values *introjected* i.e., "taken over from others, but perceived in distorted fashion" (Rogers, 1951, p. 498) from significant others are applied to experiences without consideration of whether they maintain or enhance the organism—meaning that experiences may be perceived as organismically satisfying, when they are not and vice versa.

Rogers' termed the "ultimate theoretical person" the *fully functioning person*. The fully functioning person describes the type of psychological functioning that occurs when self-actualization is organismically congruent (Patterson & Joseph, 2007). According to Rogers (1959),

> [t]his is a basic concept . . . in which the individual appears to be revising his concept of the self to bring it into congruence with his experience, accurately symbolized . . . Thus when self-experiences are accurately symbolized, and are included in the self-concept in this accurately symbolized form, then the state is one of congruence of self and experience. If this were completely true of all self-experiences, the individual would be a fully functioning person. (pp. 205–206)

From the perspective of the person-centered model, the fully functioning person would have at least the following characteristics (see Rogers, 1959, pp. 234–235):

1. Openness to experience
2. Absence of defensiveness
3. Congruence of self-structure and experience
4. Organismic valuing process
5. No conditions of worth
6. Experience of unconditional self-regard
7. Experience of positive regard

Parental Conditional Regard

Parental conditional regard (PCR) "is a socializing practice in which parents make their affection and appreciation contingent on the child's display of parentally desired behaviors"—that is, more affection, attention, and appreciation are displayed when children act in accordance to specific parental expectations and less affection and esteem (ignored/rejected) when children do not act in accordance to specific parental expectations (Assor & Roth, 2007, p. 18). The first study that specifically focused on PCR, conducted by Assor, Roth, and Deci (2004), found it to be associated with a host of negative psychological outcomes. Although PCR was found to reliably establish the display of the target behavior, it was associated with negative affective consequences, such as "short-lived satisfaction, shame after failure, fluctuations in self-esteem, poor coping skills, low self-worth, a sense of being disapproved by parents, and resentment towards parents" (Assor et al., 2004, p. 84).

Moreover, research by Roth (2008), examining the relations between PCR and autonomy-supportive parenting with levels of internalization and self- versus other-oriented helping tendencies, suggests that relations between parenting practices and prosocial orientations are mediated by level of internalization. That is, PCR predicted introjected (sense that one has to behave in specific ways to be worthy) regulation, leading to egoistic/self-esteem boosting (self-oriented) helping, whereas autonomy-supportive parenting resulted in integrated (behavior guided by perception and experience reflective of one's self-chosen identity) regulation and other-oriented helping (Assor & Roth, 2007; Roth, Assor, Niemiec, Deci, & Ryan, 2009). Although not differentiated by Assor et al. (2004), later research highlights that PCR involves positive and negative components—that is, withdrawing attention and affection when a child fails to act as expected (conditional negative regard) and providing more attention and affection when a child does act as expected (conditional positive regard; Assor & Roth, 2007; Roth et al., 2009). In fact, Roth (2008) found parental conditional positive regard (PCPR) to have a stronger relation with children's outcomes than parental conditional negative regard (PCNR). Further, additional research suggests PCPR to have unique negative associations with emotional skills (i.e., recognizing sadness in others, responding to others when they are sad, and awareness of their own sadness) when the effects of PCNR were controlled (Roth & Assor, 2010). Such results are unsurprising, as providing more affection when a child meets parental expectation garners positive feelings and "love withdrawal" when they do not, resulting in shame and guilt. Assor and Roth (2007) noted that

> [b]ecause PCR makes children's self-esteem and sense of love-worthiness dependent on the attainment of specific attributes, children exposed to this socializing strategy are likely to feel anxious and pressured . . . Thus, PCR is likely to lead to short-lived satisfaction after success in manifesting the desired attribute or behavior . . . [but] the use of conditional regard to press the child to behave in parentally expected ways is likely to undermine the children's sense of self-worth because it implies that their parents do not accept them for who they are, and that they do not trust them to behave in desirable ways out of their own choice. (p. 28)

Similarly, Assor and Tal (2012) found PCPR to predict self-aggrandizement following academic achievement and self-devaluation and shame following failure—resulting in maladaptive self-feelings and stressful modes of coping.

Further, research suggests that PCR has a negative impact on authenticity and the ability to develop a "true self." For example, Harter, Marold, Whitesell, and Cobbs (1996) found that adolescents who reported engaging in false self-behavior to please, impress, or win the approval of parents and peers had intermediate scores (between the other two motive categories: devaluation of one's true self and role experimentation) on depression, self-worth, hope and knowledge of the true self compared with those acting in ways reflective of the "real me." Moreover, more recent research suggests that PCR is positively associated with perfectionism, the setting of excessively high and unrealistic standards for oneself, and negatively associated with subjective well-being and self-esteem (Mendi & Eldeleklioglu, 2016). Importantly, research suggests that "perfectionists" are individuals who have developed within an environment of parental conditional love and appreciation (Frost, Marten, Lahart, & Rosenblate, 1990). Further, the well-being literature provides ample support that an inability to meet personal standards is negatively related to satisfaction with life (Gilman & Ashby, 2003; see Proctor, Linley, & Maltby, 2009b for a review). Overall, research suggests that although PCR can be effective in attaining a desired target behavior or outcome, it comes at emotional, social, and/or psychological costs.

Study Purpose

The purpose of the present study was to test the following predictions, which are based on the person-centered model, using a three-block hierarchical regression: (1) increased unconditional positive self-regard (UPSR) will be associated with increased self-esteem and decreased depression and anxiety; (2) increased UPSR will be associated with increased authentic living, life satisfaction, and intrinsic motivation and decreased self-alienation and accepting external influence; and (3) increased UPSR will be associated with decreased perceived parental conditional regard (PPCR). Expected study outcomes are summarized in Table 1.

The Predictor Variables

The first block of selected predictor variables included *emotional self-assessments*—that is, self-report measures of depression, anxiety, and self-esteem. Selection of these variables is in accordance with previous research supporting the validity of the UPSR construct and UPSR scale (Griffiths & Griffiths, 2013; Patterson & Joseph, 2006). For example, the Rosenberg Self-Esteem Scale was used to assess construct validity of the UPSR Scale by Patterson and Joseph (2006) and the Generalized Anxiety Disorder Scale and Patient Health Questionnaire have been used to test the UPSR's divergent validity by Griffiths and Griffiths (2013). Moreover, selected variables are theoretically consistent with the person-centered model, which not only identifies self-esteem as being essential to psychological growth (Mruk, 2008; Rogers, 1961), but also suggests increased UPSR to be associated with increased self-esteem and decreased anxiety and depression (Rogers, 1959). For example, research conducted by Patterson and Joseph (2006) found higher levels of UPSR to be associated with lower levels of depression and psychopathology. These variables were expected to account for some of the variance in conditional self-regard, prior to perceived parental conditional regard being entered in a later block. This order allows a more conservative test of the role of parental regard in predicting current self-regard.

Table 1
Predictors of UPSR—Assumptions

Model	Measure	Relation with UPSR
1	Patient Health Questionnaire-9	Negative
	Generalized Anxiety Disorder-7	Negative
	Rosenberg Self-Esteem	Positive
2	Authenticity Scale–Authentic Living	Positive
	Authenticity Scale–Accepting External Influence	Negative
	Authenticity Scale–Self-Alienation	Negative
	Students' Life Satisfaction Scale	Positive
	Aspiration Index–Intrinsic-Importance	Positive
	Aspiration Index–Intrinsic-Chances	Positive
3	Perceived Parental Conditional Regard–Prosocial	Negative
	Perceived Parental Conditional Regard–Sport	Negative
	Perceived Parental Conditional Regard–Emotional Control	Negative
	Perceived Parental Conditional Regard–Academic	Negative

Note. Unconditional positive self-regard.

The second block of selected predictor variables included *humanistic/positive psychology constructs*—that is, authenticity, life satisfaction, and aspirations. Selected variables were chosen to bridge the gap between humanistic psychology and positive psychology and add support for the theoretical links between the two areas (Patterson & Joseph, 2007; Proctor et al., 2016). From the positive psychology perspective, Rogers' concept of *congruence* has been operationalized as the tripartite construct *authenticity* (self-alienation, authentic living, and accepting external influence; Wood, Linley, Maltby, Baliousis, & Joseph, 2008). As noted, from the perspective of the person-centered model, the fully functioning person would possess congruence—"an accurate matching of experience and awareness" (Rogers, 1961, p. 339). Moreover, research has demonstrated authenticity to be positively associated with life satisfaction and self-esteem (Wood et al., 2008), which is theoretically consistent with Maslow's (1964) linking of self-esteem to authenticity and self-actualization (Mruk, 2008). This research also suggests, that fully functioning individuals move toward intrinsic motivation and experience greater well-being and self-actualization (Kasser & Ryan, 1993, 1996; Kasser, Ryan, Zax, & Sameroff, 1995).

The third block of selected predictor variables included the four domains of *perceived parental conditional regard*—that is, emotional control, prosocial behavior, academics, and sport. As discussed, research has demonstrated PPCR to be associated with a host of negative psychological outcomes (Assor & Roth, 2007; Assor et al., 2004). Important for this research, PPCR has also been demonstrated to negatively impact authenticity and ability to develop a true sense of self (Harter et al., 1996). Overall, research suggests although PPCR generally establishes the desired outcome, it is associated with negative affective consequences, such as shame after failure, guilt, fluctuations in self-esteem, poor/maladaptive coping strategies, decreased well-being, and resentment toward parents.

Study Hypotheses

Hypothesis 1: Emotional self-assessments (i.e., depression, anxiety, and self-esteem) can predict unconditional positive self-regard.

Hypothesis 2: Humanistic/positive psychology constructs (i.e., authenticity, life satisfaction, aspirations) can predict unconditional positive self-regard, and account for significant variability not accounted for in emotional self-assessments.

Hypothesis 3: Perceived parental conditional regard can predict unconditional positive self-regard, and accounts for significant variability not accounted for in emotional self-assessments and humanistic/positive psychology constructs.

Method

Participants

Participants were 355 young adults aged 16 to 19 (100 males, 255 females). The mean age of participants was 16.87 years ($SD = .819$).

Measures

UPSR Scale (Patterson & Joseph, 2006) is a 12-item self-report scale designed to measure the person-centered concept of unconditional positive self-regard. The scale is composed of two subscales of six items each: Self-Regard (e.g., "I truly like myself") and Conditionality of Positive Self-Regard (e.g., "Whether other people criticize me or praise

me makes no real difference to the way I feel about myself"). Respondents are required to respond to each item using a five-point Likert scale (scale anchors: *strongly disagree* to *strongly agree*). Subscale scores are calculated for the self-regard and conditionality of positive self-regard domains by totaling the six items representative of each subscale. Internal consistency reliability for the full-scale UPSR and the Self-Regard and oCnditionality subscales is acceptable, with alpha coefficients reported at .81, .89, and .66, respectively (Flanagan, Patterson, Hume, & Joseph, 2015; Griffiths & Griffiths, 2013; Patterson & Joseph, 2006). Convergent and discriminant validity of the scale has been supported by comparison with other measures (see Griffiths & Griffiths, 2013). Overall, research supports the use of the scale for the nonmedicalized evaluation of therapeutic change.

Patient Health Questionnaire-9 (PHQ; Kroenke, Spitzer, & Williams, 2001) is a nine-item self-report measure of depression. The PHQ-9 is a self-administered version of the Primary Care Evaluation of Medical Disorders Patient Health Questionnaire (PRIME-MD) diagnostic instrument for common mental disorders. Respondents are required to respond to each item (e.g., "Little interest or pleasure in doing things?") using a four-point Likert scale (scale anchors: *not at all* to *nearly every day*); higher scores reflect higher depression. Scores of 5, 10, 15, and 20 are taken as the cut off points for mild, moderate, moderately severe, and severe depression, respectively. Validity has been assessed against an independent structured mental health professional. When the score is 10 or greater, the PHQ-9 has a sensitivity of 88% and a specificity of 88% for major depression. The scale has good internal consistency, with Cronbach's alpha reported at .89 (Kroenke et al., 2001). Overall, the PHQ-9 is a psychometrically sound brief measure of depression.

Generalized Anxiety Disorder-7 (GAD; Spitzer, Kroenke, Williams, & Löwe, 2006) is a seven-item self-report measure of anxiety. The GAD-7 is a widely used measure to screen severity of anxiety in both clinical practice and research. Respondents are required to respond to each item (e.g., "Not being able to control worrying?") using a four-point Likert scale (scale anchors: *not at all* to *nearly every day*) to indicate to what extent they have been bothered by any of the listed problems over the last 2 weeks; higher scores reflect higher anxiety. Scores of 5, 10, and 15 are the cut off points for mild, moderate, and severe anxiety, respectively. When used as a screening tool, further evaluation is recommended when the score is 10 or greater. The scale has good internal consistency, with Cronbach's alpha reported at .92 (Kroenke, Spitzer, Williams, Monahan, & Löwe, 2007). Overall, the GAD-7 is a psychometrically sound brief measure of generalized anxiety and screening tool for common anxiety disorders.

Rosenberg Self-Esteem Scale (RSE; Rosenberg, 1965) is a 10-item self-report measure of self-esteem developed for use among adolescents. Respondents are required to respond to each item (e.g., "On the whole I am satisfied with myself") using a four-point Likert scale (*strongly disagree* to *strongly agree*); higher scores reflect higher self-esteem. Internal coefficient alphas ranging from .80 to .92 have been reported for the scale (e.g., Fleming & Courtney, 1984; Reynolds, 1988; Rosenberg, 1979; Sam, 2000), with a test–retest correlation for the total score reported at .82 (see Fleming & Courtney, 1984). Convergent validity for the scale has been demonstrated through negative correlations with psychological constructs associated with low self-regard, such as anxiety ($r = -.64$) and depression ($r = -.59$; see Fleming & Courtney, 1984). Discriminant validity has been demonstrated through correlations between the RSE and grade point average ($r = .10$), LOC ($r = .04$), and vocabulary ($r = -.06$; see Reynolds, 1988). Overall, the RSE is a psychometrically sound brief measure of global self-esteem.

Authenticity Scale (AS; Wood et al., 2008) is a 12-item scale designed to measure dispositional authenticity across three domains: (1) authentic living (e.g., "I think it is better to be yourself, than to be popular"); (2) accepting external influence (e.g., "I am strongly influenced by the opinions of others"); and (3) self-alienation (e.g., "I don't know how I really feel inside"). Respondents are required to respond to each item using a seven-point Likert scale (*does not describe me at all* to *describes me very well*). Subscale scores are calculated for the authentic living, accepting external influence, and self-alienation domains by totaling the four items representative of each subscale. The scale has been shown to have substantial discriminant validity from the Big Five personality traits, nonsignificant correlations with social desirability, and 2- and 4-week test—retest correlations ranging from $r = .78$ to .91 (Wood et al., 2008). Each subscale has also been shown to be strongly related to self-esteem and aspects of both subjective and psychological well-being (Wood et al., 2008). High scores on the Authentic Living subscale and low scores on the Accepting External Influence and Self-Alienation subscales indicate authenticity.

The Students' Life Satisfaction Scale (SLSS; Huebner, 1991b, 1991c) is a seven-item self-report scale which assesses global life satisfaction for students. Students are required to respond to each item (e.g., "I have a good life") using a six-point Likert scale (*strongly disagree* to *strongly agree*). Coefficient alphas have consistently been reported for this scale in the .70 to .80 range (Huebner, Suldo, & Valois, 2003), with 1- to 2-week test–retest reliability being reported at .74 (Huebner, 1991c). Overall, the SLSS has been shown to be a reliable measure of life satisfaction for students in elementary (e.g., Terry & Huebner, 1995; $r = .73$), middle (e.g., Huebner, 1991a; $r = .82$), and high (e.g., Dew & Huebner, 1994; $r = .86$) school (see Proctor, Linley, & Maltby, 2009a for a review). Evidence of the convergent and divergent validity of the SLSS has been provided through significant positive correlations with measures of self-esteem ($r = .65$) and extraversion ($r = .23$), and significant negative correlations with measures of anxiety ($r = -.51$), external locus of control (LOC; $r = -.48$), neuroticism ($r = -.46$; see Huebner, 1991a), depression ($r = -.57$), loneliness ($r = -.38$), and teacher ratings of classroom behavior problems ($r = -.35$; see Huebner & Alderman, 1993). Overall, research supports the SLSS as a psychometrically sound brief measure of global life satisfaction for students.

Aspiration Index (AI; Kasser & Ryan, 1993; Kasser et al., 1995) is a 14-item scale designed to measure aspirations across four value domains: (1) Self-Acceptance (e.g., "You will know and accept who you really are"); (2) Affiliation (e.g., "You will share your life with someone you love"); (3) Community Feeling (e.g., "You will work for the betterment of society"); and (4) Financial Success (e.g., "You will have a job that pays well"). Possible future events are rated on two dimensions: (1) the Importance that it will happen in the future and (2) the Chance it will happen in the future. Respondents are required to rate both the importance (*not at all* to *very important*) and chances (*very low* to *very high*) dimensions on a five-point Likert scale. Domain scores are obtained by computing the mean of items on a particular domain for each dimension (i.e., importance and chances). The relative importance and chances of intrinsic values were calculated by subtracting financial success from the computed average of the sum of self-acceptance, affiliation, and community feeling for each domain. The scale has acceptable internal consistency, with Cronbach's alpha reported ranging from .58 to .87 on the Importance dimension and .64 to .86 on the chances dimension (Kasser & Ryan, 1993, 1996). Overall, the AI is a psychometrically sound measure of aspirations across life domains.

Domain-Specific Perceptions of Parental Conditional Regard Scale (PPCR; Assor et al., 2004) is a 12-item self-report scale designed to measure perceptions of parental conditional regard (PCR) across four life domains (i.e., emotional control, prosocial behavior, academics, and sport). The full scale contains six items from each of the four domains and was developed for use in two studies by Assor et al. (2004). The scale used in this study includes the 12 items of the original scale, however perceptions with regards to mothers and fathers have been combined into single items (i.e., mother's/father's), resulting in three items pertaining to each of the four domains. Prosocial domain items refer to being helpful and considerate toward others (e.g., "I often feel that my mother/father would show me more affection or approval than she/he did if (or when) I was helpful and considerate towards others"). Academic domain items refer to success at school (e.g., "I often feel that I would lose my mother's/father's affection for me if I did not study hard enough at school"). Emotional control domain items refer to the suppression of fear, anger, and sadness (e.g., "I often feel that my mother's/father's affection for me depended on not showing anger"). Sport domain items refer to success in sports (e.g., "I often feel that my mother's/father's affection for me depended on my success in sports"). Subscale scores are calculated for the Prosocial, Sport, Emotional Control, and Academic domains by totaling the three items representative of each subscale. The original scale has good internal consistency, with Cronbach's alpha reported at .87 for the mother subscale and .83 for the father subscale (Assor et al., 2004). Overall, results of factor analyses support the appropriateness of examining PCR effects within the four domains (Assor et al., 2004).

Procedure

The study questionnaire battery was placed online via a weblink advertisement. The advertisement invited anyone aged at least 16 years of age interested in participating in psychological research examining well-being and personality to take part.[1] Participants were informed that no identifying information was collected, that participation would take less than 20 min, and that all participation was voluntary.[2]

The Internet was used to recruit participants and collect the data. A simple advertisement link ("Participants needed for new psychology research") for the study was placed on the homepage sidebar of a website providing information to students studying A-Level Psychology within the United Kingdom (http://www.holah.co.uk).[3] Upon accessing the questionnaire online, participants were required to indicate their consent before completing the battery of included measures, participation incentives were not provided.

[1] Age of consent in the United Kingdom is 16 years (BPS, 2014, pp. 16–17, 31–32).

[2] Data collection was conducted by the Carmel Proctor as an independent practitioner under the Code of Human Research Ethics (BPS, 2014; Section 10.3) and Code of Ethics and Conduct (BPS, 2018) of the British Psychological Society of which the Carmel Proctor is expected to abide by as a chartered psychologist. Ethics review or approval is not provided by the Society. Formal approval was not obtained prior to data collection, however adherence to the requirements of independent practitioners was strictly adhered to (BPS, 2014). A university ethics board provided ethical approval to participate for the Roger G. Tweed, who joined the project following data collection.

[3] A-Level is a secondary school–leaving qualification in the United Kingdom undertaken during Year 12 and Year 13 (ages 16 through 18).

Data Analysis

Overall, the recruitment procedure resulted in 465 individuals accessing the questionnaire. Forty-eight of these individuals were over the age of 19, two individuals did not indicate their gender, two individuals did not give their age, five individuals did not complete any of the included measures, and 42 dropped out before completing all the measures, resulting 366 individuals aged 16 to 19 years retained for data analysis.[4] Among these 366 retained surveys, missing items were imputed based on the computed average of the scale total score or relevant subscale score.

SPSS 19 was used for all analyses (IBM Corp., 2010). As recommended by Tabachnick and Fidell (2001), examination of the scoring distribution of all measures was conducted to identify outliers and to test for multivariate normality. All scale scores were first transformed into z scores and all those in excess of the ± 3.29 range were removed. This resulted in 11 individuals being excluded from further analysis. Skewness and kurtosis were all within acceptable limits ranging from $-.973$ to 1.784 for skewness and -1.304 to 2.065 for kurtosis signifying no significant departures from normality (Tabachnick & Fidell, 2001). Subsequently, a total of 355 individuals aged 16 to19 were retained for testing the hypotheses.

To protect the familywise error rate, we used blocks in the regression procedure. In particular, rather than entering all the predictors at the same time or entering them one at a time, we entered three blocks of variables, and then we planned to examine only beta values for individual variables in blocks that produced a significant change in R^2. Thus, the regression relied on three significance values as test values prior to examining individual beta values.

For context first order correlations were conducted on the variables to illustrate the assumed relationship (see Table 1) between them and demonstrate the need of conducting multiple regression to demonstrate the overall predictive value, the best predictors, and which account for unique variance.

Results

Descriptive statistics for the study variables are presented in Table 2.[5] Zero-order correlations among the variables are reported in a correlation matrix in Table 3. Results revealed most of the variables to have significant positive or negative correlations in the expected directions, except where noted. For example, UPSR was significantly negatively correlated with depression and anxiety and significantly positively correlated with self-esteem (i.e., emotional self-assessment block). Further, the PHQ-9 was significantly negatively correlated with the prosocial, emotional control, and academic domains of the PPCR.

Results of a correlational analysis revealed generally strong correlations within the emotional self-assessment scores, humanistic/positive psychology construct scores, and the perceived parental conditional regard scores whereas correlations of scores between these groups tended to be lower.

[4] Participants aged 16 to 19 retained in order to account for students turning 19 during Year 13.

[5] Reports of current status of mental health and well-being among youth in the United Kingdom are produced by Public Health England (Korkodilos, 2016) and Children's Society (2018).

Table 2
Descriptive Statistics for Study Variables

Measure	Minimum	Maximum	*M* (*SD*)	Reliability
Unconditional Positive Self-Regard	15.00	60.00	38.08 (7.71)	.822
Patient Health Questionnaire-9	0.00	27.00	11.36 (7.55)	.908
Generalized Anxiety Disorder-7	0.00	21.00	9.89 (6.34)	.909
Rosenberg Self-Esteem	10.00	40.00	25.61 (6.59)	.906
Authenticity Scale			54.29 (9.11)	.660
Authenticity Scale–Authentic Living	10.00	28.00	22.38 (3.73)	.719
Authenticity Scale–Accepting External Influence	4.00	28.00	16.60 (5.35)	.807
Authenticity Scale–Self-Alienation	4.00	28.00	15.31 (6.77)	.893
Students' Life Satisfaction Scale	7.00	47.00	27.27 (8.50)	.875
Aspiration Index–Intrinsic-Importance	−7.00	14.33	4.47 (2.71)	.761
Aspiration Index–Intrinsic-Chances	−3.33	14.33	4.10 (2.39)	.889
Perceived Parental Conditional Regard			39.36 (15.27)	.894
Perceived Parental Conditional Regard–Prosocial	3.00	21.00	12.58 (4.97)	.840
Perceived Parental Conditional Regard–Sports	3.00	17.00	4.95 (3.40)	.892
Perceived Parental Conditional Regard–Emotional Control	3.00	21.00	8.54 (5.29)	.875
Perceived Parental Conditional Regard–Academic	3.00	21.00	13.30 (6.41)	.956

Note. $N = 355$. Analyses based on total subscale scores for Authenticity Scale, Aspiration Index, and Perceived Parental Conditional Regard Scale to reflect domain specific differences.

To test Hypothesis 1, depression, anxiety, and self-esteem total scores were entered as predictors into a multiple regression with unconditional positive self-regard as the outcome variable. Based on our theoretical perspective, all predictors were expected to significantly predict unconditional positive self-regard so no statistical criteria for entry or deletion were used.

To test Hypothesis 2, authenticity, life satisfaction, and the relative importance and chances of intrinsic aspirations were entered as the second block of predictors into a multiple regression with unconditional positive self-regard as the outcome variable. Through this process we could assess whether they accounted for unique variability in unconditional positive self-regard after emotional self-assessment scores were considered. As before, based on our theoretical perspective, all predictors were expected to significantly predict unconditional positive self-regard so no statistical criteria for entry or deletion were used.

To test Hypothesis 3, perceived parental conditional regard was entered as a third block of predictors into a multiple regression with unconditional positive self-regard as the outcome variable, the emotional self-assessment total scores as Block 1 and the humanistic/positive psychology constructs total scores as Block 2.

The model summary Table 4 shows that each block of variables significantly added to the predictability of unconditional positive self-regard. As expected, Block 1 accounted for the most variance with Blocks 2 and 3, accounting for progressively less.

The regression results summarized in Table 5 provide more detailed information regarding which scores contribute the most to predicting unconditional positive self-regard.[6] Although all scores (with the exception of PPCR–Sport) had significant zero-

[6] A trimmed model was also calculated retaining only predictors significant in the original multivariate analysis to assure that similar results would be obtained when the less relevant predictors were removed. This analysis also supported the results.

Table 3
Correlation Matrix

Measure	1	2	3	4	5	6	7	8	9	10	11	12	13	14
1. Unconditional Positive Self-Regard		−.47	−.44	.73	.37	−.43	−.49	.56	−.18	$-.06^{ns}$	−.11*	$-.06^{ns}$	−.19	−.13*
2. Patient Health Questionnaire-9			$.79^{a}$	$-.70^{a}$	$-.17^{a}$	.17	.57	−.60	$-.01^{ns}$	$-.08^{ns}$	.13*	$.06^{ns}$	.34	.32
3. Generalized Anxiety Disorder-7				$-.63^{a}$	$-.07^{a,ns}$	.21	.47	−.50	$.07^{ns}$	$.01^{ns}$	.14	$.04^{ns}$	.29	.19
4. Rosenberg Self-Esteem					$.31^{a}$	−.39	−.65	.71	$-.06^{ns}$	$.06^{ns}$	−.13*	−.12*	−.34	−.30
5. Authenticity Scale (AS)–Authentic Living						$-.34^{b}$	$-.35^{b}$	$.32^{b}$	$.19^{b}$	$.22^{b}$	−.13*	−.19	−.16	−.17
6. AS–Accepting External Influence							$.35^{b}$	$-.22^{b}$	$.14^{b}$	$.07^{b,ns}$	.13*	$.07^{ns}$	.09	.20
7. AS–Self-Alienation								$-.57^{b}$	$-.03^{b,ns}$	−.12*	.15	.11*	$.28^{ns}$	.29
8. Students' Life Satisfaction Scale									$.07^{b,ns}$	.17	−.16	−.17	−.34	−.30
9. Aspiration Index (AI)–Intrinsic-Importance										.75	$-.08^{ns}$	−.19	−.15	−.16
10. AI–Intrinsic-Chances											$-.11^{c}$*	$-.19^{c}$	$-.25^{c}$	$-.19^{c}$
11. Perceived Parental Conditional Regard (PPCR)–Prosocial												$.19^{c}$	$.43^{c}$	$.54^{c}$
12. PPCR–Sport													$.37^{c}$	$.25^{c}$
13. PPCR–Emotional Control														$.59^{c}$
14. PPCR–Academic														

Note. $N = 355$. All values represent interblock measure and outcome correlations, unless otherwise indicated. All variables correlated at $p \leq .01$, unless otherwise indicated. *ns* = nonsignificant.
[a] Intermeasure correlations: Block 1. [b] Intermeasure correlations: Block 2. [c] Intermeasure correlations: Block 3.
* $p < .05$.

Table 4
Model Summary: Prediction of Unconditional Positive Self-Regard

Model	R^2 change	Significance F change
1	.530	<.001
2	.067	<.001
3	.011	.043

order correlations with UPSR, when considered together this was no longer the case. Instead the only the following significant predictors of were found:

Block 1. Self-esteem ($\beta = .775$, $p < .001$).

Block 2. Self-esteem ($\beta = .570$, $p < .001$), authentic living ($\beta = .160$, $p < .001$), accepting external influence ($\beta = -.117$, $p = .004$), life satisfaction ($\beta = .129$, $p = .013$), and importance of intrinsic aspirations ($\beta = -.157$, $p = .003$).

Block 3. Self-esteem ($\beta = .582$, $p < .001$), authentic living ($\beta = .155$, $p < .001$), accepting external influence ($\beta = -.132$, $p = .001$), life satisfaction ($\beta = .138$. $p = .008$), importance of intrinsic aspirations ($\beta = -.142$, $p = .007$), and academic

Table 5
Regression Coefficients: Prediction of Unconditional Positive Self-Regard

Model	Measure	t	β	Significance
1	Patient Health Questionnaire-9	1.40	.092	.162
	Generalized Anxiety Disorder-7	−0.41	−.025	.680
	Rosenberg Self-Esteem	14.90	.775	.000*
2	Patient Health Questionnaire	0.93	.060	.356
	Generalized Anxiety Disorder	−0.53	−.031	.594
	Rosenberg Self-Esteem	9.11	.570	.000*
	Authenticity Scale–Authentic Living	4.00	.160	.000*
	Authenticity Scale–Accepting External Influence	−2.91	−.117	.004*
	Authenticity Scale–Self-Alienation	0.54	.026	.593
	Students' Life Satisfaction Scale	2.49	.129	.013*
	Aspiration Index–Intrinsic-Importance	−2.98	−.157	.003*
	Aspiration Index–Intrinsic-Chances	−0.21	−.011	.835
3	Patient Health Questionnaire-9	0.26	.017	.798
	Generalized Anxiety Disorder-7	0.04	.002	.968
	Rosenberg Self-Esteem	9.32	.582	.000*
	Authenticity Scale–Authentic Living	4.00	.155	.000*
	Authenticity Scale–Accepting External Influence	−3.26	−.132	.001*
	Authenticity Scale–Self-Alienation	0.46	.022	.650
	Students' Life Satisfaction Scale	2.68	.138	.008*
	Aspiration Index–Intrinsic-Importance	−2.70	−.142	.007*
	Aspiration Index–Intrinsic-Chances	−0.06	−.003	.953
	Perceived Parental Conditional Regard–Prosocial	−1.66	−.069	.099
	Perceived Parental Conditional Regard–Sport	0.63	.024	.528
	Perceived Parental Conditional Regard–Emotional Control	0.10	.005	.923
	Perceived Parental Conditional Regard–Academic	2.70	.130	.007*

Note. $N = 355$.
* $p < .05$.

success ($\beta = .130$, $p = .007$). Approaching significance: prosocial behavior ($\beta = -.069$, $p = .099$).

Within each block, significant predictors were found supporting each of the hypotheses. That is, within each predictor block, the fact that some scores were not significant is not surprising. The strong zero-order correlations between the predictor measures were suggestive that not all would remain significant predictors of UPSR when considered together which indeed turned out to be the case. The theoretical basis as to why some measures were better predictors is explored in the discussion.

Discussion

This study set out to add to the extant literature bridging the humanistic and positive psychology fields through an investigation of Rogerian unconditional positive self-regard among young adults. Variables predictive of UPSR were selected based on the metatheoretical model supporting the Rogerian fully functioning individual. Using hierarchical regression, we set out to assess the unique variability in UPSR accounted for by three blocks of predictor variables (i.e., emotional self-assessments, humanistic/positive psychology constructs, and PPCR) consistent with the person-centered model.

Empirical work such as that included here may have value in persuading researchers regarding the value of humanistic theory, especially researchers not affiliated with humanistic psychology. Some positive psychologists may not recognize the extent of the overlap between positive psychology and humanistic psychology. Thus, efforts to show links and efforts to provide more validation evidence for humanistic concepts will continue to have value.

Results revealed that each block of variables added significantly to variance accounting for UPSR, with Block 1 accounting for the most variance and Blocks 2 and 3 progressively less. Based on our theoretical perspective, all emotional self-assessment predictors within Block 1 were expected to significantly predict UPSR (Hypothesis 1). Results revealed that of the emotional self-assessments, *self-esteem* was the only individual significant predictor of UPSR. This result is consistent with research indicating that self-esteem is considered conceptually similar to self-regard (Blascovich & Tomaka, 1991; Patterson & Joseph, 2006) and theoretical underpinnings demonstrating the importance of defining self-esteem by understanding how worthiness and competence stand in regard to one another (Mruk, 2006, 2008). As noted by Mruk,

> [s]elf-esteem does not depend on either worthiness or competence. Rather, it is the relationship between them, or how these two factors stand in regard to one another, that creates, self-esteem. On the one hand, competence is required. Yet, one cannot be good or successful at unworthy things, such as abusing one's self, lying for personal gain, hurting others, and so forth, and still acquire authentic, which is to say balanced, self-esteem. Instead, the type of competence that contributes to self-esteem involves acting in ways that are honorable, that dignify a human being when making a choice, interacting with another, or facing a challenge. (Mruk, 2008, p. 147)

Although both depression and anxiety had significant zero-order correlations with UPSR, when considered together with self-esteem they no longer added significant predictive value. Directionality of the relationship between depression and anxiety, however, was as expected and therefore supports previous research with regard to the

validity of the UPSR as a measure of overall psychological well-being (Griffiths & Griffiths, 2013; Patterson & Joseph, 2006).

As with the emotional self-assessment block, all humanistic/positive psychology constructs within Block 2 were expected to significantly predict UPSR, after Block 1 was considered (Hypothesis 2). Results revealed that of the humanistic/positive psychology constructs of Block 2, *authentic living* and *life satisfaction* were significant positive predictors of UPSR and *accepting external influence* and *importance of intrinsic motivation* to be significant negative predictors of UPSR. Directionality of the relationship between these variables and UPSR was as expected. Further, consistent with the person-centered model, both authentic living ("living in accordance with one's values and beliefs") and not accepting external influence ("the extent to which one accepts the influence of other people and the belief that one has to conform to the expectation of others") both significantly predicted UPSR, however self-alienation ("mismatch between the conscious awareness and actual experience" of the self) did not (Wood et al., 2008, p. 386). In keeping with the person-centered model and Rogers' conceptualization of the fully functioning individual, these results suggest that *fully functioning* young adults with high self-esteem and life satisfaction, who live life authentically and do not accept external influence, have increased UPSR. Moreover, increased UPSR is positively associated with being in touch with one's true self and not placing excessive value on achieving something different from one's current state, even if those goals are consistent with intrinsic motivation—suggesting that in keeping with the organismic valuing process, those with UPSR experience congruence and will move more naturally toward intrinsic aspirations (Patterson & Joseph, 2013; Rogers, 1959; Sheldon, Arndt, & Houser-Marko, 2003).

As with Blocks 1 and 2, all perceived parental conditional regard domains within Block 3 were expected to significantly predict UPSR after Block 1 and Block 2 were considered (Hypothesis 3). Results of Block 3 revealed perceived parental conditional regard of *academic success* at school as the only *positive* significant predictor of UPSR. Further, PPCR with regards to success at sports and emotional control were both nonsignificantly *positively* associated with UPSR. Directionality of the relationship between these PPCR domains and UPSR was *not* as expected. Whereas, as expected, PPCR with regards to prosocial behavior approached significance as a *negative* predictor of UPSR. These results suggest that perceived high expectations from parents practicing conditional regard can be associated with positive outcomes for young adults, particularly in relation to success at school. However, these results contrast earlier findings, which have suggested using parental conditional positive regard to promote academic achievement is associated with maladaptive self-feelings and coping (Assor & Tal, 2012).

In accordance with earlier findings, results demonstrated PPCR of prosocial behavior to be negatively associated with UPSR. As highlighted, PCR has been demonstrated to reliably establish the display of target behaviors, but at the risk of a host of associated negative affective consequences (see Assor et al., 2004). In contrast, however, consistent with the person-centered model, overall results of Block 3 suggest individuals with increased UPSR engage positively with others and therefore may be less negatively impacted by conditional regard of their intrinsically motivated behavior. That is, consistent with expectations, results of Block 3 indicated significant positive associations with self-esteem, life satisfaction, and authentic living, and significant negative associations with accepting external influence and the importance of intrinsic motivation, which may have acted as buffers against the negative impact of PCR. Further, taking into consideration findings presented by Roth (2008), these findings may add support to research suggesting the benefits of autonomy-supportive parenting on prosocial orientation—that

is, young adults who perceive their parents as understanding their perspective and providing meaningful rational interaction, choose to focus on the needs of others without any accompanying negative feelings.

Other findings consistent with these results is research by Diana Baumrind (1967; cf Suldo & Huebner, 2004), which suggests that the best outcomes for youth occur when parents can be warm and have high expectations. Another study consistent with this perspective would be the Project Follow-Through study (Englemann, Becker, Carnine, & Gersten, 1988). This study pitted three types of curriculum against each other in Grades 1 and 2. The first curriculum type focused on building self-esteem (i.e., teaching students that they are special and school is fun). The second curriculum type focused on developing higher thinking skills (i.e., analysis and problem solving). The third curriculum type focused on assuring that all children developed basic skills related to reading, writing, and arithmetic. The basic skills curriculums produced the best outcomes, not surprisingly for the basic skills test. The surprising outcome, however, was the finding that the same basic skills group also produced the best outcomes on the measure of problem-solving skills and the measure of self-esteem (cf. Evans, 1981).

The parenting literature suggests that parents will be most likely to have a positive impact if they can be warm and supportive. A parent who is solely demanding in conditionality of regard will not create a feeling of warmth in a child. Quite the contrary, conditional regard, specifically "love withdrawal" and/or the "push and pull" of affection/regard can have long term consequences on personality, resulting in the development of disorder. For example, children of the "waif mother" (and other presentations of borderline personality in mothers) need to create a false self to survive (see Lawson, 2000). Conditional regard creates an unstable environment where children are uncertain as to how they are going to be regarded; this push and pull of affection/regard creates anxiety, insecurity, and attachment issues. The repercussions of which are personality disorder and long-term relationship difficulties—most importantly, an unstable sense of self. Hence, we may consider that this research suggests that conditional regard with respect to academic success at school, ability to control one's emotions, and do well in sport can be beneficial, as long as it does not coincide with conditional regard of the self as it is experienced by others (i.e., prosocial behavior). Nonetheless, the analysis here suggests that there can be a significant positive relation between at least one type of parental conditional regard and positive outcomes. Because this contrasts with some prior findings, further research would be helpful to clarify the generality of this finding.

Limitations

Several limitations of this research are noteworthy. First, all data here were from young adult self-reports, and future research would benefit from paired analysis with parents or peers. Second, self-selection of participants was a major source of bias, in order to ensure samples are representative of the target population, random sampling procedures are required in future research. Moreover, additional research is required in which demographic variables, such as ethnicity or socioeconomic status, are considered. As with most parent research, this analysis did not account for any possible role of genetic factors that could explain the findings. Further, factor analysis of the original PCR scale showed clear distinction between mothers and fathers. For the purposes of this research a distinction was not made between mothers and fathers, but an overall "parental" conditional regard evaluation. Future research should seek to examine the differences between perceptions of PCR of both mothers and fathers. Given the changing norms of the nuclear

family comparisons with single parent families and other family make-ups would be insightful. Furthermore, recent research has demonstrated the benefit of examining both PCPR (parental conditional positive regard) and PCNR (parental conditional negative regard) as independent factors. Further research examining the independent impact of PCPR and PCNR could help clarify important links between perceived parental conditional regard and well-being.

Conclusion

The purpose of this study was to add to the extant literature bridging the humanistic and positive psychology fields. Results revealed self-esteem, authentic living, life satisfaction, and parental conditional regard of academic success at school to be significant *positive* predictors of unconditional positive self-regard and accepting external influence and importance of intrinsic aspirations to be significant *negative* predictors of unconditional positive self-regard. Overall, the findings support theory and research from both humanistic and positive psychology traditions.

In keeping with Roger's theory, fully functioning young adults with high self-esteem and life satisfaction, who live authentically, have increased unconditional positive self-regard and value being in touch with their true self—indicating congruence of self-structure and experience. Moreover, in support of the positive psychology literature, young adults high in particular strengths of character, such as self-esteem and life satisfaction, were able to buffer against the negative effects of parental conditional regard, at least in some domains of life. Indeed, building character strengths as a means of buffering the negative effects of stress and the development of psychological disorder, is imperative to the positive development of young people (Proctor et al., 2009b). Therefore, as evidenced, results further affirm the links between positive psychology and humanistic psychology.

References

Aknin, L. B., Barrington-Leigh, C. P., Dunn, E. W., Helliwell, J. F., Burns, J., Biswas-Diener, R., . . . Norton, M. I. (2013). Prosocial spending and well-being: Cross-cultural evidence for a psychological universal. *Journal of Personality and Social Psychology, 104,* 635–652. http://dx.doi.org/10.1037/a0031578

Assor, A., & Roth, G. (2007). The harmful effects of parental conditional regard. *Scientific Annals of the Psychological Society of Northern Greece, 5,* 17–34.

Assor, A., Roth, G., & Deci, E. L. (2004). The emotional costs of parents' conditional regard: A self-determination theory analysis. *Journal of Personality, 72,* 47–88. http://dx.doi.org/10.1111/j.0022-3506.2004.00256.x

Assor, A., & Tal, K. (2012). When parents' affection depends on child's achievement: Parental conditional positive regard, self-aggrandizement, shame and coping in adolescents. *Journal of Adolescence, 35,* 249–260. http://dx.doi.org/10.1016/j.adolescence.2011.10.004

Baumrind, D. (1967). Child care practices anteceding three patterns of preschool behavior. *Genetic Psychology Monographs, 75,* 43–88.

Blascovich, J., & Tomaka, J. (1991). Measures of self-esteem. In J. P. Robinson, P. R. Shaver, & L. S. Wrightsman (Eds.), *Measures of personality and social psychological attitudes* (pp. 115–160). San Diego, CA: Academic Press. http://dx.doi.org/10.1016/B978-0-12-590241-0.50008-3

BPS. (2014). *Code of Human Research Ethics*. Leicester, UK: The British Psychological Society. Retrieved from https://www.bps.org.uk/news-and-policy/bps-code-human-research-ethics-2nd-edition-2014

BPS. (2018). *Code of Ethics and Conduct*. Leicester, UK: The British Psychological Society. Retrieved from https://www.bps.org.uk/news-and-policy/bps-code-ethics-and-conduct

Bugental, J. F. T. (1987). *The art of the psychotherapist*. New York, NY: Norton.

Children's Society. (2018). *Good childhood report*. Retrieved from https://www.childrenssociety-.org.uk/sites/default/files/good_childhood_summary_2018.pdf

Churchill, S. D. (2014). At the crossroads of humanistic psychology and positive psychology. *The Humanistic Psychologist, 42,* 1–5. http://dx.doi.org/10.1080/08873267.2014.891902

Csikszentmihalyi, M. (1975). Play and intrinsic rewards. *Journal of Humanistic Psychology, 15,* 41–63. http://dx.doi.org/10.1177/002216787501500306

Csikszentmihalyi, M., & Nakamura, J. (2011). Positive psychology. In K. M. Sheldon, T. B. Kashdan, & M. F. Steger (Eds.), *Designing positive psychology: Taking stock and moving forward* (pp. 3–8). New York, NY: Oxford University Press. http://dx.doi.org/10.1093/acprof:oso/9780195373585.003.0001

DeRobertis, E. M. (2013). Humanistic psychology: Alive in the 21st century? *Journal of Humanistic Psychology, 53,* 419–437. http://dx.doi.org/10.1177/0022167812473369

Dew, T., & Huebner, E. S. (1994). Adolescents' perceived quality of life: An exploratory investigation. *Journal of School Psychology, 33,* 185–199. http://dx.doi.org/10.1016/0022-4405(94)90010-8

Englemann, S., Becker, W. C., Carnine, D., & Gersten, R. (1988). The direct instruction Follow Through model: Design and outcomes. *Education & Treatment of Children, 11,* 303–317. Retrieved from https://www.jstor.org/stable/42899079

Evans, J. H. (1981). *What have we learned from Follow Through? Implications for future R&D programs*. Washington, DC: National Institute of Education. (ERIC Document Reproduction Service No. ED244737)

Flanagan, S., Patterson, T. G., Hume, I. R., & Joseph, S. (2015). A longitudinal investigation of the relationship between unconditional positive self-regard and posttraumatic growth. *Person-Centered and Experiential Psychotherapies, 14,* 191–200. http://dx.doi.org/10.1080/14779757.2015.1047960

Fleming, J. S., & Courtney, B. E. (1984). The dimensionality of self-esteem: II. Hierarchical facet model for revised measurement scales. *Journal of Personality and Social Psychology, 46,* 404–421. http://dx.doi.org/10.1037/0022-3514.46.2.404

Franco, Z., Friedman, H., & Arons, M. (2008). Are qualitative methods always best for humanistic psychology research? A conversation on the epistemological divide between humanistic and positive psychology. *The Humanistic Psychologist, 36,* 159–203. http://dx.doi.org/10.1080/08873260802111242

Friedman, H. (2008). Humanistic and positive psychology: The methodological and epistemological divide. *The Humanistic Psychologist, 36,* 113–126. http://dx.doi.org/10.1080/08873260802111036

Frost, R., Marten, R., Lahart, C., & Rosenblate, R. (1990). The dimension of perfectionism. *Cognitive Therapy and Research, 14,* 449–468. http://dx.doi.org/10.1007/BF01172967

Gilman, R., & Ashby, J. S. (2003). A first study of perfectionism and multidimensional life satisfaction among adolescents. *The Journal of Early Adolescence, 23,* 218–235. http://dx.doi.org/10.1177/0272431603023002005

Griffiths, L. J., & Griffiths, C. A. (2013). Unconditional Positive Self-Regard (UPSR) and self-compassion, the internal consistency and convergent/divergent validity of Patterson & Joseph's UPSR Scale. *Open Journal of Medical Psychology, 2,* 168–174. http://dx.doi.org/10.4236/ojmp.2013.24026

Harter, S., Marold, D. B., Whitesell, N. R., & Cobbs, G. (1996). A model of the effects of perceived parent and peer support on adolescent false self behavior. *Child Development, 67,* 360–374. http://dx.doi.org/10.2307/1131819

Huebner, E. S. (1991a). Correlates of life satisfaction in children. *School Psychology Quarterly, 6,* 103–111. http://dx.doi.org/10.1037/h0088805

Huebner, E. S. (1991b). Further validation of the Students' Life Satisfaction Scale: The independence of satisfaction and affect ratings. *Journal of Psychoeducational Assessment, 9,* 363–368. http://dx.doi.org/10.1177/073428299100900408

Huebner, E. S. (1991c). Initial development of the Students' Life Satisfaction Scale. *School Psychology International, 12,* 231–240. http://dx.doi.org/10.1177/0143034391123010

Huebner, E. S., & Alderman, G. L. (1993). Convergent and discriminant validation of a children's life satisfaction scale: Its relationship to self- and teacher-reported psychological problems and school functioning. *Social Indicators Research, 30,* 71–82. http://dx.doi.org/10.1007/BF01080333

Huebner, E. S., Suldo, S. M., & Valois, R. F. (2003, March 12–13). *Psychometric properties of two brief measures of children's life satisfaction: The Students' Life Satisfaction Scale and the Brief Multidimensional Students' Life Satisfaction Scale*. Paper presented at the Indicators of Positive Development Conference, Washington, DC.

IBM Corp. (2010). *SPSS for Mac, Version 19.0*. Armonk, NY: Author. Retrieved from https://spss.software.informer.com/19.0/

Kasser, T., & Ryan, R. M. (1993). A dark side of the American dream: Correlates of financial success as a central life aspiration. *Journal of Personality and Social Psychology, 65,* 410–422. http://dx.doi.org/10.1037/0022-3514.65.2.410

Kasser, T., & Ryan, R. M. (1996). Further examining the American dream: Differential correlates of intrinsic and extrinsic goals. *Personality and Social Psychology Bulletin, 22,* 280–287. http://dx.doi.org/10.1177/0146167296223006

Kasser, T., Ryan, R. M., Zax, M., & Sameroff, A. J. (1995). The relations of maternal and social environments to late adolescents' materialistic and prosocial values. *Developmental Psychology, 31,* 907–914. http://dx.doi.org/10.1037/0012-1649.31.6.907

Kim, H., Doiron, K., Warren, M. A., & Donaldson, S. I. (2018). The international landscape of positive psychology research: A systematic review. *International Journal of Wellbeing, 8,* 50–70. http://dx.doi.org/10.5502/ijw.v8i1.651

Korkodilos, M. (2016). *The mental health of children and young people in England*. London, UK: Public Health England. Retrieved from https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/575632/Mental_health_of_children_in_England-.pdf

Kroenke, K., Spitzer, R. L., & Williams, J. B. (2001). The PHQ-9: Validity of a brief depression severity measure. *Journal of General Internal Medicine, 16,* 606–613. http://dx.doi.org/10.1046/j.1525-1497.2001.016009606.x

Kroenke, K., Spitzer, R. L., Williams, J. B. W., Monahan, P. O., & Löwe, B. (2007). Anxiety disorders in primary care: Prevalence, impairment, comorbidity, and detection. *Annals of Internal Medicine, 146,* 317–325. http://dx.doi.org/10.7326/0003-4819-146-5-200703060-00004

Lawson, C. A. (2000). *Understanding the borderline mother: Helping her children transcend the intense, unpredictable, and volatile relationship*. Oxford, UK: Rowman & Littlefield.

Linley, P. A., & Joseph, S. (Eds.). (2004). Applied positive psychology: A new perspective for professional practice. In *Positive psychology in practice. Hoboken,* NJ: Wiley. http://dx.doi.org/10.1002/9780470939338

Linley, P. A., Joseph, S., Harrington, S., & Wood, A. M. (2006). Positive psychology: Past, present, and (possible) future. *The Journal of Positive Psychology, 1,* 3–16. http://dx.doi.org/10.1080/17439760500372796

Maslow, A. H. (1954). *Motivation and personality*. New York, NY: Harper.

Maslow, A. H. (1964). *Religions, values, and peak experiences*. New York, NY: Viking.

Maslow, A. H. (1968). *Toward a psychology of being*. New York, NY: Wiley.

Maslow, A. H. (1971). *The farther reaches of human nature*. New York, NY: Arkana/Penguin Books.

May, R. (1975). *The courage to create*. New York, NY: Bantam Books.

Mendi, E., & Eldeklioglu, J. (2016). Parental conditional regard, subjective well-being and self-esteem: The mediating role of perfectionism. *Psychology, 7,* 1276–1295. http://dx.doi.org/10.4236/psych.2016.710130

Mruk, C. J. (2006). *Self-esteem research, theory, and practice: Toward a positive psychology of self-esteem* (3rd ed.). New York, NY: Springer.

Mruk, C. J. (2008). The psychology of self-esteem: A potential common ground for humanistic positive psychology and positivistic positive psychology. *The Humanistic Psychologist, 36,* 143–158. http://dx.doi.org/10.1080/08873260802111176

Patterson, T. G., & Joseph, S. (2006). Development of a self-report measure of unconditional positive self-regard. *Psychology and Psychotherapy: Theory, Research and Practice, 79,* 557–570. http://dx.doi.org/10.1348/147608305X89414

Patterson, T. G., & Joseph, S. (2007). Person-centered personality theory: Support from self-determination theory and positive psychology. *Journal of Humanistic Psychology, 47,* 117–139. http://dx.doi.org/10.1177/0022167806293008

Patterson, T. G., & Joseph, S. (2013). Unconditional positive self-regard. In M. E. Bernard (Ed.), *The strength of self-acceptance: Theory, practice and research* (pp. 93–105). New York, NY: Springer. http://dx.doi.org/10.1007/978-1-4614-6806-6_6

Peterson, C., & Seligman, M. E. P. (2004). *Character strengths and virtues: A classification and handbook*. Washington, DC: American Psychological Association.

Proctor, C., Linley, P. A., & Maltby, J. (2009a). Youth life satisfaction measures: A review. *The Journal of Positive Psychology, 4,* 128–144. http://dx.doi.org/10.1080/17439760802650816

Proctor, C., Linley, P. A., & Maltby, J. (2009b). Youth life satisfaction: A review of the literature. *Journal of Happiness Studies, 10,* 583–630. http://dx.doi.org/10.1007/s10902-008-9110-9

Proctor, C., Tweed, R., & Morris, D. (2016). The Rogerian fully functioning person: A positive psychology perspective. *Journal of Humanistic Psychology, 56,* 503–529. http://dx.doi.org/10.1177/0022167815605936

Reynolds, W. M. (1988). Measurement of academic self-concept in college students. *Journal of Personality Assessment, 52,* 223–240. http://dx.doi.org/10.1207/s15327752jpa5202_4

Rich, G. J. (2017). Positive psychology and humanistic psychology: Evil twins, sibling rivals, distant cousins, or something else? *Journal of Humanistic Psychology, 58,* 262–283. http://dx.doi.org/10.1177/0022167817698820

Robbins, B. D. (2008). What is the good life? Positive psychology and the renaissance of humanistic psychology. *The Humanistic Psychologist, 36,* 96–112. http://dx.doi.org/10.1080/08873260802110988

Robbins, B. D. (2015). Building bridges between humanistic and positive psychology. In S. Joseph (Ed.), *Positive psychology in practice: Promoting human flourishing in work, health, education, and everyday life* (pp. 31–45). Hoboken, NJ: Wiley. http://dx.doi.org/10.1002/9781118996874.ch3

Rogers, C. R. (1951). *Client-centered therapy*. Boston: Houghton Mifflin.

Rogers, C. R. (1959). A theory of therapy, personality, and interpersonal relationships as developed in the client-centered framework. In S. Koch (Ed.), *Psychology: A study of a science: Vol. 3. Formulations of the person and the social context* (pp. 184–256). New York, NY: McGraw-Hill.

Rogers, C. R. (1961). *On becoming a person: A therapist's view of psychotherapy*. London, UK: Constable.

Rosenberg, M. (1965). *Society and the adolescent self-image*. Princeton, NJ: Princeton University Press. http://dx.doi.org/10.1515/9781400876136

Rosenberg, M. (1979). *Conceiving the self*. New York, NY: Basic Books.

Roth, G. (2008). Perceived parental conditional regard and autonomy support as predictors of young adults' self- versus other-oriented prosocial tendencies. *Journal of Personality, 76,* 513–534. http://dx.doi.org/10.1111/j.1467-6494.2008.00494.x

Roth, G., & Assor, A. (2010). Parental conditional regards as a predictor of deficiencies in young children's capacities to respond to sad feelings. *Infant and Child Development, 19,* 465–477. http://dx.doi.org/10.1002/icd.676

Roth, G., Assor, A., Niemiec, C. P., Deci, E. L., & Ryan, R. M. (2009). The emotional and academic consequences of parental conditional regard: Comparing conditional positive regard, conditional negative regard, and autonomy support as parenting practices. *Developmental Psychology, 45,* 1119–1142. http://dx.doi.org/10.1037/a0015272

Ryff, C. D., & Singer, B. (1998). The contours of positive human health. *Psychological Inquiry, 9,* 1–28. http://dx.doi.org/10.1207/s15327965pli0901_1

Sam, D. L. (2000). Psychological adaptation of adolescents with immigrant backgrounds. *The Journal of Social Psychology, 140,* 5–25. http://dx.doi.org/10.1080/00224540009600442

Seligman, M. E. P., & Csikszentmihalyi, M. (2001). Positive psychology: An introduction. *American Psychologist, 56,* 89–90. http://dx.doi.org/10.1037/0003-066X.56.1.89

Sheldon, K. M., Arndt, J., & Houser-Marko, L. (2003). In search of the organismic valuing process: The human tendency to move towards beneficial goal choices. *Journal of Personality, 71,* 835–869. http://dx.doi.org/10.1111/1467-6494.7105006

Spitzer, R. L., Kroenke, K., Williams, J. B., & Löwe, B. (2006). A brief measure for assessing generalized anxiety disorder: The GAD-7. *Archives of Internal Medicine, 166,* 1092–1097. http://dx.doi.org/10.1001/archinte.166.10.1092

Suldo, S. M., & Huebner, E. S. (2004). The role of life satisfaction in the relationship between authoritative parenting dimensions and adolescent problem behavior. *Social Indicators Research, 66,* 165–195. http://dx.doi.org/10.1023/B:SOCI.0000007498.62080.1e

Tabachnick, B. G., & Fidell, L. S. (2001). *Using multivariate statistics* (4th ed.). Needham Heights, MA: Allyn & Bacon.

Terry, T., & Huebner, E. S. (1995). The relationship between self-concept and life satisfaction in children. *Social Indicators Research, 35,* 39–52. http://dx.doi.org/10.1007/BF01079237

Warmoth, A., Resnick, S., & Serlin, I. A. (2001). The humanistic psychology and positive psychology connection: Implications for psychotherapy. *Journal of Humanistic Psychology, 41,* 73–101. http://dx.doi.org/10.1177/0022167801411006

Wong, P. T. P. (2011a). Reclaiming positive psychology: A meaning-centered approach to sustainable growth and radical empiricism. *Journal of Humanistic Psychology, 51,* 408–412. http://dx.doi.org/10.1177/0022167811408729

Wong, P. T. P. (2011b). What is existential positive psychology? *International Journal of Existential Positive Psychology, 3,* 1–10. Retrieved from http://journal.existentialpsychology.org/index.php/ExPsy/article/view/166

Wood, A. M., Linley, P. A., Maltby, J., Baliousis, M., & Joseph, S. (2008). The authentic personality: A theoretical and empirical conceptualization and development of the Authenticity Scale. *Journal of Counseling Psychology, 55,* 385–399. http://dx.doi.org/10.1037/0022-0167.55.3.385

Author Note

Carmel Proctor received her PhD in Psychology from the University of Leicester, UK. She also has degrees from Simon Fraser University, the University of British Columbia, and Middlesex University. Carmel Proctor is a Chartered Psychologist with the British Psychological Society (BPS) and director of PPRC Ltd. Her interests are primarily in the areas of positive psychology, applied positive psychology, values, character, personality, existential psychology, and well-being. Carmel Proctor works as a psychologist and psychotherapist in Guernsey.

Roger G. Tweed received his PhD in Psychology from the University of British Columbia and is now a faculty member at Kwantlen Polytechnic University. Recently, Roger G. Tweed has been exploring the relevance of positive psychology for alleviation of social problems such as violence.

Daniel B. Morris has lived, learned, and worked in the three Canadian provinces of British Columbia, Alberta, and Ontario. He has degrees from the University of British Columbia, University of Waterloo, and Wilfrid Laurier University with specializations in educational and organizational psychology as well as measurement, evaluation, and research methods. His education and work in evaluation, primarily within the public safety, health, and education sectors, was essential in being one of the first 100 people to receive the Canadian Evaluation Society's credentialed evaluator designation in 2011.

Received August 24, 2019
Revision received November 17, 2019
Accepted January 4, 2020 ■