

**ROLE OF MENTALIZATION AND EPISTEMIC
TRUST IN LINKING ADOLESCENTS'
ATTACHMENT AND BORDERLINE
PERSONALITY FEATURES**



BY

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**DEPARTMENT OF APPLIED PSYCHOLOGY
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THESIS AND DEFENSE APPROVAL FORM

The undersigned certify that they have read the following thesis, examined the defense, are satisfied with the overall exam performance, and recommend the thesis to the Faculty of Social Studies for acceptance.

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Candidate of **Master of philosophy** at the National University of Modern Languages hereby declare that the thesis "**Role of Mentalization and Epistemic Trust in linking Adolescents' Attachment and Borderline Personality Features**" submitted by me in partial fulfillment of MPhil degree, is my original work, and has not been submitted or published earlier. I also solemnly declare that it shall not, in future, be submitted by me for obtaining any other degree from this or any other university or institution.

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ABSTRACT

Borderline personality disorder (BPD) is a complex mental health condition that typically emerges during adolescence, and while its exact causes remain unclear, research indicates that difficulties in attachment and impairments in mentalization may significantly contribute to the development of BPD features in youth. The main objective of the present study was to analyze the relationships between adolescents' parental attachment patterns, mentalization abilities, and epistemic trust, and how these factors play their role in the evolution of borderline personality features. The research sample consisted of 500 adolescents (boys=238, girls=262) aged 13-18 years old ($M=15.72$, $SD=1.45$ years). Responses were collected using convenient sampling from different public sector schools of Rawalpindi and Islamabad. In the first phase of the study the English version of questionnaires was translated using Brislin method and then pilot tested to check the understanding and appropriateness of these measures for Pakistani sample ($N=100$). Adolescent Anxiety and Avoidance Attachment Inventory (Moretti & Obsuth, 2009), Borderline Personality Feature Scale (BFPS-11; Sharp et al., 2014), The Mentalization Scale (Dimitrijevic et al., 2018) and Epistemic trust, Mistrust and Credulity Questionnaire (Saunders et al., 2021) were used to measure the study variables. Results indicated that positive correlation exists between anxious attachment of adolescents (both father and mother) and borderline personality features. Regression analysis revealed that epistemic trust and mentalization are the significant negative predictors of borderline personality features in adolescents. Mentalization and epistemic trusts emerged as the significant mediators. Fathers' and mothers' attachment anxiety was found to be significant for family type where adolescents in nuclear family type reported higher attachment anxiety whereas father attachment avoidance for adolescents' whose mother are working women is relatively higher than the mothers who are house wives. Girls scored higher than boys for

fathers' and mothers' attachment anxiety. The findings should be taken as a call to Pakistan's policymakers, clinicians, and researchers to develop proper screening and mentalization and trust-based management protocols for the early treatments and intervention for adolescents.

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DEDICATED

TO

Papa & Mama

May Allah always shower his blessings on them

Chapter 1

INTRODUCTION

There is a huge concern regarding the connection between adolescent attachment styles for clinical intervention with features of borderline personality disorder (BPD) and the main domains of mentalization and epistemic trust. Borderline personality disorder is a complex disorder that affects a person's emotions, interpersonal relationships, and impulse control starting from adolescence (American Psychiatric Association, 2013). These global states often consist of genetic, environment and psychological factors, thus, BPD is challenging and complex to diagnose or treat. Specially in adolescents, it is a crucial developmental stage that is specified with self-determination, independence and socio-emotional changes (Caissy, 1994; Eccles et al., 1993; Steinberg et al., 2006). It is vital to stress that adolescents' attachment with parents is one of the crucial psychological characteristics of their personality. Bowlby and Ainsworth formulated the theory of attachment which depict the long-term bonds between people. It is through these processes that the attachment adolescents have with their parents can actually dictate their behavior, mental health, and interactions with other people (Bowlby, 1988; Ainsworth, 1989).

The studies carried out in the last few years approached the issue of mentalization and epistemic trust as the factors influencing the emergence of BPD symptoms in adolescents. Mentalization is defined as the ability to attach meaning to thoughts and feelings in one's own self as well as in other people. This ability is impressive when it comes to interpersonal relationships as well as healthy management of one's emotions. Here, two central aspects of mentalization can be mentioned, where deficits may result in misunderstanding, misinterpretations of social signals, and difficulties in regulating affects typical for BPD patients

(Fonagy et al., 2016).

Epistemic trust is the readiness to rely on knowledge from other people. It stands as the key component or procedure of the social learning process or development. Negative or insecure pattern of attachment, which can be attributed to caregivers-rearing, can negatively impact the epistemic trust. Since inputs make sense if one can trust both, the information and the guidance of other people. A malfunction in both of these areas may interfere with the actualization of social relationships and the correct processing of stress. Epistemic trust serves as a major mechanism through which such perceptions can lead to the emergence and sustenance of BPD symptoms (Fonagy & Target,2007).

The purpose of the present research is to examine if and how mentalization and epistemic trust act as the mediator between attachment insecurity and overall presentation of borderline personality disorder in adolescents.

1.1 Rationale of the Study

Many previous researches have examined the basic four fundamental types of adolescent attachment and the potential connection to borderline personality features. However, the current research focuses on examining adolescents' avoidant and anxious attachment which will provide empirical link along with the theoretical link where literature on the mentioned remains limited.

Previous studies have looked at adolescents' attachment styles, the features characteristic of borderline personality, and the functioning of the mentalization process; however, only a limited amount of information is available regarding the potential mediating function of epistemic trust between the aforementioned constructs in adolescents. There is existing indigenous literature concerning adolescents particularly within the Pakistani context but to the

best of extant literature, no study has discussed both epistemic trust and mentalization as the mediators.

Based on the DSM-5 criteria, The people with borderline personality disorder may be described as having unstable interactions with others, mood swings, constant pervasive loneliness, and issues with attachment. In the absence of early adolescent intervention for these features, they worsen and add to the BPD characteristics. Relying on Bowlby's Attachment Theory, the research will stress the importance of the secure and durable attachments developed early in life as the key to the individual's health and will also help the practitioners to focus on psychoeducation and programs to eliminate these. Ironic is the fact that breaches or disturbances in these attachments can result to profound consequences on an individual's future growth. It is crucial to assess the specific patterns of adolescent's emotional and relational development focusing on the role of early attachment history and probable development of borderline personality features.

. Recruiting participants up to the age of 18 is reasonable because objective manifestations of the essential pathology that, if not addressed, presupposes a heightened probability of BPD upon reaching adulthood, and it can be easily recognized at this age.. That's why, if these features are not regulated during early adolescence, they become worse, and can be the reason for the BPD development.

1.2 The Statement of the Problem

Adolescence is the developmental stage that is characterized by major changes in terms of psychology, socialization and neural development. Essentially, there is a need to develop secure attachment relationships during this stage for optimum growth concerning emotions as well as social aspects.

Borderline Personality Disorder also known as BPD is a severe personality disorder that is associated with mood swings, poor self-image, poor interpersonal relationship, poor impulse control and self-harm behavior. Research suggest that the borderline personality features may be present in adolescents with the possibility of these features precipitating the full-blown disorder in adulthood (Crowell et al., 2009)

Mentalization, or the given subject's and other people's thoughts and feelings meaning making, is the crucial cognitive capacity that emerges within the context of the secure attachment. Mentalization can therefore be seen as intertwining strongly with epistemic trust which is defined as the ability to trust information relayed by others and to learn from them. Mentalization and epistemic trust are regarded as the primary deficits that account for most of the emerging relational issues in people with borderline personality disorder (Luyten et al., 2015)

Although, there is a theoretical rationale of the association between attachment, mentalization, trust, and BPD features, research in this area is quite limited, especially targeted for adolescents. Therefore, it is important in coming up with prevention and intervention measures to be used for this vulnerable group of people to understand more of how mentalization and trust intervene into the connection between attachment style and BPD features.

Hence, the current study intends to assess mentalization and epistemic trust, performing a concurrent mediating role in the relationship between adolescents' attachment and borderline

personality features. Also, it becomes essential to explore further how the attachment security or insecurity affects the emergence of borderline personality features among adolescents and to what extent the impaired mentalization and epistemic trust are involved in mediating this connection in the targeted population.

1.3 Research Objectives

1. To analyze the relationship between adolescents' attachment, borderline personality features, epistemic trust and mentalization.
2. To probe the mediating role of epistemic trust in relationship between adolescents' attachment and borderline personality features.
3. To probe the mediating role of mentalization in relationship between adolescents' attachment and borderline personality features.
4. To probe the effects of demographic variables (age, gender, family structure) on adolescents; attachment and borderline personality features.

1.4 Research Questions

Formulated research questions of the present study are mentioned below:

- What is the influence of adolescents' attachment with their parents on borderline personality disorder?
- How mentalization influences the adolescents' attachment with their parents on borderline personality features
- How epistemic trust influences the adolescents' attachment and borderline personality features?
- What is the role of adolescents' gender in terms of their attachment with their parents and how it effects their vulnerability to borderline personality disorder?

1.5 Hypotheses

Keeping in the view the literature for our current study and research questions following hypotheses were generated.

H1: There is positive association between adolescents' attachment with parent and borderline personality features.

H1a: There is positive correlation between adolescents' attachment avoidance with father and borderline personality features.

H1b: There is positive correlation between adolescents' attachment anxiety with father and borderline personality features.

H1c: There is positive correlation between adolescents' attachment avoidance with mother and borderline personality features.

H1d: There is positive correlation between adolescents' attachment anxiety with mother and borderline personality features.

H2: There is negative association between adolescents' attachment and epistemic trust.

H2a: There is negative correlation between adolescents' attachment avoidance with father and epistemic trust.

H2b: There is negative correlation between adolescents' attachment anxiety with father and epistemic trust.

H2c: There is negative correlation between adolescents' attachment avoidance with mother and epistemic trust.

H2d: There is negative correlation between adolescents' attachment anxiety with mother and epistemic trust.

H3: There is positive association between adolescents' attachment and mistrust.

H3a: There is positive correlation between adolescents' attachment avoidance with father and mistrust.

H3b: There is positive correlation between adolescents' attachment anxiety with father and mistrust.

H3c: There is positive correlation between adolescents' attachment avoidance with mother and mistrust.

H3d: There is positive correlation between adolescents' attachment anxiety with mother and mistrust.

H4: There is negative association between adolescents' attachment and credulity.

H4a: There is negative correlation between adolescents' attachment avoidance with father and credulity.

H4b: There is negative correlation between adolescents' attachment anxiety with father and credulity

H4c: There is negative correlation between adolescents' attachment avoidance with mother and credulity

H4d: There is negative correlation between adolescents' attachment anxiety with mother and credulity

H5: There is negative association between epistemic trust and borderline personality features.

H6: There is positive association between mistrust and borderline personality features in adolescents.

H7: There is negative association between credulity and borderline personality features in adolescents.

H8: There is negative association between adolescents' attachment (avoidant and anxious) and self-related mentalization.

H8a: There is negative correlation between adolescents' attachment avoidance with father and self-related mentalization.

H8b: There is negative correlation between adolescents' attachment anxiety with father and self-related mentalization.

H8c: There is negative correlation between adolescents' attachment avoidance with mother and self-related mentalization.

H8d: There is negative correlation between adolescents' attachment anxiety with mother and self-related mentalization.

H9: There is negative association between adolescents' attachment and other-related mentalization.

H9a: There is negative correlation between adolescents' attachment avoidance with father and other-related mentalization

H9b: There is negative correlation between adolescents' attachment anxiety with father and other-related mentalization

H9c: There is negative correlation between adolescents' attachment avoidance with mother and other-related mentalization

H9d: There is negative correlation between adolescents' attachment anxiety with mother and other-related mentalization

H10: There is negative association between adolescents' attachment and motivation to mentalize.

H10a: There is negative correlation between adolescents' attachment avoidance with father and motivation to mentalize.

H10b: There is negative correlation between adolescents' attachment anxiety with father and motivation to mentalize.

H10c: There is negative correlation between adolescents' attachment avoidance with mother and motivation to mentalize.

H10d: There is negative correlation between adolescents' attachment anxiety with mother and motivation to mentalize.

H11: There is negative association between adolescents' attachment and mentalization.

H11a: There is negative correlation between adolescents' attachment avoidance with father and mentalization.

H11b: There is negative correlation between adolescents' attachment anxiety with father and mentalization.

H11c: There is negative correlation between adolescents' attachment avoidance with mother and mentalization.

H11d: There is negative correlation between adolescents' attachment anxiety with mother and mentalization.

H12: There is negative association between self-related mentalization and borderline personality features in adolescents.

H13: There is negative association between other-related mentalization and borderline personality features in adolescents.

H14: There is negative association between motivation to mentalize and borderline personality features in adolescents.

H15: There is negative association between mentalization and borderline personality features in adolescents.

H16: Adolescents' attachment with their parents (i.e father's and mother's attachment avoidance and attachment anxiety) is a positive predictor of borderline personality features.

H17: Mentalization is a negative predictor of borderline personality features in adolescents.

H18: Epistemic trust is a negative predictor of borderline features in adolescents.

H19: Mistrust is a positive predictor of borderline personality features

H20: Credulity is a negative predictor of borderline personality features.

H21: Mentalization mediates the relationship between adolescents' attachment with their parents and borderline personality features.

H22: Epistemic trust mediates the relationship between adolescents' attachment with their parents and borderline personality features.

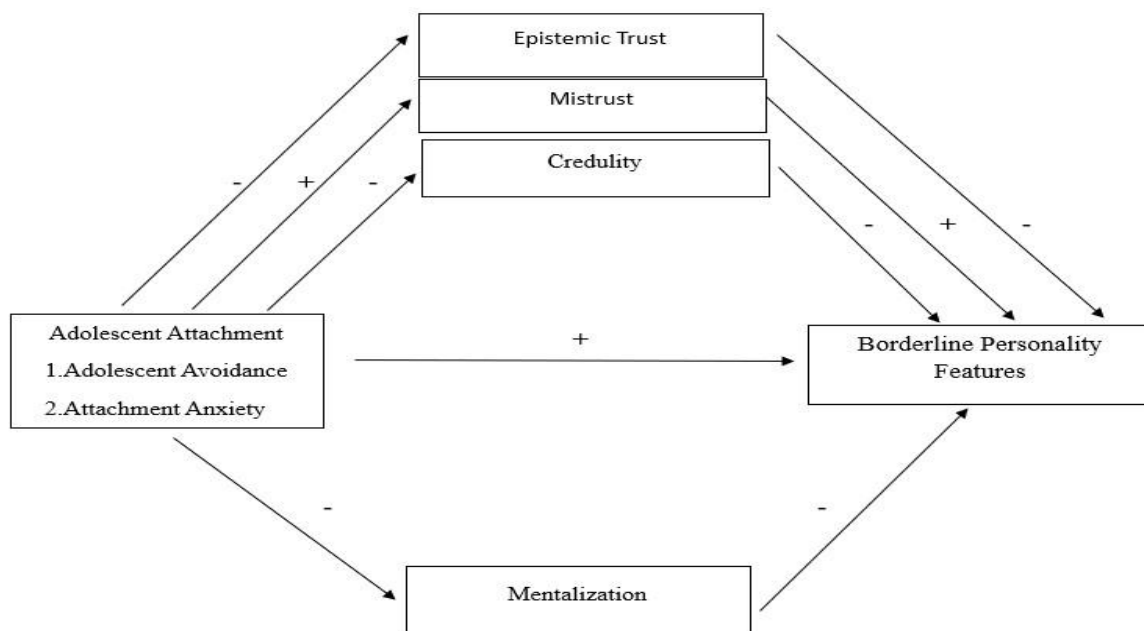
H23: Boys have more attachment issues leading them to BPD than girls.

1.6 Conceptual Framework

It is well known from literature that insecure attachments with parents would lead to elevated levels of Borderline Personality Features. Whereas secure attachment with the parents would lead to less features in an individual that might lead to borderline personality disorder. Further, mentalization will be used as a mediator to see how it further affects the link between adolescents' attachment and borderline personality features. In addition to that, epistemic trust will be used as a mediator to explore how it further effects the between adolescents' attachment and borderline personality features.

In the present research, data was collected through convenient sampling, and it was ensured that all the respondents had signed consent. After this they were handed a demographic sheet alongside the questionnaires to participants. This informed them that in responding to the

questionnaires there are no right or wrong answers. Respondents were assured that their information would be kept confidential so that they would be able to complete the questionnaires as needed without having to hide anything from their responses, and were informed that the information gathered is going to be used for research only. At the end of the survey, participants were thanked for their cooperation.



1.7 Operational definitions

1.7.1 Adolescent Attachment

Adolescent attachment is operationalized as the emotional bond or connection that is formed between an adolescent and their parents, which can significantly influence their social and emotional development (Moretti, 2004). It consists of 36 items with the sub-scales of attachment anxiety and attachment avoidance, each sub-scale consisted of 18 items, to be marked

separately for both father and mother. Higher score depicts higher attachment anxiety and avoidance.

1.7.2 Borderline Personality Features

It is operationalized as the criteria defined by DSM-V, 2013 “People with borderline features may experience unstable relationships, emotional swings, chronic feelings of emptiness, attachment issues, self-destructive thoughts and emotional dysregulation”. A shorter version of BPFs scale by Sharp and his colleagues in 2014 was used. This shorter version consists of 11 items. Higher scores predict higher tendencies for the disorder.

1.7.3 Mentalization

Mentalization as operationalized in the study refers to the ability to understand one's' own and others' mental state (Bateman & Fonagy 2007). The Mentalization Scale (MentS; Dimitrijević et al., 2018) was used. The scale consists of 3 subscales of Self-related mentalization, others-related mentalization and motivation to mentalize with a total of 28 items. Higher scores on mentalization depict one's better ability to mentalize.

1.7.4 Epistemic Trust

Epistemic trust refers to individual willingness to trust new information or communicated knowledge as trustworthy. In broader term the extent to which an individual believes information to be significant or trustworthy as told by others (Saunders et al.,2021). The study operationalized the epistemic trust on the score of Epistemic Trust, Mistrust and Credulity Questionnaire (ETMCQ). It is a 15-item scale with three distinct sub-scales of Trust, Mistrust and Credulity. Each subscale consisting of 5 items. Where higher scores on each subscales show high level of each construct respectively.

Chapter 2

LITERATURE REVIEW

2.1 Adolescents' Attachment

Attachment is defined by John Bowlby in 2008 as “The one specific and circumscribed aspect of the relationship that is between a child and caregiver that involves making the child safe, being loved and protected”. John Bowlby imagined connection as a peculiarity persevering "from the support to the grave". All through our lives, in the midst of misery, we look for physical or close to home vicinity to connection figures to assist us with having a good sense of reassurance and secure. The job of the connection figure is to act as a safe base for the kid, empowering them to investigate the outside world with the confirmation that they will be invited back and safeguarded by the parent, particularly when scared (Bowlby 1969, 1980). This is the baseline concept that Bowlby's theory is rooted on. Most of these attachments and the different attachment styles with different figures start right in the initial years when a baby is growing thus these attachments are not only important in the nourishment process of infants however these attachments have the tendencies to shape, mold or even alter the future aspects of the individual in various domains such as emotions, health, mentalization etc.

It is vital to stress that adolescents' attachment with parents is one of the crucial psychological characteristics of their personality. Bowlby and Ainsworth formulated the theory of attachment which depict the long-term bonds between people. It is through these processes that the attachment adolescents have with their parents can actually dictate their behavior, mental health, and interactions with other people (Ainsworth et al., 1978; Bowlby, 1969). Bowlby's Attachment Theory primarily focuses on the fact that how important, secure and consistent the attachment with the caregiver is in the very early years of life. As stated earlier, these

attachments have major leave marks on the future life of an individual. With reference to that, if there is any disruption or even a small inconsistency in these attachments during the early years, it can leave a drastic impact on the physical, emotional and mental well-being of that individual (Ainsworth, 1979; Bowlby, 1988).

Attachment theory and its concepts have received substantial interests in the field of mental health especially in understanding processes that beget the developing of BPD among adolescents (Hill et al., 2011). Attachment system has increased relevance in adolescents due to the importance of the formation of identity, the relationships with peer, the body gestures and development of autonomy at this time. It also marks physical changes and academic challenges. This theory states that the emotional and social development of adolescents are molded by the relationships with their caregivers. Every human being is hooked to form certain attachments with the people around him/her since the infancy period, and this attachment with other people often contributes in an individual's life as a survival strategy (Allen & Tan, 2016; Sroufe et al., 1979)

2.1.1 Parental Attachment

Attachment here refers to the affectionate bond which exist between a parent and the child mainly as a result of parental sensitivity to the child's signals (Ainsworth et al., 1978, p. 707). This attachment is important in the social emotional development of the child, since secure parental attachment is indicated by a parent's capacity to offer safety, consistency and care to the child . Such environment helps the child to develop feeling of security and worth (socio-emotional) as posited by Bowlby (1982). Relationship that was created because of secure attachment plays a crucial role in the child's potential to form connection and to regulate his/her affection throughout the lifespan (Cassidy & Shaver, 2008; Sroufe, 2005).

Some key aspects which evolve around the parental attachment are as follows:

Consistency and Responsiveness

It is established when parents make proper and timely responses to their child's stimuli (Ainsworth et al., 1978).

Emotional Availability

Oakley's (1980) study on deprivation and social class and Mayo Clinic's social support dependency also pointed out that parents who are accessible, responsive and involved tend to enable children to feel secure and confident (Bowlby, 1982).

Attachment Patterns

The variation of the quality of parental care results in several attachment types namely, secure attachment, attachment anxiety, attachment avoidance as well as disorganized attachment (Main & Solomon, 1990).

Impact on Development

Attachment security helps the child to develop healthy emotional and social well-being whereas attachment insecurity experience hampers the mastery of these inter-personal issues and feelings (Sroufe, 2005).

2.1.2 Types of attachment

Bartholomew and Horowitz (1991) have significantly molded our knowledge of how people form relationships based on their internal working models of self and others with the four-category model of attachment styles. This theory states that two major dimensions, anxiety (showing negative or positive views of one's self) and avoidance (reflecting negative or positive attitudes toward other people), shape attachment styles. When these dimensions are combined

they result in four different styles of attachment: secure, preoccupied, dismissing and fearful (or disorganized). These four types were also validated by different research studies.

2.1.2.1 Secure attachment

Low anxiety and low avoidance typify this style. Securely attached individuals tend to have positive self-views and good opinions about others; they love comfortably (Mikulincer & Shaver, 2016)

2.1.2.2 Preoccupied Attachment

This is an integration of a high level of anxiety and a low level of avoidance known as the anxious-ambivalent attachment style. Generally, preoccupied attachment is usually characterized by negative attitudes towards the self, but positive attitudes about other people. They can easily relate with other people when looking forward to being accepted or being associated with but sometimes may develop a sort of dependency or excessive attachment (Cassidy & Shaver, 2016).

2.1.2.3 Dismissing Attachment

The self-concept of people in this category is positive while the concept they have of other people is negative. They avoid affection, do not overemphasize the importance of closeness, and may select loneliness in preference to receiving assistance from others (Fraley & Shaver, 2019).

2.1.2.4 Fearful Attachment

The anxious-ambivalent attachment or also known as the disorganized attachment will have both high anxiety and high avoidance. People with heightened fears and regard to attachment, have negative self and other appraisals. They are usually scared of being rejected and

feeling abandoned but at the same time, have trouble being close to people, thus having conflated relationship orientation (Dozier et al., 2021).

Research by Dagan et al., (2020) and Dagan et al., (2021) have looked at how the different levels of attachment relate to internalizing problem behaviors during adolescence in particular. Externalizing problems are those which make the child or youth act out and or exhibit issues which are manifested as maladjustment like aggression and defiance while internalizing problems are those that affect the child or youth in a personal and contained way like anxiety and depression.

Contradictory evidence has been provided by studies that aim at establishing the differing links between preoccupied/dismissing attachment styles as well as internalizing problems (Mikulincer & Shaver, 2007); however, the connection between fearful attachment style and internalizing problems is still vague. Fearful attachment is a complicated combination characterized by high anxiety level but also having high avoidance which can manifest differently across diverse contexts and developmental stages (Brennan et al., 1998).

Understanding these types of attachments concerning internalized issues during the adolescence stage helps in developing targeted interventions as well as support strategies. These were also well supported by other research studies (Bartholomew & Horowitz, 1991; Dozier et al., 2021; Fraley & Shaver, 2019).

2.1.2.5 Preoccupied Attachment and Internalizing Problems

When it comes to elimination of attachment style types, youth who have preoccupation attachments possess more internalizing problem behaviors than the one's who do not go through it. This can be attributed to the fact that they often drown in negative thoughts about past

relationships out of insecurity concerning their relationships (Bartholomew & Horowitz, 1991; Mikulincer & Shaver, 2016).

2.1.2.6 Dismissing Attachment and Internalizing Problems

On the other hand the evidence pointing to the possibility of having fewer internalizing problems in adolescents with dismissing attachment style might be found. They tend to break apart the close relationship and avoid acknowledging such bonds and that may assist them in preventing emotional suffering. (Fraley & Shaver, 2019).

2.1.2.7 Fearful Attachment and Internalizing Problems

Sometime the adolescents develop the content of the attachment styles, which are feared hence some challenges in handling their behaviors are noted to have effect on them. They experience severe internal conflicts regarding intimate relationships and, at the same time, fear of rejection. These conflicts may be linked with an elevation in suffering and the inability to establish stable relationships which may be the root cause of many other problems among. Then later these features might develop into Borderline Personality Features (Dozier et al.,2021; Mikulincer & Shaver, 2016).

2.2 Borderline Personality Features

Borderline personality disorder (BPD) is a psychiatric state that is, “linked with dysregulation of emotions, bad temper, fear of rejection, feelings of worthlessness, self-harm, and unstable relationships with others” (Stern,1938). It is prevalent in both psychiatric and general population. The most preferred diagnosis is personality disorders, out of which the most relevant to adolescents are found to have borderline personality disorder (BPD). Borderline Personality Disorder (BPD) has been referred to as a disorder of attachment (Fonagy & Gergely 2000). People with borderline features may experience unstable relationships, emotional swings,

chronic feelings of emptiness, attachment issues, self-destructive thoughts and emotional dysregulation (DSM- V, 2013). Detailed criteria for borderline personality disorder according to DSM-V is attached in appendix C.

Borderline Personality Disorder is a severe psychiatric disorder whereby an individual exhibits personality peculiarities and instabilities in emotions, impulsive nature and also in interpersonal relationships. One of the findings in the studies concerning the formation of BPD is that the attitudes of insecure attachment are among the most essential triggers for this disorder (Hill et al., 2011; Scott et al., 2013).

Unstable Relationships

People may not like to share physical and/ or emotional areas with others and thus relations consist of conflict and insecurity. They must have unstable and fluctuating cross meanings about people which they tend to over evaluate and underestimate (Chloe et al.,2019)

Emotional Swings

The state where individuals were unable to control their emotions to reach a stable state. They may have dramatic mood swings especially if they feel rejected or failed in whatever they are doing. It can give rise to extreme emotions which in turn may impact on their ways of relating to other people and their decision-making (Liana, 2024)

Chronic Feelings of Emptiness

Insecurities linger and one doesn't get a feeling that anything can make him/her happy or fulfilled. This all-encompassing feeling of void makes a person always look for something to fill the gap that they feel they have in their lives; and this in return leads to reckless kind of behavior (Sansone & Sansone, 2010).

Attachment Issues

People might have various problems in interpersonal relationships and that is why they face difficulties in building and maintaining relationships including fear of betrayal and abandonment, or history of abuse. This may cause either being overly dependent or complete social avoidance whereas social avoidance is not very healthy for any individual (Lyons-Ruth et al., 2006).

Self-Destructive Thoughts

Regarding stressful coping strategies, it must be stated that in cases of stress, people are ready to use self-destructive methods and even suicidal trials. Self-harm is considered as a way to help the person feel better when they are in excruciating emotional pain and as a way to have control over something (American Psychiatric Association (APA), 2013) (Linehan, 1993, Zanarini et al., 2010).

Emotional Dysregulation

It becomes very difficult to regulate emotions with respect to the social norms. People are likely to become easily agitated by small stressors, take a long time to be able to wind down, and are likely to get very aggressive (McMurran & Webb, 2008; Ridings et al., 2014). BPD is then considered to be a developmental disorder, in which signs of the disorder become observable during adolescence. Presently, it is considered that BPD is determined by the complex interaction of genetic, neurobiological, and environmental factors, including factors associated with family and peers' impact (Leichsenring et al., 2023). Thus, one cannot delineate a linear approach towards the development of BPD, and the issue must be viewed from the transactional standpoint. Responding to certain messages or reactions that they themselves have

provoked, people are as much the receivers of social stimuli as they act as they are the senders of those stimuli.

This disorder is of high incidence among both the psychiatric and general population. Some studies made among clinics in the United States indicate that the rate of occurrence of BPD in the general population is at 16 % with the lifetime prevalence being 5.9%. These surveys also indicate a higher prevalence in females compared to males, with a ratio of approximately 3:1. Nevertheless, the current research has started to investigate the correlation between borderline personality features and attachment pattern. Insecure or disorganized attachment styles in childhood lead the person to BPD in the adulthood.

2.3 Adolescents' Attachment with parents and Borderline Personality Features

It is very crucial to understand the relationship between attachment and borderline personality features. Research has also suggested that the parenting style that is a major attribute to borderline personality disorder in the adolescence (Hill et al., 2011; Kolbeck et al., 2019; Scott et al., 2013). Borderline adolescent children may have special problems in the establishment of the basic degree of separation-individuation from their parents, especially if their attachment history with their parents is problematic. While insecure forms of the attachment are related to poor regulation of emotions, and less positive outcomes in social relations, including the formation of healthy and satisfying relationships in the couples (Delgado, 2011).

Borderline personality disorder is an extreme psychiatric disorder whereby an individual exhibits personality peculiarities and instabilities in emotions, impulsive nature and also in interpersonal relationships. One of the findings in the studies concerning the formation of BPD is that the attitudes of insecure attachment are among the most essential triggers for this disorder (Hill et al., 2011; Scott et al., 2013). Since the experiences of attachment bonds are formed

during the adolescent and the personality disorders start to manifest, adolescence is an important developmental period.

her dual model is empirically supported, with findings indicating that adaptive parental attachment relationships are extremely uncommon among individuals diagnosed with BPD. Importantly, this theoretical description is also supported by clinical evidence (Gunderson, 1996; Holmes, 2004). Eastern European adoptees have very low rates of secure attachment if they were in the older cohort (Colman et al., 2009). People with BPD tend to have preoccupied or unresolved attachment styles which involve an anxiety of rejection, high levels of negativity and inability to manage one's emotions. If the above characteristics correspond to any kind of attachment pattern, they are considered to stem from the early childhood care givers relations including; inconsistent or insensitive care giving. (Hill et al., 2011).

Symptomatic processes in BPD depend on changes and the state of relationships in one's life (American Psychiatric and Association, 2013). Adolescence is specially important in regard to this issue because, as Allen and Manning (2007) pointed out the process of learning that how it regulates 'in and through' interactions that is a major developmental concern during this phase. Thus, the search for independence is considered to reawaken the unresolved attachment problems (Allen & Miga, 2010). Other development changes in the neurological development may even enhance the difficulties for psychologically or genetically vulnerable teenagers (Cicchetti & Rogosch, 2002). Sharp & Fonagy (2008) strongly argue that BPD is closely related to insecure attachment because at adolescence this kind of attachment affects the normative changes. Abnormal attachment gives rise to disorganized attachment; thus, Liotti (2014) stated that people with such qualities would be vulnerable to the acquiring borderline personality disorder.

2.3.1 Adolescents' attachment with mother and Borderline Personality Features

The findings of a study conducted by Nickell and his mates (2002) study aimed to determine and compare the correlation between parental bonding and attachment theory with borderline personality disorder characteristics among 393 participants who were 18 years of age. While the regression analysis confirmed that parental bonding and attachment scores, such as insecure attachment, anxious or ambivalent, and perceiving that one's mother cares for one less than others, were significantly related to borderline features controlling for gender, childhood adversity experiences, Axis I disorder, and non-borderline Axis II symptoms. Although not very high, these relations indicate that the constructs of bonding and attachment that should perhaps be taken into account in general. In their study, Carlson et al., (2009) tried to establish the relationship of disorganized attachment behavior in early childhood and later on manifestation of psychopathology. In context to their longitudinal study, they showed that difficulties at the level of attachment during childhood could predict BPD symptoms in adolescence

Other patterns of interaction that can be developed will be marked by anxious assignment or a comparable degree of autonomy and relatedness on both the parts, which, by definition, will generate new characteristics in the adolescent, notably of borderline personality (Jone's & Smith, 2016). The adolescents may become avoidant and anxious in character, and similarly in their relationships anxiety and fear are manifested (Brown & White, 2018). Positive and constant support is important as fluctuation in this aspect negatively impacts the adolescents' self-esteem (Miller et al., 2019). Hence, besides academic performance, adolescents' emotional problems may point to the father's temper as we see when one is quick to anger (Johnson, 2020). Enthusiasm and relaxation, or even their regular variations, affect mental health (Davis & Lee, 2021). One has to also bear in mind that stress stemming from intimacy influences the father's

attachment anxiety, which might negatively affect the maladjustment of the adolescent and result in borderline personality disorder (Clifton et al., 2017)

Relationship between attachment styles and physical and mental health have been tested in previous researches using Experiences in Close Relationships scale (Johnson & Lee, 2019; Smith et al., 2020). Studies show that anxiety and avoidance in attachment styles are major correlates with these health consequences (Brown & Davis, 2021). Second, Maternal care for the children specifically the mothers with avoidant attachment styles were found to show lesser interest and rejection which therefore deprives the child of the required care during sensitive developmental phases (Miller et al., 2022). On the other hand, the mothers with anxious attachment may have controlling behavior and give emotionally unstable interaction, and thus their adolescents become anxious (Jones & Roberts, 2023).

A study was conducted by Borelli and his fellows (Borelli et al., 2010) they explored how avoidant attachment with mothers affects the emotional regulation of children which is a key feature of borderline personality disorder. They found that adolescents in such circumstances showed a lot of difficulty in emotional regulation. They adopted coping strategies that used avoidance, which affected their ability to manage stress and to regulate their emotions hence leading them to develop disorder in long run.

Kobak & Sceery (1998) executed a study with adolescents where the researchers followed the subjects for years, measuring their attachment patterns and level of psychological distress. They on the basis of the same postulated that the adolescents with mothers who displayed avoidant attachment patterns were likely to develop internalizing symptoms which include anxiety and depression and externalizing such as defiance and aggression. These signs are considered to be the early signs to the more serious psychopathology that includes BPD. The

research works that were used in the review involved adolescents diagnosed with BPD, their mothers, and comparative controls. The study included evaluation of the participants' attachment styles as well as their ability to regulate emotions and general personality traits. Regarding the maternal rearing environment, avoidant attachment style emerged as the most probable parenting characteristic among the mothers of adolescents with BPD. In these adolescents' case, they reported significant problems in developing early and effective attachment and regulating emotional experiences, which are characteristic features of BPD (Steele et al., 1996).

Research pointed out offspring of mothers with BPD as one of the groups of children most at risk for of various undesirable consequences (Macfie, 2009). Starting as early as in 1985, a case study has highlighted that children of women having BPD lack emotional development and may have conditions such as low self-control, few problem-solving skills and show symptoms of social dysfunction such as becoming disorganized when faced with affective stimuli although it is argued that such stimuli play a role in the appreciation of various products and brands. This increases their vulnerability for the disorder and to top it up, the attachment issues that may arise make them more prone to develop the disorder. (Danti et al., 1985).

Overall literature has found out various distinctions between the offspring of mothers with BPD and comparison children, all implying that comparison children stand a chance of being affected in a negative way by their mothers with BPD. Consequences such as onset of dissatisfaction in mother infant bonding (Crandell et al., 2005), representation of their attachment figures (Macfie & Swan, 2009), increased rates of diagnosed psychiatric disorders and obsessive-compulsive and impulse control disorders (Weiss et al., 1996), and depressive symptoms (Abela & Skitch et al., 2005).

Anxious-preoccupied attachment with mothers is also elevated, occurring in 30-50% of adolescents with BPD versus 15-25% of non-clinical youth (Schramm et al., 2013). In a study of women with BPD, it was mainly found that early attachment relationships of the insecure preoccupied attachment .in a group of 12 patients with BPD (Patrick et al.,1994). It was found that early insecure attachment is a significant predictor for BPD (Nickell et al., 2002). Despite the various investigations, the cause of borderline personality disorder is still not quite well understood. Maternal avoidant attachment does not appear to have the same impact; thus, the inter-generational transmission of avoidant attachment from fathers to children may facilitate the emergence of borderline personality features through deficits in adolescents' emotional and relational functioning.

2.3.2Adolescents' attachment with fathers and Borderline Personality Features

A noteworthy study was done by Van Ijzendoorn (1995) to determine the intergenerational transmission of avoidant attachment pattern of fathers to children and the consequent effects on the psychological processes of adolescence. The matter identified revealed that men with avoidant attachment styles also initiated the same in their kids. These children demonstrated a lack of emotional expression, and had impaired abilities to attach to other people and had higher rates of personality disorder include. For various years, it has been established that insecure attachment especially avoidant one with the father contributes to the development of borderline personality features in adolescents. Barone et al., (2011) also conducted a longitudinal study which proved that the adolescents with BPD have disorganized attachments to parents, but the nonclinical participants have secure attachment to at least one parent. Insecure attachment especially the disorganized type has strong correlation with impaired affect regulation as well as the interpersonal relationship problems that define BPD.

Steele and Siever (2010) have established that the insecurity and avoidance regarding father can have significantly positive correlation with symptoms of BPD in teenage subject along with disorganized attachment to mother. The avoidant adolescents thus reported discomfort in close relationship while they preferred to be on their own. On a contrasting note, Lyons-Ruth and colleagues in 2013 affirmed through research that security with the non-clinical group was positively associated with high scores in fathers' security and negatively related to avoidance of mothers. This implies on protective factor that a secure relationship with the father has on non-development of the features of BPD.

It is also important to note that anxious attachment in fathers also cause clearly expressed borderline personality features in adolescents. Research was conducted by (Kerns et al., 2018). It elucidated that parental attachment anxiety is directly associated with adolescent psychopathology by influencing the process of emotional regulation. It was discovered that fathers' attachment anxiety explained a unique portion of the variance in adolescents' emotional dysregulation.

In a study, cross-sectional research design was used, and self-reports and clinical ratings of adolescents' attachment styles and the severity of their psychopathological symptoms were collected. The study demonstrated that adolescents with avoidant attachment with father were associated with higher scores in internalizing and externalizing problems. Generally, such issues are the forerunners of worsening psychopathology, and this is especially the case for BPD. An avoidant attachment pattern with fathers can affect adolescents and be the first step to the manifestation of various psycho-pathological symptoms and signs of borderline personality disorder (Schimmenti & Bifulco, 2015). The group of adolescents with BPD was characterized by higher fathers' avoidant attachment styles. These adolescents demonstrated major attachment

and regulation issues which are considered core symptoms of BPD. In the child's development avoidant attachment of fathers cause borderline personality disorder in adolescence through disruption of attachment and emotional regulation. (Fossati et al., 2005).

Barone et al. (2011) conducted a study and concluded that around 50-70% of adolescents with BPD have an insecure attachment style, compared to only 25-35% of non-clinical adolescents. Specifically, research indicates that disorganized attachment with both parents is present in 60-80% of adolescents with BPD, while only 15-20% of non-clinical adolescents exhibit this attachment pattern (Fonagy et al., 2000). Avoidant attachment, particularly with fathers, has been found in 40-60% of adolescents with BPD, compared to 10-20% of non-clinical adolescents (Jones et al., 2019).

2.4 Mentalization

Mentalization is described as how well an individual can admit and understand both his or her own state of mind as well as that of the surrounding people. With that, mentalization also includes a person knowing that these thoughts and emotions can elicit certain action to be performed by one's own self, as well as by other individuals (Fonagy et al., 2002).

2.4.1 Self- related Mentalization

Sensitivity to the causes and consequences of one's own thoughts and feelings. It involves thinking about one's self emotions, cognition, and purposes (Fonagy et al., 2002).

2.4.2 Other-Related Mentalization

It refers to reading other people and their thoughts and feelings. It is composed awareness of other people, including their opinions, emotions, and actions (Bateman & Fonagy, 2016).

2.4.3 Motivation to Mentalize

It can be defined as the willingness or the impulse to mentalize, which is the effort to identify meaning in self and others' actions, thoughts, and feelings. This motivation can therefore be affected by personal, social or other factors in the surrounding environment. (Luyten & Fonagy, 2015). The mentalization based therapy for BPD also known as the mentalizing approach, proposed by Peter Fonagy and his team. It forms an extensive model that explains all sorts of mental illnesses, mainly BPD. This theory is primarily concerned with the ability to comprehend both self as well as other people's stimuli, wants, emotions, and plans (Bateman & Fonagy, 2004)

Mentalization being a concept that evolves in the early childhood through the interaction between children and caregivers. Such interactions give the grounds for referring to the description and application of mental states (Fonagy et al., 2002). Among many other things that mentalization plays a pivotal role in, is borderline personality disorder which is presently seen as the emerging problem, specifically for the adolescents (Bateman & Fonagy, 2004). The mentalization ability is strengthened when the attachment relationships are secure and the caregivers are monitoring the child's needs and endeavors quite well. This entails 'mimic' where the caregivers copy the feelings that the child is exhibiting (Fonagy et al., 2002; Murray, 2014).

2.5 Mentalization in link with adolescents' attachment and borderline personality features

2.5.1 Secure Attachment

In this context, insight regarding secure attachment is attained from the recognition that adolescents who have attained secure attachment possess the ability to mentalize – a procedural skill that entails the efficiency of reflecting on one's emotions and propensities as well as the feelings and intentions of others (Fonagy et al., 2002). This makes mentalization ability better in adolescents' interpersonal relationships enabling them to moderate their relationships' ups and

downs and prevent the emergence of BPD (Bateman & Fonagy, 2004). Adolescents who engage in mentalization are able to acquaint themselves with their feelings as well as understand how to regulate them hence enhancing the quality of their relationships. They enhance their empathetic ability, understanding, and communicative relations and it helps them become better person in functioning emotionally; this enhances a safeguard for avoiding the development of BPD (Miller, 2011; Sroufe, 2005).

2.5.2 Insecure Attachment

Mentalization seems to be impaired in individuals with insecure attachment style as it can be defined as a process of interpreting signals and regulating one's own emotions, which does not come as a surprise. given that people with insecure attachment style are especially vulnerable to developing BPD (Fonagy et al., 2002). The adolescents with insecure attachment who struggle with ineffective mentalization skills show fluctuations in their emotional state, which is one of the BPD features mentioned above, described by Bateman & Fonagy (2004). That is why poor mentalization distorts interpersonal relations and leads to various conflicts and even antagonism which exacerbates feelings of abandonment and instability – the key symptoms of BPD (Miller, 2011; Sroufe, 2005). Fonagy and colleagues (1996) assumed that a child might acquire such a capability from having secure relationships with attentive caretakers focused on self-reflecting on a child's mental conditions without intruding. In their work, Bo and Kongerslev (2017) noted that BPD is a serious psychological disorder that affects adolescents; results in poor mentalization. When a parent, for some reason, does not view a child as a separate person who has thoughts in his/her head, this hinders the child's ability to mentalize. Thus, this raises the odds of psychopathology (Ensink et al., 2017), and borderline pathology (Bender & Skodol, 2007; Hopwood et al.,2013).

Research findings suggest that BPD is associated with impairments in some aspects of mentalization/reflective ability, where such terms seem to be equivalent in the published literature (Fonagy et al., 2002). Based on this theory mentalization is viewed to be learnt as a form of attachment security in that, secure attachment promotes development of reflective capacity and socio-emotional function (Bateman & Fonagy, 2004). In secure BPD, insecure attachment hinders the mentalization mechanisms, which probably leads to borderline A pathology (Miller, 2011). As a result, the research concerning the relationships between attachment, mentalization, and adolescent borderline features is limited (Sroufe, 2005). However, as stated earlier, Sharp and his colleagues (2017) aimed at examining whether mentalization mediated the link between attachment anxiety and borderline personality features and they have some evidence in this regard. From these analyses, it was found that higher BPD symptoms had higher levels of impairments in mentalization capacity, lower level of attachment security to both parents and peers, and higher level of general psychopathology.

Drawing from the mentalization theory, it is important that the ability to mentalize is acquired through the interaction between a child and his or her primary caregiver. It is only possible when this relationship is a secure one where the primary caregiver in a way responds to the child appropriately. This has to be done in a contingent manner (the child's affect that is picked up and responded to by the caregiver has to match in kind – fear is mirrored with fear and not happiness) and marked (the affect picked up and responded to by the caregiver has to be in the same ball park as the caregiver but distinctly different) (Beebe & Lachmann, 2002; Fonagy et al., 2002). Therefore, the capacity to mentalize and the formation of a secure attached relationship based on the caregiver's benevolent and truthful representation of the child as an

intentional being with regards to intentions, thoughts, and feelings, secures the normative development of the personalities of the child (Beebe & Lachmann, 2002; Fonagy et al., 2002)

Mentalization has been helpful in distant evolutionary past because it gave advantage in these fights to early humans to cooperate and consequently adapt better to their physical environment than other mammals. This is due to the fact that they can easily collaborate and form well-working kinship groups and vice versa, pressure and compete, when necessary, because of the struggle for existence among members of given groups differ not only in intensity, but in type as well conflict between the social groups was observed (Dunbar, 1998; Humphrey, 1983). Thus, mentalization is one of the vectors of human specificity and is an important element in acquired state of social cognition (Fonagy et al., 2017).

Indeed, adolescence may prove to be a beneficial time to assess mentalization in both adolescent and carers as it is a period that has formed a vulnerability and the onset of psychopathology. Consequently, one could hypothesize that aspects of the caregiver characteristics or their behaviour could act as potential or variable that may either amplify or diminish effects of the underlying vulnerability during the specified period (Bowlby, 1982; Crittenden, 1992). It was found out in recent research that there is always a difficult relationship of the adolescents with their caregivers and that mentalization is a mediator between the attachment and borderline features in adolescents (Fonagy et al., 2018).

Górska and Marszał underlined that mentalization is associated with emotional state due to real or imaginary bond with the person one mentalizes; and activation of the attachment system. Hence, the disorders connected with the ability of mentalization that involves others and the ability of mentalization that involves one's own mind are closely intertwined. Perspective taking enables change and control of one's affect. In any adversity, secure attachment strategies

and mentalization skills will make a child self-regulate or co-regulate by one's own or with other people thereby can build up a resilience.

Norup DA & Bo S (2019) conducted research to explore if mentalization acts as a potential mediator or not in the relationship among borderline personality features and psychopathology in context to adolescents. Upon exploring further in 109 adolescents it was found that mentalization mediated the relationship between borderline personality features and psychopathology with reference to adolescents.

2.6 Epistemic Trust

The epistemic trust is established depending on the attachment history in early childhood. It is defined as the capacity to make the usually implicit judgment of whether data provided by others or available in resources is credible and pertinent and in what situations it can be applied. Epistemic trust is formed when a child has developed a high level of attachment with the parent (Fonagy, 2014). Thus, if the caregiver is active and very responsive to the needs of the child, the child will believe in the information and the instructions given to them by the said caregiver (Ainsworth, Blehar et al., 1978). As the child grows this foundation of trust extends to other relationships and information sources such as school, television, computers and the other media. In adolescence, epistemic trust gains the central importance as people shift their information sources to peers, teachers, and other external members. Therefore, adolescents with high epistemic trust are in a better position to solve various social problems, make right decisions, and develop proper relationships (Danovitch & Keil, 2004; Harris, 2012; Mills, 2013).

2.6.1 Epistemic Mistrust

Epistemic mistrust is defined by a general menace or questioning about the information that people in that culture give out. Persons with high epistemic mistrust are often time reluctant

to accept any new information or knowledge because they always doubt the authenticity of the information and the source (Fonagy & Allison, 2014)

Epistemologically mistrust mainly stems from cases of either unreliable or even betrayal care giving. Disorganized attachment in particular may promote a low level of trust in other people (Liotti,2004). It is also transpired that when adolescents have high epistemic mistrust, they are likely to experience problems in interpersonal relationships to the extent that they are challenged to rely on or work with others. It also causes people to feel more lonely, emotionally labile and may raise features of BPD (Bateman & Fonagy, 2004).

2.6.2 Credulity

Credulity refers to an over-estimated predisposition to accept information that is provided by other people without questioning the accuracy of the information. Conformity traits are accepted without questioning the validity of the source or the content of the message as seen with intensely obedient people (Gullibility & Greenspan, 2009). This tendency results in the passive and vulnerable behavior since such people can easily be deceived or taken advantage of (Baumeister & Forgas, 2019). Credulity can be due to either the ‘permissive’ or the ‘authoritarian’ parent rearing style, where, on the one hand, the child never learns or is discouraged from questioning and evaluating information and, on the other hand, is often controlled and has thus less practice in the evaluation of information (Baumrind, 1991; Darling & Steinberg, 1993). Authorization and reliability could be the implications of being highly gullible; adolescents who are highly gullible will lack the critical faculties and hence could easily be swayed, controlled, misinformed, or exploited (Schaefer & Millman, 1981). They may also have problems distinguishing between a good source of information and a bad one (Forgas & Baumeister, 2019).

2.7 Mentalization and epistemic trust in link with adolescents' attachment and borderline personality features

Based on the idea of epistemic trust, the construct may indeed be a potential treatment target yet, it has rarely been investigated, especially with regard to personality pathology. However, some data that may indicate the theory's inaccuracy have been discovered; it has been found that people take new information without question and evaluate them for their truth and usefulness (Fonagy et al., 2017; Mercier & Sperber, 2011). If the increase in epistemic trust occurs within a pathological environment characterized by information, one unwished for side-effect would be that the increase in epistemic trust would be achieved at price in psychological health (Fonagy & Luyten, 2016). Fonagy and his colleagues proposed that mistrust may be associated with the levels of rigidity that manifest in personality pathology, including BPD. If people do not believe in the dependability and applicability of affairs in interpersonal communication, their doubts will result in the rigid maintenance of personal belief, bias, and conducts. However, other authors have reported clear evidence of epistemic vigilance particularly in the case of information that is self-relevant. More specifically, while accomplishing a series of tasks, children listened to their mother and strangers who made competing claims; securely attached children relied on their mother's information when the claims were reasonably credible, while also knowing when to accept their self-sufficiency when the claims were less credible. In contrast, there were the problems with epistemic trust observed in the insecurely attached children; the children classified as insecure-disorganized demonstrated the major setbacks in the evaluation of the claims and demonstrated the suspicion of the claims made by both their mothers and strangers (Corriveau et al., 2009; Fonagy et al., 2017). To the best of the current knowledge, there have been no empirical investigations of epistemic trust and

BPD in particular; however, there has been research on trust in the more general sense (Corriveau et al.,2009).

Mentalization theory has, in recent years, has incorporated another crucial dimension, which is the development of epistemic trust —its decision to take part in what is inter-personally transmitted as the highest-ranking form of credibility and most relative proposition massive details of how the social world operates and what are the best things to do within it (Allison & Fonagy, 2014) (Fonagy et al.,2015). Without sufficiently being mentalized by her caregiver, an infant's developing capacity for mentalization may become derailed. However, it is possible that another consequence of importance of mentalization is as an ostensive cue will be that child's naturally occurring epistemic vigilance will not be replaced by the development of epistemic trust that opens the children to adopting of the social knowledge that will practically guide him/her through the social environment. It is the social knowledge that everyone desires, but intel the communication is flatten and void of ambiguity, it is unsettling. It is community without aid. Following such encouragement, many symptoms of mental disorder can be derived from an ensuing lack of capacity to learn from others due to epistemic mistrust (Allison & Fonagy, 2014; Sharp et al., 2018).

It has been known that a failure in establishing epistemic trust leads to the personality disorders. It also lets us learn in an ever-changing social environment in the social and cultural context and allows individuals to benefit from it. It is suggested that deficits in epistemic trust may be a signal, and possible source, of emerging symptoms of BPD (Fonagy et al.,2015). Teenagers who were overly close with their friends or untrusting of the world around them were more likely to show features of BPD (Crick et al., 2005). If an increase in epistemic trust is observed to a context where information is distorted, then this would cost one's psychological

functioning a lot. It was suggested that chronic epistemic trust may be a leading factor that plays a pivotal role in personality pathology in general and BPD in particular (Bateman & Fonagy, 2012; Fonagy & Luyten, 2016).

High-quality, or secure, attachment promotes epistemic trust through positive care giving experiences that both directly teach clients how to trust the information processing abilities of others and indirectly enhance clients' mentalization skill (Fonagy et al., 1991; Steele & Steele, 2008). Instead, the kind of attachment called for disorganized care giving experiences impairs epistemic trust due to a simultaneously frightening and confusing way of bonding, which results to loss of mentalization, more doubt, and emotionally dysregulated experiences (Liotti, 2004; Main & Solomon, 1990). These disturbances of epistemic trust and mentalization play a crucial role in the development of unjustified and unstable self-perception as well as in stabilization of borderline personality features in adolescents, thus, underlining the necessity to pay special attention to the problematic family attachments in prevention and treatment activities. Consequently, by increasing attachment security, by making changes to mentalization, by building epistemic trust, all the features of the adolescent's borderline personality disorder can be reduced and more efficient psychological and social development of an adolescent can be addressed (Bateman & Fonagy, 2012; Sharp et al., 2011).

2.8 Literature in Pakistani Context

A study compared how the patterns of attachment influence mentalization and the emergence of BPD characteristics in Pakistani youth. This research employed cross-sectional research design and the participants were 460 high school students aged 13-18 years. The assessment of the attachment styles was conducted with the use of the IPPA, mentalization with the RFQ, and BPD traits using the BPFSC. From the study, it can be inferred that adolescents

with secure attachment pattern showed better mentalization and less of borderline personality. On the contrary, individuals with insecure attachment patterns demonstrated lower mentalization capacities and more pronounced borderline pathology. It was also discovered that a secure attachment relationship helped improve the mentalization hence had a protective effect on the emergence of borderline traits (Saeed et al.,2020).

There exists research that was conducted by Khan and his team mates. It investigated the role of attachment and mentalization in the development of borderline personality disorder features in Pakistani adolescents. The participants for the study were adolescents from various schools. Research also showed that the deficit in the mentalization abilities was also significantly correlated with the BPD features. In adolescents, the totals of the Reflective Functioning Scale scores were lower in youths with higher level of BPD traits. Mentalization was partly shown to mediate the link between attachment and BPD characteristics, which indicates that increasing mentalization can help lessen the effects of in insecurity of attachment on BPD formation (Khan et al., 2019).

A study explored the impact of different attachment styles on epistemic trust and the subsequent effects on psychological health in Pakistani adolescents. The researchers used a sample of middle and high school students and employ the Experiences in Close Relationships Scale (ECR) to measure attachment styles, the Epistemic Trust Scale (ETS) for assessing trust, and the Depression Anxiety Stress Scales (DASS) for psychological health. Adolescents with secure attachment styles had higher scores on the Epistemic Trust Scale (ETS), indicating higher levels of epistemic trust. They also showed better psychological health, with lower scores on the Depression Anxiety Stress Scales (DASS). Insecure attachment styles, particularly disorganized attachment, were associated with lower epistemic trust and higher levels of psychological

distress. These adolescents had higher DASS scores, indicating increased levels of depression, anxiety, and stress. The study found a strong positive correlation between secure attachment and psychological health, mediated by epistemic trust. (Ahmed et al., 2018).

Another noteworthy preliminary study aimed to analyze the correlation between attachment, mentalization and features of personality disorders, including borderline traits, observed in Pakistani adolescents. The sample consisted of both rural and urban adolescents. The use of the down regulated poor fit version of the Adult Attachment Interview was correlated with the number of BPD features in the adolescent participants. They were further examined and found to score higher than patients with personality disorder in the Personality Diagnostic Questionnaire-4 (PDQ-4). mod deficits in mentalization implemented a greater number of features characteristic of personality disorders. Lower scores of the Mentalization Questionnaire (MZQ) were revealed in adolescents with more severe features of personality disorder. The authors claimed that the approach might be helpful in decreasing the level of personality disorder features if the clients with such problems are encouraged to resolve attachment concerns and enhance the levels of mentalization abilities in adolescents (Rehman et al., 2017).

Chapter 3

Research Methodology

3.1 Introduction

The purpose of this current research was to establish the effects of adolescents' attachment on borderline personality features, and to determine the mediating roles of epistemic trust and mentalization. It is important to note that the current study relied on self-report data from the adolescent participants; therefore, the following standard assessment tools were employed: Attachment styles were assessed using permission and consent from the authors of these questionnaires, and the same applied to Borderline Personality features Scales ,Epistemic Trust, Mistrust and Credulity Scale, and Mentalization questionnaires were used to measure adolescents' features of borderline personality and epistemic trust and mentalization. The research methodology section is comprised of the research framework where the particular research is designed, the exact measuring instruments used to acquire details about the study variables, validation of the above outlined tools, sampling method, information on data collection process, population and statistical plan.

3.2 Research Design

The research comprised of two phases: pilot study and main study as first and second phases respectively while the method of cross-sectional design was used. The translated Urdu versions of the Adolescent Anxiety and Avoidance Attachment Inventory (Moretti & Obsuth,2009), Borderline Personality Feature (BPFS-11) (Sharp et al.,2014), The Mentalization Scale (Dimitrijević et al., 2018), Epistemic trust, Mistrust and Credulity Questionnaire (Saunders et al.,2021) were used in the research. All mentioned scales were used to carry out a pilot study proceeding with main study to examine hypotheses.

3.3 Phase I: Translation and Pilot study of the Instruments

3.3.1 Objectives:

The following are the objectives of this phase

1. To check the appropriateness of instrument on Adolescent Pakistani sample.
2. To translate the English version study measure into the targeted Urdu language.
3. Establishing the psychometric properties of Urdu versions and to check ease of understanding for the questionnaire.

3.3.2 Step I: Translation of the Instruments

The translation of the instruments was achieved using Brislin (1976) method. In the first step forward, translation was done to Urdu which was our targeted language. This process was achieved with the committee of experts which included 3 experts having doctorate degree along with English language expert and a psychology expert having doctorate degree as well. The experts thoroughly examined all the items of the scale and translated them keeping in mind not to change the main context of the construct also focusing the aspects of grammar reference to style and selection of words that was closest to the original version. In second step the translations were then later reviewed by the committee that included me, supervisor and two subject relevant teachers having expertise of the subject.

During the third step back, translation was achieved. The committee of experts including three English language experts, one Urdu language expert having doctorate degree and a degree relevant professor were given these Urdu translated versions. Contrary to the original version the draft was reviewed, compared and evaluated. The final draft was then made with the amendments where necessary. These translations were then later again reviewed by the committee that included me, supervisor and two subject relevant teachers having expertise of the

subject. After getting the final version of the instruments they were distributed among adolescents for the pilot testing and psychometric properties were achieved.

3.4 Step II: Pilot Testing of Urdu translated versions of study Measures

All scales and their subscales were administered on a precise scale which would be equivalent representation of the full population. About the role of pilot testing, it is necessary to say that the primary goal had aimed to reveal the psychometric properties, practicability as well as the usability of the instruments among the studied population.

3.5 Sample

A sample of 100 was chosen to conduct pilot study. Adolescents ($M=15.72$, $S.D=15.72$) from different schools and colleges of Rawalpindi and Islamabad with the age range of 13-18 years. Parental Consent was also taken for the participants taking part in the pilot study by explaining them the purpose of the study, while assuring them about the confidentiality of the identity and the obtained information.

Inclusion/Exclusion criteria.

Following inclusion/ exclusion criteria were kept in mind for sample.

1. No history of Psychopathology.
2. No parental divorce, death and separation.

\Table 3.1

Demographic Characteristics

Variables	<i>f (%)</i>	Mean (SD)
Age		15.72(15.72)
Gender		
Male	40 (40)	
Female	60 (60)	
Classes		

7 th and 8 th Grade	8 (8)
9 th Grade	31 (31)
10 th Grade	28 (28)
11 th Grade	13 (13)
12 th Grade	20 (20)
Fathers' Education	
Below Matric	16 (16)
Matric	21 (21)
FA/FSc	25 (25)
BA/BSc	21 (21)
Masters and above	17(17)
Mothers' Education	
Below Matric	21 (21)
Matric	25 (25)
FA/FSc	22 (22)
BA/BSc	22 (22)
Masters and above	10 (10)
Working Status of Mother	
House Wife	90 (90)
Working lady	10 (10)
Family Type	
Nuclear	67 (67)
Joint	33 (33)

f = Frequency, %= percentage

3.6 Instruments

Following measuring scales were administered in this phase

1. Adolescent Anxiety and Avoidance Attachment Inventory (Moretti & Obsuth, 2009)
2. Borderline Personality Feature Scale (BFPS-11) (Sharp et al., 2014)
3. The Mentalization Scale (Dimitrijevic et al., 2018)
4. Epistemic trust, Mistrust and Credulity Questionnaire (Saunders et a., 2021)

5. A detailed demographic sheet was also attached within to obtain some details of age, gender, birth order, number of siblings, family structure and members, education of participant and parent's education.

Adolescent Anxiety and Avoidance Attachment Inventory (AAAAI)

The Adolescent Anxiety and Avoidance Attachment Inventory (Moretti & Obsuth, 2009) is a 36-item measure of adolescent-parent attachment. It is adapted for the use of adolescent with the reference to their relationship with their parents or primary care givers. The scale consists of two subscales i.e attachment anxiety and attachment avoidance. Each statement is marked on a 7-point scale ranging from 1 "Strongly Disagree" to 7 "Strongly Agree". Few items of the scales are to be coded reversely. The measure possesses strong psychometric properties with the reliability of .88 and .90 for both the subscales.

Borderline Personality Feature Scale

The borderline personality Feature scale (Sharp et al., 2014) is used to assess the borderline personality features in the adolescents. The shorter version of the original scale adapted for adolescents consists of 11 items. The BPFS-11 includes indicators of Borderline personality such as affective instability, identity problems, and negative relationships. Each statement is marked on a 5-point scale ranging from 1 = *Not at all true*, 5 = *always true*. It is a valid self-report measures with reliability of .72.

The Mentalization Scale

The self-report measure for evaluating the ability of individuals to mentalize is called The Mentalization Scale (Dimitrijević et al., 2018). There are three parts of this instrument and they include Self-Related Mentalization (e.g. Sometimes when I'm angry, I don't know whether I'm sad or afraid), Other-Related Mentalization (e.g. When you ask me how I feel about

something, I can usually respond without any difficulty) and Motivation to Mentalize (e.g. Because we all depend on circumstances in life, it doesn't matter what other people intend or want.) They had acceptable internal consistencies of $\alpha = .74, .84$ and $.79$ respectively. These three subscales have ten, eight and ten items correspondingly. In order to assess mentalization a five-point Likert scale was applied with $1 = \text{Not at all true}$, $5 = \text{always true}$ with only few items that were reverse coded so that higher scores would be indicative of greater sophistication in terms of mentalizing capacity.

Epistemic Trust, Mistrust and Credulity Scale

Epistemic trust, Mistrust and Credulity Scale is a self-report measure used to assess the willingness of individuals to new information. This scale includes three subscales: Trust, Mistrust, Credulity. The trust subscale consists of 5 items (e.g., Sometimes having a conversation with people who have known me for a long time helps me develop new perspectives about myself), Mistrust (e.g I often feel that people do not understand what I want and need), Credulity(e.g people have told me that I am too easily influenced by others.) Each statement is marked on a 7-point scale ranging from $1 = \text{Strongly Disagree}$ to $7 = \text{Strongly Agree}$. The scale shows accepted reliability of $.82 - .85$.

3.6 Item Total Correlation

Table 3.2

Item-Total Correlation for Father's Attachment Anxiety Inventory (N=100)

Items	M	SD	Item total correlation	Items	M	SD	Item total correlation
AAAI_F8	2.77	1.62	.25	AAAI_F23	4.12	2.47	.36
AAAI_F7	3.82	1.96	.32	AAAI_F26	3.19	1.76	.19

AAAI_F15	4.18	1.88	.25	AAAI_F21	3.43	1.90	.13
AAAI_F19	3.68	1.88	.30	AAAI_F4	4.28	1.77	.53
AAAI_F12	3.92	1.85	.29	AAAI_F6	4.91	1.88	.55
AAAI_F2	4.29	2.12	.34	AAAI_F32	4.70	1.80	.39
AAAI_F9	3.07	2.02	.18	AAAI_F35	4.48	1.88	.20
AAAI_F17	4.38	1.99	.24	AAAI_F23	4.12	2.47	.36
AAAI_F29	5.24	1.92	.25	AAAI_F28	3.97	1.83	.25

Table 3.3

Item-Total Correlation for Father's Attachment Avoidance Inventory (N=100)

Items	M	SD	Item total correlation	Items	M	SD	Item total correlation
AAAI_F1	3.66	2.01	.26	AAAI_F20	4.15	1.89	.52
AAAI_F3	2.38	1.69	.47	AAAI_F18	2.84	1.60	.40
AAAI_F27	3.22	1.98	.39	AAAI_F30	3.33	1.78	.45
AAAI_F24	3.41	1.81	.55	AAAI_F31	3.12	1.86	.23
AAAI_F25	3.12	1.87	.60	AAAI_F14	2.78	1.62	.32
AAAI_F22	3.07	1.75	.28	AAAI_F16	3.58	1.86	.24
AAAI_F33	3.29	1.86	.35	AAAI_F36	2.86	1.68	.32
AAAI_F10	3.55	1.81	.29	AAAI_F11	2.61	1.60	.33
AAAI_F13	3.97	2.05	.51	AAAI_F5	3.59	1.88	.26

Table 3.4*Item-Total Correlation for Mother's Attachment Anxiety Inventory (N=100)*

Items	M	SD	Item Total Correlation	Items	M	SD	Item Total Correlation
AAAI_M12	4.32	1.95	.51	AAAI_M7	4.32	1.92	.34
AAAI_M15	3.97	2.06	.27	AAAI_M8	3.10	1.67	.29
AAAI_M19	3.95	1.97	.27	AAAI_M21	3.66	1.97	.22
AAAI_M2	4.52	2.04	.51	AAAI_M26	3.47	1.85	.24
AAAI_M9	3.77	1.97	.55	AAAI_M4	4.51	1.85	.55
AAAI_M34	3.34	1.81	.29	AAAI_M6	4.75	1.83	.34
AAAI_M17	4.34	1.93	.49	AAAI_M28	3.75	1.82	.35
AAAI_M29	4.69	2.02	.33	AAAI_M32	4.38	1.95	.38
AAAI_M23	4.04	1.77	.48	AAAI_M35	4.14	1.90	.32

Table 3.5*Item-Total Correlation for Mother's Avoidant Attachment Inventory (N=100)*

Items	M	SD	Item Total Correlation	Items	M	SD	Item Total Correlation
AAAI_M33	3.34	1.79	.42	AAAI_M1	3.71	2.17	.19
AAAI_M10	3.46	2.07	.25	AAAI_M3	2.61	1.79	.46
AAAI_M13	3.59	2.00	.40	AAAI_M27	3.12	1.97	.37
AAAI_M14	3.06	1.95	.22	AAAI_M24	3.36	2.06	.51
AAAI_M16	3.49	1.78	.28	AAAI_M25	2.97	1.77	.35
AAAI_M36	2.88	1.82	.39	AAAI_M20	3.30	1.94	.39
AAAI_M11	2.79	1.65	.36	AAAI_M18	3.01	1.65	.48
AAAI_M22	3.44	1.73	.38	AAAI_M30	4.75	1.98	.52
AAAI_M5	3.65	1.94	.25	AAAI_M31	3.03	1.80	.40

Table 3.6*Item-Total Correlation for Borderline Personality Features Scale (BFPS-11) (N=100)*

Items	M	SD	Item Total Correlation
BPF_1	2.80	1.26	.36
BPF_2	2.99	1.32	.27
BPF_3	3.43	1.39	.42
BPF_4	3.30	1.38	.46
BPF_5	3.05	1.24	.25
BPF_6	3.11	1.11	.34
BPF_7	3.25	1.32	.40
BPF_8	3.19	1.19	.34
BPF_9	3.11	1.39	.23
BPF_10	3.48	1.30	.35
BPF_11	2.93	1.38	.19

Table 3.7*Item-Total Correlation for The Mentalization Scale (N=100)*

Items	M	SD	Item Total Correlation	Items	M	SD	Item Total Correlation
MentS_1	3.34	1.12	.32	MentS_15	3.30	1.36	.38
MentS_2	3.41	1.26	.43	MentS_16	3.22	1.31	.48
MentS_3	3.45	1.17	.49	MentS_17	2.94	1.37	.22
MentS_4	3.45	1.25	.42	MentS_18	2.90	1.25	.17
MentS_5	3.41	1.17	.38	MentS_19	3.09	1.31	.41
MentS_6	3.36	1.25	.51	MentS_20	3.14	1.22	.49
MentS_7	3.16	1.26	.34	MentS_21	3.15	1.38	.31
MentS_8	3.26	1.29	.29	MentS_22	3.12	1.30	.43
MentS_9	3.12	1.31	.28	MentS_23	3.33	1.20	.44
MentS_10	3.24	1.23	.41	MentS_24	3.12	1.30	.39
MentS_11	3.33	1.18	.47	MentS_25	2.98	1.27	.30
MentS_12	3.43	1.24	.40	MentS_26	2.89	1.23	.34
MentS_13	3.26	1.40	.50	MentS_27	3.00	1.29	.18
MentS_14	3.01	1.21	.32	MentS_28	3.56	1.43	.51

Table 3.8*Item-Total Correlation for Epistemic Trust, Mistrust and Credulity Scale (Trust) (N=100)*

Items	M	SD	Item Total Correlation
ET_1	3.61	1.93	.30
ET_2	4.68	1.85	.36
ET_7	4.83	1.85	.51
ET_8	4.74	1.85	.36
ET_13	4.65	1.88	.24

Table 3.9*Item-Total Correlation for Epistemic Trust, Mistrust and Credulity Scale (Mistrust) (N=100)*

Items	M	SD	Item Total Correlation
ET_14	4.25	1.81	.50
ET_10	4.44	1.67	.40
ET_9	4.64	1.89	.41
ET_4	4.59	1.83	.50
ET_3	4.13	1.84	.52

Table 3.10*Item-Total Correlation for Epistemic Trust, Mistrust and Credulity Scale (Credulity) (N=100)*

Items	M	SD	Item Total Correlation
ET_15	4.68	1.71	.33
ET_11	3.95	1.63	.49
ET_12	3.60	1.72	.30
ET_5	3.51	1.80	.31

ET_6	4.07	1.74	.29
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3.7 Procedure

For the purpose of pilot study, data was collected through convenience sampling from the various schools and colleges of Rawalpindi and Islamabad. It was developed an initial format with the general information about the research and the objectives accompanied by the consent and the statement that all the data would be kept private. The individuals were also assured on the complete and absolute confidentiality of data handling and data analysis. Due to the formally differentiated demographic form along with all the scales, it took approximately 10-15 minutes to answer the questionnaire. Statistical data analysis of the data collected was done with the help of SPSS.

3.8 Data Analysis

SPSS-25 and Process macro 4.0 were used for data analysis in order to fulfill the hypotheses and objectives of this study. After data collection, normality assumptions were checked and data cleaning was done. Descriptive analysis was used to evaluate psychometric properties of the study variables such as kurtosis, skewness, standard deviation and mean. Cronbach's alpha was applied to determine the reliability and appropriateness of the measures in this study. For categorical variables, demographic data was presented as percentages and frequencies while means and standard deviations were calculated for continuous variables. Pearson's product-moment correlation analysis was employed with an aim of establishing relationships between the research variables. Regression analysis is used in predicting outcomes. In addition, moderation and mediation analyses were performed via SPSS macro 4.0. After collecting the data, normality assumptions were checked and data cleaning was performed.

Descriptive analysis was conducted on the study variables to assess their psychometric properties, including calculations of kurtosis, skewness, standard deviation, and mean

3.9 Results of Pilot testing

Table 3.11

Psychometric properties of the major study variables (N=100)

Scales	No. of Items	α	M	SD	Range		
					Actual	Potential	Skewness
Adolescents Attachment and Avoidance Inventory- Father	36						
Father's Attachment Avoidance	18	.77	58.53	14.90	29-100	18-126	1.95
Father's Attachment Anxiety	18	.69	71.38	13.67	24-98	18-126	-.59
Mother's Attachment Avoidance	18	.71	59.56	14.08	25-91	18-126	-.21
Mother's Attachment Anxiety	18	.76	73.02	15.32	26-112	18-126	-.52
Borderline Personality Features Scale	11	.68	34.64	7.04	19-47	11-55	-.37
The Mentalization Scale	28	.83	89.97	15.26	36-121	28-140	-.64
Epistemic Trust, Mistrust and Credulity Questionnaire	15						
Trust	5	.68	22.51	5.83	6-35	5-35	-.37
Mistrust	5	.71	22.05	6.18	8-35	5-35	.01
Credulity	5	.68	19.81	5.31	9-30	5-35	-.25

The Urdu Translated Scales' descriptive details, as well as their reliability and normality scores, are presented in Table 3.11. The internal consistency rate from the average to moderate rate is also shown in the table, which provides evidence regarding the relevance of these measures for the sample that was taken. The Cronbach's alpha reliability of the Adolescent Attachment Avoidance Inventory, Borderline Personality Features Scale, Mentalization and Epistemic Trust, and all sub-scales is greater than or equal to a value of $>.5$, indicating that the scales' reliability values are within an acceptable range. All of the values of skewness fall within the acceptable range of -2 to $+2$, (George & Mallery, 2010) which is sufficient evidence for the normal distribution.

Table 3.12*Correlation Matrix of Study Variables (N=100)*

No.	Scales	I.	II.	III.	IV.	V.	VI.	VII.	VIII.	IX.
i.	Avoidance-F	-								
ii.	Anxiety-F	-.114	-							
iii.	Avoidance-M	.417**	.022	-						
iv.	Anxiety-M	-.149	.662**	-.078	-					
v.	BPF	-.172	.295**	.081	.305**	-				
vi.	Mentalization	-.302**	.442**	-.201**	.533**	.543**	-			
vii.	Epistemic Trust	-.500**	.294**	-.433**	.387**	.321**	.631**	-		
viii.	Mistrust	-.302**	.275**	-.264**	.331**	.328**	.411**	.569**	-	
ix.	Credulity	-.236*	.317**	-.054	.379**	.363**	.396**	.487**	.398**	-
	Mean	58.53	71.38	59.56	73.02	34.64	89.97	22.51	22.05	19.81
	SD	14.90	13.67	14.08	15.32	7.04	15.26	5.83	6.18	5.31

Note: Avoidance-F= Father's Attachment Avoidance, Anxiety-F=Father's Attachment Anxiety, Avoidance-M= Mother's Attachment

Avoidance, Anxiety-M=Mother's Attachment Anxiety, BPF= Borderline Personality Features

* $p < 0.5$, ** $p < 0.01$

Table 3.12 represents correlation of Adolescents attachment with their parents. The father's attachment avoidance is negatively related to borderline features. The father's attachment anxiety is positively related to Borderline Features. Moreover, mother's attachment anxiety and attachment avoidance are also positively correlated with the Borderline Personality Features. father's and mother's attachment avoidance are negatively correlated to mentalization whereas, father's and mother's attachment anxiety are negatively correlated to mentalization. Borderline Personality Features are also positively correlated to mentalization. Epistemic trust is negatively correlated with father's attachment avoidance and mother's attachment avoidance. It is positively correlated to father's attachment anxiety and mother's attachment anxiety. Whereas, Epistemic trust is positively correlated to Borderline Personality Features and mentalization. Mistrust is negatively related to both father's and mother's attachment avoidance. Mistrust is also positively correlated to father's and mother's attachment anxiety, Borderline Personality Features and mentalization. Credulity is negatively correlated to father's attachment avoidance meanwhile, positively correlated to father's attachment anxiety. It is positively correlated with Borderline Personality Features, mentalization. It is also positively correlated to trust and mistrust.

3.10 Main Study

Main study was carried out to examine the current study's hypotheses.

3.10.1 Objectives

1. To investigate the relationship between adolescents' attachment, borderline personality features with the mediating role of epistemic trust and mentalization (self-related mentalization, other-related mentalization, motivation to mentalize).

2. To investigate the mediating role of epistemic trust in relationship between adolescents' attachment and borderline personality features.
3. To investigate the mediating role of mentalization in relationship between adolescents' attachment and borderline personality features.
4. To explore the effects of demographic variables (age, gender, family structure) on adolescents' attachment and borderline personality features.

3.10.2 Sample

Sample of present study consisted of 500 adolescents (boys=238, girls=262; M=15.72, SD=1.45) with age range of 13 to 19 years. The sample was selected by the technique of convenient sampling from the general populations by visiting different institutions of Rawalpindi and Islamabad. The details of the sample are attached below.

Table 3.13

Demographics of the study (N=500)

Variables	<i>f (%)</i>	Mean (SD)
Age		15.72(1.45)
Gender		
Boys	238 (47.6)	
Girls	262(52.4)	
Classes		
7 th Grade	14 (2.8)	
8 th Grade	46 (9.2)	
9 th Grade	150 (30)	
10 th Grade	163(32.6)	

11 th Grade	36(7.2)	
12 th Grade	91 (18.2)	
Birth Order		2.64(1.66)
Siblings		4.19(1.72)
Fathers' Education		
Below Matric	89 (17.8)	
Matric	132 (26.4)	
FA/FSc	89(17.8)	
BA/BSc	92 (18.4)	
Masters and above	98 (19.6)	
Mothers' Education		
Below Matric	110 (22)	
Matric	127 (25.4)	
FA/FSc	95 (19)	
BA/BSc	100 (20)	
Masters and above	68 (13.6)	
Working Status of Mother		
House Wife	440 (88)	
Working lady	60 (12)	
Family Type		
Nuclear	357 (71.4)	
Joint	143 (28.6)	
Total Family Members		6.95(2.72)

Chapter 4

ANALYSIS AND INTERPRETATION OF DATA

The purpose of the current research was to examine the effect of adolescents' attachment on BPF, as well as to examine the mediating roles between attachment and BPF: mentalization and epistemic trust. Pilot study was also carried out to check the validity and inter-translatability of somatic items within the settings of Pakistani population. Accomplishing the objectives, the following statistical procedures were applied and the data was analyzed through SPSS-25 software and the Process Macro 4. 0. The measures used in analysis of the study included; Descriptives, Independent sample t-test, Regression, Mediation, and correlation analysis. Independent samples t-tests were used to compare the mean differences in the demographic variables and between-subjects analysis of variance was used to investigate the relationship and consequences of adolescents' attachments to their parents regarding the presence of borderline personality features: Correlation and regression analysis were used. To test the mediating effects of epistemic trust, a mediation analysis was conducted, as was done for the analysis of the role of mentalization. Only significant results are reported, and all results are presented sequentially:

Table 4.1*Psychometric properties of the major study variables (N=500)*

Scales	No. of		M	SD	Range		Skewness
	Items	α			Actual	Potential	
Adolescents Attachment and Avoidance Inventory	36						
Father's Attachment Avoidance	18	.70	58.05	13.97	18-101	18-126	-.24
Father's Attachment Anxiety	18	.74	67.43	15.03	23-104	18-126	-.21
Mother's Attachment Avoidance	18	.73	57.16	14.08	18-100	18-126	-.35
Mother's Attachment Anxiety	18	.78	70.38	16.07	23-109	18-126	-.26
Borderline Personality Features Scale	11	.71	34.64	7.04	12-55	11-55	-.17
The Mentalization Scale	28	.78	89.35	14.13	28-132	28-140	-.45
Self-related Mentalization	8	.73	23.96	5.69	8-39	8-40	-.05
Others-related Mentalization	10	.72	33.19	7.03	10-49	10-50	-.14
Motivation to Mentalize	10	.72	32.20	5.94	10-48	10-50	.35
Epistemic Trust, Mistrust and Credulity Questionnaire	15						
Trust	5	.70	22.02	5.86	5-35	5-35	-.32
Mistrust	5	.66	22.24	6.20	7-35	5-35	.04
Credulity	5	.68	20.82	6.11	5-35	5-35	-.08

In Table 2 the descriptive details of the Urdu Translated Version of Scales are mentioned. The internal consistency rate from the average to moderate rate is also shown in the table, which provides evidence regarding the relevance of these measures for the sample that was taken. The Cronbach's alpha reliability of the Adolescent Attachment Avoidance Inventory, Borderline Personality Features Scale, Mentalization and Epistemic Trust, and all sub-scales is greater than or equal to a value of $>.5$, indicating that the scales' reliability values are within an acceptable range. All of the constructs' skewness and kurtosis values fall within the acceptable range of -2 to $+2$, which is sufficient evidence for the normal distribution

Table 4.2*Correlation Matrix of Study Variables (N=500)*

No.	Scales	I.	II.	III.	IV.	V	VI	VII	VIII	IX	X.	XI.	XII.
I.	Avoidance-F	-											
II.	Anxiety-F	-.05	-										
III.	Avoidance-M	.47**	.04	-									
IV.	Anxiety-M	-.07	.64**	-.01	-								
V.	BPF	-.02	.33**	.04	.38**	-							
VI.	Self -related Mentalization	-.10*	-.06	-.13**	-.07	-.24**	-						
VII.	Others related Mentalization	-.20**	.22**	-.19**	.30**	-.37**	.14**	-					
VIII	Motivation to Mentalize	-.18**	.27**	-.15**	.34**	-.47**	.24**	.66**	-				
IX.	Mentalization	-.22**	.25**	-.21**	.32**	-.48**	.57**	.83**	.85**	-			
X.	Epistemic trust	-.137**	-.099*	-.106*	-.048*	-.292**	.13**	.014	-.055	-.068	-		
XI.	Mistrust	-.08	.29**	-.17	.36**	.37**	-.15**	.43**	.43**	.45**	.06	-	
XII	Credulity	-.06*	.34**	-.04	.44	-.41**	-.09	.30**	.32**	.32**	.034	.47**	-
	Mean	58.05	67.43	57.16	70.38	33.87	23.96	33.19	32.20	89.35	22.05	22.24	20.82
	SD	13.97	15.03	14.92	16.07	7.53	5.69	7.03	5.94	14.13	5.91	6.20	6.11

Note: Avoidance-F= Father's Attachment Avoidance, Anxiety-F=Father's Attachment Anxiety, Avoidance-M= Mother's Attachment Avoidance, Anxiety-M=Mother's Attachment Anxiety, BPF= Borderline Personality Features

The table shows correlation between Father's and Mother's Avoidant and Anxious Attachment, Borderline Personality Features, Mentalization and its sub scales (Self -related Mentalization, Others related Mentalization, Motivation to Mentalize) and Epistemic trust, Mistrust and Credulity. There is positive correlation between mothers Attachment Avoidance and Borderline Personality Features. Mother's attachment anxiety is positively correlated to father's attachment anxiety. Borderline Personality Features are positively correlated with father attachment anxiety and mother attachment anxiety. Self -related mentalization is negatively related to father's and mother's attachment avoidance and Borderline Personality Features. Others -related mentalization is negatively related to father's and mother's attachment avoidance and Borderline personality features and positively related to father's and mother's attachment anxiety. Motivation to mentalize is negatively related to father's and mother's attachment avoidance and Borderline personality features. Whereas it is positively related to father's and mother's attachment anxiety. Mentalization is negatively related with father's attachment avoidance, mother's attachment avoidance and Borderline personality features. It is positively related to self-related mentalization, other- related mentalization and motivation to mentalize. Epistemic trust is negatively correlated with father's attachment avoidance and father's attachment anxiety and mother's attachment avoidance. Whereas, epistemic trust is negatively correlated to Borderline Personality Features and self- related mentalization. Mistrust is positively related to both father's and mother's attachment anxiety. Mistrust is also positively correlated to Borderline Personality Features, Self - related Mentalization, Other- related Mentalization and Motivation to Mentalize. Credulity is negatively correlated to father's attachment avoidance meanwhile, positively correlated to father's attachment anxiety. It is

positively correlated with Borderline Personality Features, other-related mentalization, motivation to mentalize and mentalization. It is also positively correlated to Mistrust.

Table 4.3

Simple linear Regression Analysis on Borderline Personality Features by Fathers Anxious Attachment Anxiety (N=500)

Borderline Personality Features							
Variables	<i>B</i>	<i>SE B</i>	β	<i>t</i>	<i>p</i>	<u>95% CI</u>	
						<i>LL</i>	<i>UL</i>
Father's Attachment Anxiety	.16	.02	.32	7.72	.000	.12	.20

$R = .32, R^2 = .10, (F = 59.67, p < .001)$

The table shows the influence of father's attachment anxiety on Borderline Personality Features. The value of R^2 shows that mother anxious attachment explains 10% variance in the Borderline Personality Features with significant F ratio ($F = 59.67, p < .001$). Findings revealed father's anxious attachment as the strong positive predictor ($B = .16, \beta = .32, p < .001$) of Borderline Personality Features implies a positive link with each one unit increase in corresponding to mother anxious attachment leads to increase of .16 units in Borderline Personality Features.

Table 4.4

Simple linear Regression Analysis on Borderline Personality Features by Mothers Attachment Anxiety (N=500)

Borderline Personality Features							
Variables	<i>B</i>	<i>SE B</i>	<i>B</i>	<i>t</i>	<i>p</i>	<u>95% CI</u>	
						<i>LL</i>	<i>UL</i>
Mother's Attachment Anxiety	.18	.01	.40	9.21	.000	.14	.21

$R = .38, R^2 = .14, (F = 84.96, p < .001)$

The table shows the influence of mother attachment anxiety on Borderline Personality Features. The value of R^2 shows that mother anxious attachment explains 14% variance in the Borderline Personality Features with F ratio to be significant ($F = 84.96, p < .001$). Findings revealed mother anxious attachment positively predicts ($B = .18, \beta = .40, p < .001$) Borderline Personality Features shows a positive link with each one unit increase in corresponding to mother's attachment anxiety leads to increase of .18 units in Borderline Personality Features.

Table 4.5

Multiple regression on Epistemic trust by Father Attachment Avoidance and Father Attachment Anxiety (N=500)

Epistemic Trust							
Variables	<i>B</i>	<i>SE B</i>	β	<i>t</i>	<i>p</i>	95% CI	
						<i>LL</i>	<i>UL</i>
Father Attachment Avoidance	-.06	.01	-.14	-3.21	.001	-.09	-.02
Father Attachment Anxiety	-.04	.01	-.10	-2.40	.017	-.07	-.00

$R = .17, R^2 = .030, (F = 7.66, p < .001)$

The table shows the influence of father's attachment avoidance and attachment anxiety on epistemic trust. The value of R^2 shows that father's attachment avoidance and attachment anxiety explicate 17% variance in the epistemic trust with F ratio to be significant ($F = 7.66, p < .001$). Findings revealed father's attachment avoidance negatively predicts ($B = -.06, \beta = -.14, p < .01$) epistemic trust shows a negative link with each one unit increase in corresponding to father's attachment avoidance leads to decrease of .06 units in epistemic trust. Further it was found that father's attachment anxiety negatively predicts ($B = -.04, \beta = -.10, p < .05$) epistemic

trust shows a negative link with each one unit increase in corresponding father's attachment anxiety leads to decrease of .04 units in epistemic trust.

Table 4.6

Multiple regression on Mistrust by Father Attachment Avoidance and Father Attachment Anxiety (N=500)

Mistrust							
Variables	B	SE B	β	t	P	95% CI	
						LL	UL
Father Attachment	-.03	.02	-.06	-1.56	.119	-.06	.00
Avoidance							
Father Attachment	.12	.02	.28	6.60	.000	.08	.15
Anxiety							

$R = .29, R^2 = .08, (F = 23.54, p < .001)$

The table shows the influence of father's attachment avoidance and attachment anxiety on mistrust. The value of R^2 shows that father's attachment avoidance and attachment anxiety explicate 29% variances in the mistrust with F ratio to be significant ($F = 23.54, p < .001$). Findings revealed father's attachment avoidance negatively predicts ($B = -.030, \beta = -.06, p > .05$) Mistrust shows a negative link with each one unit increase in corresponding to father's attachment avoidance leads to decrease of .03 units in mistrust. Further it was found that father's attachment anxiety positively predicts ($B = .12, \beta = .28, p < .001$). Mistrust shows a positive link

with each one unit increase in corresponding to father's attachment anxiety leads to increase of .12 units in mistrust

Table 4.7

Multiple regression on Credulity by Father Attachment Avoidance and Father Attachment Anxiety (N=500)

Credulity							
Variables	B	SE B	B	t	P	95% CI	
						LL	UL
Father Attachment	-.01	.01	-.04	-.96	.337	-.05	.01
Avoidance							
Father Attachment	.13	.01	.33	7.88	.000	.10	.16
Anxiety							

$R = .33, R^2 = .11, (F = 31.97), p < .001$

The table shows the influence of father attachment avoidance and attachment anxiety on Credulity. The value of R^2 shows that father's attachment avoidance and attachment anxiety explicate 11% variances in the credulity with F ratio to be significant ($F = 31.97, p < .001$). Findings revealed father's attachment avoidance as the negative predictor ($B = -.01, \beta = -.04, p > .05$) of credulity shows a negative link with each one unit increase in corresponding to father's attachment avoidance leads to decrease of .01 units in Credulity. Further it was found that father's attachment anxiety positively predicts ($B = .13, \beta = .33, p < .001$) credulity shows a

positive link with each one unit increase in corresponding to father's attachment anxiety leads to increase of .13 units in Mistrust.

Table 4.8

Simple Linear Regression Analysis on Self-related Mentalization by Father and Mother

Attachment Anxiety (N=500)

Variables	Self-related Mentalization					95% CI	
	B	SE B	β	t	p	LL	UL
Mother Attachment Anxiety	-.06	.01	-.17	-3.92	.000	-.098	-.033
	R = .17 R ² = .03 (F = 15.44, p<0.001)						
Mother Attachment Anxiety	-.07	.01	-.20	-4.54	.000	-.101	-.040
	R = .20, R ² = .04 (F = 20.67, p<0.001)						

The table represents the impact of father's and mother's attachment anxiety on self-related mentalization. The R² values shows that these values account for father's attachment anxiety explicate 3% variances in self-related mentalization with F ratio to be (F= 15.44, p<.001). Findings revealed father's attachment anxiety as the negative predictor (B =-.06, β = -.17, p<.001) of self-related mentalization shows a negative link with each one unit increase in corresponding to father's attachment anxiety leads to decrease of .06 units in self-related mentalization. The R² values shows that these values account for mother's attachment anxiety explicate 4% variances in self-related mentalization with F ratio to be (F= 20.67, p<.001) Further it was found that mother's attachment anxiety is the negative predictor (B =-.07, β = -.20, p<.001) of self-related

mentalization. Therefore, it explains a negative link with each one unit increase in corresponding to father's attachment anxiety leads to decrease of .07 units in self-related mentalization.

Table 4.9

Simple Linear Regression Analysis on Others-related Mentalization by Father and Mother Attachment Anxiety (N=500)

Variables	Others-related Mentalization						95% CI	
	B	SE B	β	T	p	95% CI		
						LL	UL	
Mother Attachment Anxiety	-.07	.02	-.15	-3.51	.000	-.120	-.034	
R = .16 R ² = .02 (F = 12.35, p<0.001)								
Mother Attachment Anxiety	-.07	.02	-.16	-3.75	.000	-.117	-.037	
R = .17 R ² = .03 (F = 14.10, p<0.001)								

The table represents the impact of father's and mother's attachment anxiety on other-related mentalization. The R² values shows that these values account for father's attachment anxiety explicate 2% variances in other-related mentalization with F ratio to be (F= 16.15, p<.001). Findings revealed father's attachment anxiety as the negative predictor (B =-.07, β = -.15, p<.001) of other-related mentalization shows a negative link with each one unit increase in corresponding to father's attachment anxiety leads to decrease of .07 units in other-related mentalization. The R² values shows that these values account for mother's attachment anxiety explicate 3% variances in other-related mentalization with F ratio to be (F= 14.10, p<.001) Further it was found that mother's attachment anxiety is the negative predictor (B =-.07, β = -.16,

$p < .001$) of other-related mentalization. Therefore, it explains a negative link with each one unit increase in corresponding to father's attachment anxiety leads to decrease of .07 units in other-related mentalization.

Table 4.10

Simple Linear Regression Analysis on Motivation to Mentalize by Father and Mother Attachment Anxiety (N=500)

Variables	Motivation to Mentalize						95% CI	
	B	SE B	β	t	p	95% CI		
						LL	UL	
Father Attachment Anxiety	-.07	.01	-.26	6.21	.000	.073	.140	
$R = .18$ $R^2 = .03$ (F = 16.15, $p < 0.001$)								
Mother Attachment Anxiety	-.07	.01	-.18	-4.16	.000	-.105	-.038	
$R = .18$ $R^2 = .03$ (F = 17.34, $p < 0.001$)								

The table represents the impact of father's and mother's attachment anxiety on motivation to mentalize. The R^2 values shows that these values account for father's attachment anxiety explicate 3% variances in motivation to mentalize with F ratio to be (F= 16.15, $p < .001$). Findings revealed father's attachment anxiety as the negative predictor (B =-.07, $\beta = -.26$, $p < .001$) of motivation to mentalize shows a negative link with each one unit increase in corresponding to father's attachment anxiety leads to decrease of .07 units in motivation to mentalize. The R^2 values shows that these values account for mother's attachment anxiety explicate 3% variances in motivation to mentalize with F ratio to be (F= 17.34, $p < .001$) Further it was found that mother's attachment anxiety is the negative predictor (B =-.07, $\beta = -.18$, $p < .001$) of motivation to

mentalize. Therefore, it explains a negative link with each one unit increase in corresponding to father's attachment anxiety leads to decrease of .07 units in motivation to mentalize

Table 4.11

Simple Linear Regression Analysis on Mentalization by Father and Mother Attachment Anxiety (N=500)

Variables	Mentalization					95% CI	
	B	SE B	β	t	p	LL	UL
Father Attachment Anxiety	-.21	.04	-.21	-4.83	.000	-.304	-.128
	R = .21 R ² = .05 (F = 23.34, p<0.01)						
Mother Attachment Anxiety	-.21	.04	-.22	-5.24	.000	-.301	-.137
	R = .23 R ² = .05 (F = 27.51, p<0.001)						

The table represents the impact of father's and mother's attachment anxiety on mentalization. The R² values shows that these values account for father's attachment anxiety explicate 5% variances in mentalization with F ratio to be (F= 23.34, p<.001). Findings revealed father's attachment anxiety as the negative predictor (B =-.21, β = -.21, p<.001) of mentalization shows a negative link with each one unit increase in corresponding to father's attachment anxiety leads to decrease of .21 units in mentalization. The R² values shows that these values account for mother's attachment anxiety explicate 5% variances in mentalization with F ratio to be (F= 27.51, p<.001) Further it was found that mother's attachment anxiety is the negative predictor (B =-.21, β = -.22, p<.001) of mentalization. Therefore, it explains a negative link with each one unit

increase in corresponding to father's attachment anxiety leads to decrease of .21 units in mentalization

Table 4.12

Multiple regression on Mother Attachment Avoidance and Mother Attachment Anxiety by Epistemic trust (N=500)

Epistemic Trust							
Variables	B	SE B	β	t	p	95% CI	
						LL	UL
Mother Attachment Avoidance	-.04	.02	-.10	-2.37	.02	-.07	-.01
Mother Attachment Anxiety	-.02	.02	-.05	-1.09	.27	-.05	.01

$R = .11, R^2 = .01, (F = 3.40, p < .05)$

The table shows the influence of mother's attachment avoidance and attachment anxiety on epistemic trust. The value of R^2 shows that mother's attachment avoidance and attachment anxiety explicate 01% variance in the epistemic trust with F ratio to be significant ($F = 3.40, p < .05$). Findings revealed mother's attachment avoidance as the strong negative predictor ($B = -.04, \beta = .10, p < .05$) of epistemic trust shows a negative link with each one unit increase in corresponding to mother's attachment avoidance leads to decrease of .04 units in epistemic trust. Further it was found that mother's attachment anxiety is the negative predictor ($B = -.02, \beta = .05,$

$p > .05$) of epistemic trust shows a negative link with each one unit increase in corresponding to mother's attachment anxiety leads to decrease of .02 units in epistemic trust.

Table 4.13

Multiple regression on Mother Attachment Avoidance and Mother Attachment Anxiety by Mistrust (N=500)

Mistrust							
Variables	<i>B</i>	<i>SE B</i>	β	<i>t</i>	<i>p</i>	95% CI	
						<i>LL</i>	<i>UL</i>
Mother Attachment Avoidance	-.07	.02	-.20	-4.18	.000	-.10	-.03
Mother Attachment Anxiety	.14	.02	.36	8.74	.000	.10	.17

$R = .39, R^2 = .16, (F = 47.17, p < .001)$

The table shows the influence of mother's attachment avoidance and attachment anxiety on mistrust. The value of R^2 shows that mother's attachment avoidance and attachment anxiety explicate 16% variances in the mistrust with F ratio to be significant ($F = 47.17, p < .001$).

Findings revealed mother's attachment avoidance as the negative predictor ($B = -.07, \beta = -.20, p < .001$) of mistrust shows a negative link with each one unit increase in corresponding to mother's attachment avoidance leads to decrease of .07 units in mistrust. Further it was found that mother's attachment anxiety is the positive predictor ($B = .14, \beta = .36, p < .001$) of mistrust

shows a positive link with each one unit increase in corresponding to mother's attachment anxiety leads to increase of .14 units in mistrust

Table 4.14

Multiple regression on Mother Attachment Avoidance and Mother Attachment Anxiety by Credulity (N=500)

Credulity							
Variables	<i>B</i>	<i>SE B</i>	β	<i>t</i>	<i>P</i>	95% CI	
						<i>LL</i>	<i>UL</i>
Mother Attachment Avoidance	-.01	.01	-.03	-.83	.404	-.04	.01
Mother Attachment Anxiety	.17	.01	.44	10.98	.000	.13	.19

$R = .35, R^2 = .12, (F = 35.66, p < .001)$

The table shows the influence of mother attachment avoidance and attachment anxiety on Credulity. The value of R^2 shows that mother's attachment avoidance and attachment anxiety explicate 12% variances in the credulity with F ratio to be significant ($F = 35.66, p < .001$). Findings revealed mother's attachment avoidance as the negative predictor ($B = -.01, \beta = -.03, p > .05$) of credulity shows a negative link with each one unit increase in corresponding to mother's attachment avoidance leads to decrease of .01 units in credulity. Further it was found that mother's attachment anxiety is the positive predictor ($B = .17, \beta = .44, p < .001$) of credulity

shows a positive link with each one unit increase in corresponding to mother's attachment anxiety leads to increase of .17 units in credulity.

Table 4.15

Multiple regression on Self-related mentalization, Other-related mentalization and Motivation to mentalize by Borderline Personality Features (N=500)

Variables	Borderline Personality Features						
	<i>B</i>	<i>SE B</i>	<i>B</i>	<i>t</i>	<i>p</i>	<u>95% CI</u>	
						<i>LL</i>	<i>UL</i>
Self-related mentalization	-.45	.04	-.34	-9.47	.000	-.552	-.362
Other-related mentalization	-.37	.04	-.37	-7.58	.000	-.472	-.278
Motivation to mentalize	-.13	.06	-.11	-2.25	.024	-.254	-.018

$R = .64, R^2 = .41, (F = 116.84, p < .001)$

The table represents the impact of self- related mentalization, other- related mentalization and motivation to mentalize on borderline personality features. The R^2 values shows that these values account for self- related mentalization, other- related mentalization and motivation to mentalize explicate 41% variances in the borderline personality features with F ratio to be significant ($F = 116.84, p < .001$). Findings showed self-related mentalization as the negative

predictor ($B = -.45$, $\beta = -.34$, $p > .05$) of borderline personality features shows a negative link with each one unit increase in corresponding to self-related mentalization leads to decrease of .45 units in borderline personality feature. Further it was found that other-related mentalization is the negative predictor ($B = -.37$, $\beta = -.37$, $p < .01$) of borderline personality features. Therefore, it explains negative link with each one unit increase in corresponding to other-related mentalization leads to decrease of .37 units in borderline personality features. Also, upon exploration it was found that motivation to mentalize is the negative predictor ($B = -.13$, $\beta = -.11$, $p < .05$) of borderline personality features. Therefore, it explains negative link with each one unit increase in corresponding to motivation to mentalize leads to decrease of .13 units in borderline personality features.

Table 4.16

Multiple regression on Epistemic Trust, Mistrust and credulity by Borderline Personality

Features (N=500)

Borderline Personality Features							
Variables	<i>B</i>	<i>SE B</i>	<i>B</i>	<i>t</i>	<i>P</i>	<u>95% CI</u>	
						<i>LL</i>	<i>UL</i>
Epistemic Trust	-.40	.04	-.31	-8.50	.000	-.50	-.31
Mistrust	.30	.05	.24	5.86	.000	.20	.40
Credulity	.37	.05	.30	7.23	.000	.27	.47

$R = .55$, $R^2 = .40$, ($F = 73.98$, $p < .001$)

The table represents the impact of epistemic trust, mistrust and credulity on borderline personality features. The R^2 values shows that these values account for epistemic trust, mistrust and credulity explicate 49% variances in the borderline personality features with F ratio to be significant ($F= 73.98, p<.001$). Findings showed epistemic trust as the negative predictor ($B = -.40, \beta = -.31, p<.001$) of borderline personality features shows a negative link with each one unit increase in corresponding to epistemic trust leads to decrease of .40 units in borderline personality feature. Further it was found that mistrust is the positive predictor ($B = .30, \beta = .24, p<.001$) of borderline personality features. Therefore, it explains positive link with each one unit increase in corresponding to mistrust leads to increase of .30 units in borderline personality features. Also, upon exploration it was found that credulity is the positive predictor ($B = .37, \beta = .30, p<.001$) of borderline personality features. Therefore, it explains positive link with each one unit increase in corresponding to credulity leads to increase of .37 units in borderline personality features.

Table 4.17

Mean, standard deviations and t-values for boys and girls on Study Variables (N=500)

Variables	Boys (n = 238)		Girls (n = 262)		$t(498)$	P	95% CI		Cohen's d
	M	$S.D$	M	$S.D$			LL	UL	
Father's Attachment Avoidance	58.76	13.58	57.40	14.31	1.09	.27	-1.09	3.82	-
Father's Attachment Anxiety	65.21	16.63	69.45	13.12	-3.14	.00	-6.89	-1.59	0.28

Mother's Avoidance	Attachment	57.80	14.71	56.58	15.11	.91	.36	-1.40	3.84	-
Mother's Anxiety	Attachment	67	17.26	73.45	14.25	-4.52	.00	-9.24	-3.65	0.40
Borderline Features	Personality	33.17	7.55	34.50	7.47	-1.97	.04	-2.65	-.01	0.17
Self-related Mentalization		23.34	5.72	24.52	5.61	-2.33	.02	-2.18	-.189	0.20
Others-related Mentalization		33.11	7.16	33.26	6.92	-.24	.80	-1.39	1.08	-
Motivation to Mentalize		32.04	6.01	32.35	5.89	-.59	.55	-1.36	.73	-
Mentalization		88.48	14.26	90.14	13.99	-.13	.19	-4.14	.82	-
Epistemic Trust		21.88	6.36	22.14	5.44	.49	-.62	-1.30	.78	-
Mistrust		21.40	6.16	22.99	6.16	-1.31	.19	-2.67	-.50	-
Credulity		20.32	6.55	21.27	5.67	-1.74	.08	.55	-2.04	-

The above table differentiates between boys and girls on father's and mother's attachment avoidance and attachment anxiety, borderline personality features, Mentalization and its subscales (self-related mentalization, other related mentalization and motivation to mentalize) and on Epistemic Trust, Mistrust and Credulity. The table shows significance difference between boys on girls for Father's attachment anxiety and mother's attachment anxiety, where girls scored

higher than boys. Significant difference was seen for Mentalization, where girls scored higher than boys. For all other variables the results were found to be non-significant.

Table 4.18

Mean, standard deviations and t-values for housewife mothers and working mothers on Study

Variables (N=500)

Variables	Housewife (n = 440)		Working (n = 60)		<i>t</i> (498)	<i>P</i>	95% C1		Cohen's d
	<i>M</i>	<i>S.D</i>	<i>M</i>	<i>S.D</i>			<i>LL</i>	<i>UL</i>	
Father's Attachment Avoidance	57.59	14.11	61.40	12.50	-	.04	-7.57	-.04	0.28
Father's Attachment Anxiety	67.35	14.83	68.03	16.55	1.987	.74	-4.75	3.38	-
Mother's Attachment Avoidance	56.92	15.13	58.97	13.27	-.99	.31	-6.08	1.98	-
Mother's Attachment Anxiety	70.16	16.10	72.02	15.87	-.83	.40	-6.20	2.49	-
Borderline	33.93	7.53	33.47	7.59	.44	.65	-1.58	2.49	-

Personality										
Features										
Self-related	24.03	5.62	22.90	5.86	1.45	.14	-.39	2.66	-	
Mentalization										
Others-related	33.01	7.43	33	7.66	.01	.98	-1.95	2.03	-	
Mentalization										
Motivation to	32.21	6.21	31.56	6.75	.75	.45	-1.04	2.34	-	
Mentalize										
Mentalization	89.27	15.13	87.46	17.07	.85	.39	-1.04	2.34	-	
Epistemic Trust	21.93	5.87	22.62	6.05	-.82	.41	-2.33	.97	-	
Mistrust	22.19	6.15	22.60	6.63	-.48	.62	-2.09	1.26	-	
Credulity	20.79	6.07	21.03	6.47	-.29	.77	-1.90	1.41	-	

The above table differentiates between the attachment of adolescents whose mothers are either housewives or working women. on father's and mother's attachment avoidance and attachment anxiety, borderline personality features, mentalization and its subscales (self- related mentalization, other related mentalization and motivation to mentalize) and on Epistemic Trust, Mistrust and Credulity. The table shows significance difference for father's attachment avoidance, where adolescents' whose mothers are working women scored higher than those whose mothers are housewives. For all other variables the results were found to be non-significant.

Table 4.19*Mean, standard deviations and t-values for family type on Study Variables (N=500)*

Variables	Nuclear (n = 357)		Joint (n = 143)		<i>t</i> (498)	<i>p</i>	95% CI		Cohen's d
	<i>M</i>	<i>S.D</i>	<i>M</i>	<i>S.D</i>			<i>LL</i>	<i>UL</i>	
Father's Attachment Avoidance	58.01	14.07	57.32	13.71	.73	.46	-1.70	3.73	-
Father's Attachment Anxiety	68.46	14.81	64.85	15.31	2.44	.01	.71	6.52	0.23
Mother's Attachment Avoidance	57.36	15.06	56.68	14.61	.46	.64	-2.22	3.58	-
Mother's Attachment Anxiety	71.35	15.61	67.97	16.97	2.13	.03	.264	6.49	0.20
Borderline Personality Features	34.43	7.51	32.46	7.43	2.66	.00	.516	3.42	0.26

Self-related	23.69	5.62	24.39	5.72	-1.25	.21	-.94	-1.80	-
Mentalization									
Others-related	32.58	7.53	34.08	7.17	-2.03	.04	-2.94	-2.68	0.20
Mentalization									
Motivation to	31.72	6.34	33.18	6.01	-2.36	.01	-2.67	-2.21	0.23
Mentalize									
Mentalization	88.04	15.52	91.66	14.73	-2.41	.01	-.19	-6.63	0.23
Epistemic Trust	22.59	5.56	20.57	6.44	3.28	.001	.81	3.23	0.33
Mistrust	22.76	6.08	20.92	6.33	3.01	.003	.64	3.03	0.29
Credulity	21.34	6.11	19.50	5.95	3.06	.002	.66	3.02	0.33

There is a significant difference between the adolescents of nuclear and joint family for father's attachment anxiety and mother's attachment anxiety. There is a significant difference between the adolescents of nuclear and joint family for other-related mentalization, motivation to mentalize and total mentalization. There is a significant difference between the adolescents of nuclear and joint family for epistemic trust, mistrust and credulity where adolescents of nuclear family scored higher than that of joint family. For all other variables the results were found to be non-significant.

Table 4.20

Simple Mediation of the effect of Father Attachment Anxiety on Borderline Personality Features by Self- related Mentalization.

Predictors	Borderline Personality Disorder			
	Model 1	Model 2	95% <i>CL</i>	
	B	B	<i>LL</i>	<i>UL</i>
Constant	22.81***	38.80***	34.95	42.65
Father Attachment Anxiety	.163***	.129***	.08	.16
self- related Mentalization		-.562***	-.66	-.46
Indirect effect-ANX_F → Ments_S → BPF		.03	.01	.05
R^2	.10	.28		
ΔR^2		0.18		
F	59.67***	97.48***		
ΔF		37.81		

*** $p < .001$

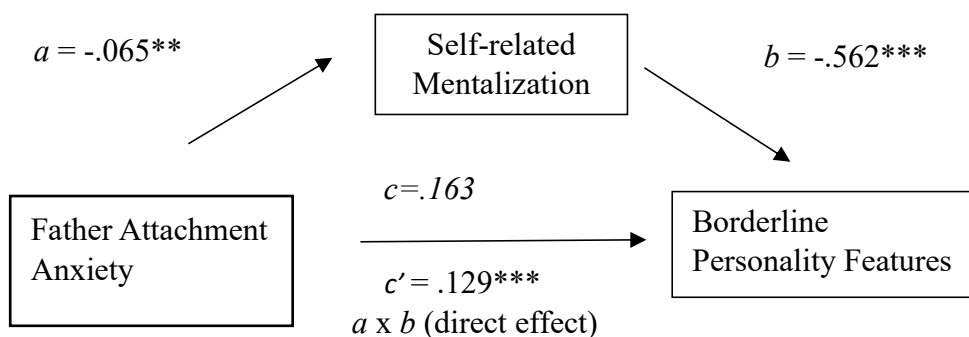


Figure 4.1: Mediation of Fathers Attachment Anxiety on Borderline Personality Features by self-related Mentalization.

The above table shows the mediation analysis on father attachment anxiety and Borderline Personality Features by self-related mentalization. The total effect of the mediation model was found to be significant where, $b = .16$, $t = 7.72$, $CI [.12, .20]$, $p < .001$. It was further seen that the direct effect is significant $b = .12$, $t = 6.56$, $CI [.08, .16]$, $p < .001$. Results also explained that the indirect effect is statistically significant, $b = .03$, $CI [.01, .05]$. Hence it is concluded that self-related mentalization mediated the relationship among father attachment anxiety and Borderline Personality Features.

Table 4.21

Simple Mediation of the effect of Father Attachment Anxiety on Borderline Personality Features by Other- related Mentalization.

Predictors	Borderline Personality Disorder			
	Model 1	Model 2	95% CL	
	B	B	LL	UL
Constant	22.81***	41.92***	38.26	45.65
Father Attachment Anxiety	.163***	.125***	.08	.16
Other- related Mentalization		-.500***	-.66	-.46
Indirect effect-ANX_F → Ments_O → BPF		.038	.015	.061
R^2	.10	.34		
ΔR^2		0.24		
F	59.67***	131.42***		
ΔF		71.75		

*** $p < .001$

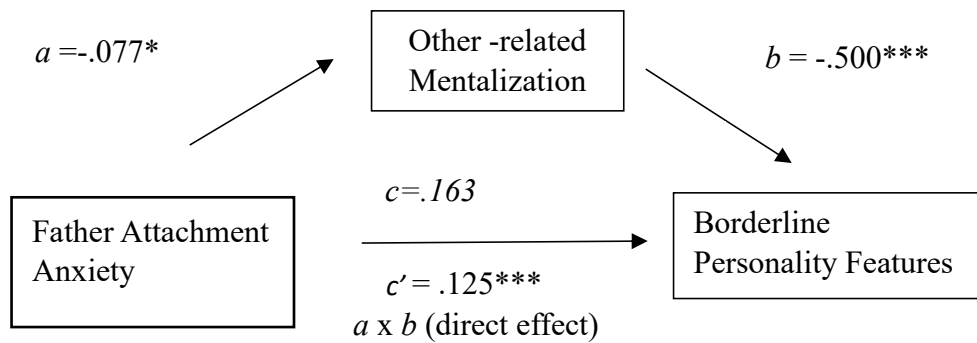


Figure 4.2: Mediation of Fathers Attachment Anxiety on Borderline Personality Features by Other related Mentalization.

The above table shows the mediation analysis on father attachment anxiety and Borderline Personality Features by other related mentalization. The total effect of the mediation model was found to be significant where, $b = .16$, $t = 7.72$, $CI [.12, .20]$, $p < .001$. It was further seen that the direct effect is significant $b = .12$, $t = 6.81$, $CI [.08, .16]$, $p < .001$. Results also explained that the indirect effect is statistically significant, $b = .03$, $CI [.01, .06]$. Hence it is concluded that other related mentalization mediated the relationship among father attachment anxiety and Borderline Personality Features.

Table 4.22

Simple Mediation of the effect of Father Attachment Anxiety on Borderline Personality Features by Motivation to Mentalize

Predictors	Borderline Personality Disorder			
	Model 1	Model 2	95% <i>CL</i>	
	B	B	<i>LL</i>	<i>UL</i>
Constant	22.81***	42.54***	38.33	47.66
Father Attachment Anxiety	.163***	.124***	.08	.16
Motivation to Mentalization		-.531***	-.42	-.62
Indirect effect-ANX_F → Ments_M → BPF		.03	.01	.06
R^2	.10	.29		
ΔR^2		.19		
F	59.67***	104.93***		
ΔF		45.26		

*** $P < .001$

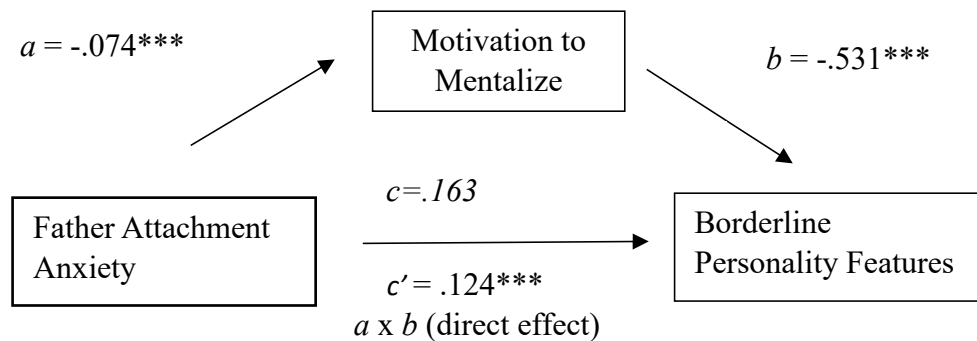


Figure 4.3: Simple Mediation of the effect of Father Attachment Anxiety on Borderline Personality

Results in the table show the mediation analysis on father attachment anxiety and borderline personality features by motivation to mentalize. The total effect of the model came out to be significant, $b = .16$, $t = 7.72$, $CI [.12, .20]$, $p < .001$. For the direct effect the relationship was found to be statistically significant, $b = .12$, $t = 6.50$, $CI [.08, .16]$, $p < .001$. Indirect effect of the model was found to have a statistically significant impact, $b = .04$, $CI [.01, .06]$. All these results give enough evidence to prove that motivation to mentalize mediated the relationship between the father attachment anxiety and borderline personality features.

Table 4.23

Simple Mediation of the effect of Father Attachment Anxiety on Borderline Personality Features by Mentalization

Predictors	Borderline Personality Disorder			
	Model 1	Model 2	95% CL	
	B	B	LL	UL
Constant	22.81***	52.67***	48.49	56.75
Father Attachment Anxiety	.163***	.101***	.06	.13
Mentalization		-.287***	-.25	-.32
Indirect effect-ANX_F → Ments_M → BPF		.061	.03	.08
R^2	.10	.27		
ΔR^2		0.13		
F	59.67***	69.***		
ΔF		15.41		

*** $P < .001$

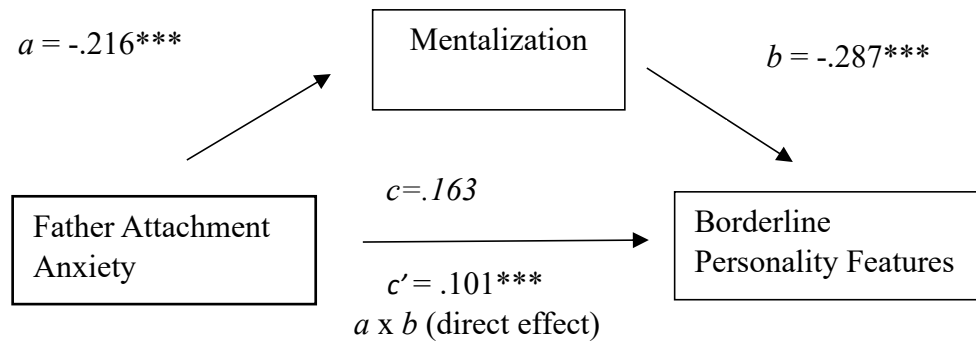


Figure 4.4: Simple Mediation of the effect of Father Attachment Anxiety on Borderline Personality Features by Mentalization

Results in the table show the mediation analysis on father attachment anxiety and borderline personality features by mentalization. The total effect of the model came out to be significant, $b = .16$, $t = 7.72$, $CI [.12, .20]$, $p < .001$. For the direct effect the relationship was found to be statistically significant, $b = .10$, $t = 5.88$, $CI [.06, .13]$, $p < .001$. Indirect effect of the model was found to have a statistically significant impact, $b = .06$, $CI [.03, .08]$. All these results give enough evidence to prove that mentalization mediated the relationship between the father attachment anxiety and Borderline Personality Features

Table 4.24

Simple Mediation of the effect of Mother Attachment Anxiety on Borderline Personality Features by self- related Mentalization

Predictors	Borderline Personality Disorder			
	Model 1	Model 2	95% <i>CL</i>	
	B	B	<i>LL</i>	<i>UL</i>
Constant	21.27***	36.95***	33.15	40.75
Mother Attachment Anxiety	.179***	.140***	.10	.17
Self- related Mentalization		-.543***	-.44	-.64
Indirect effect-ANX_M → Ments_S → BPF		.038	.02	.05
R^2	.14	.30		
ΔR^2		0.26		
F	84.96***	109.54***		
ΔF		24.58		

*** $p < .001$

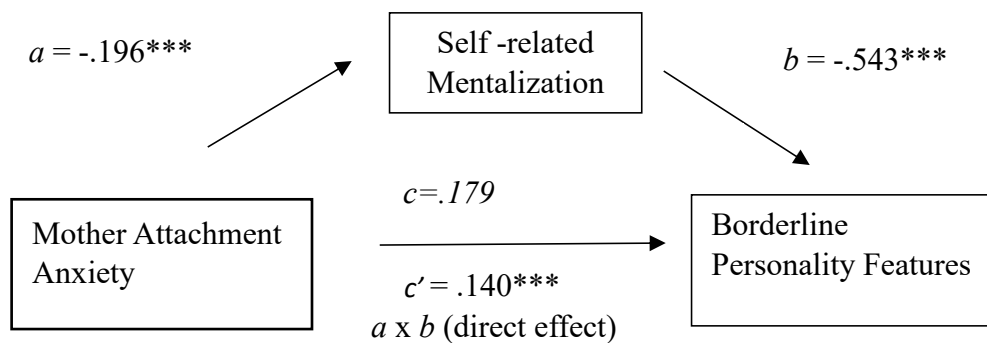


Figure 4.5: Mediation of Mother Attachment Anxiety on Borderline Personality Features by Self-related Mentalization.

The above table shows the mediation analysis on mother attachment anxiety and Borderline Personality Features by self - related mentalization. The total effect of the model was found to be significant where, $b = .17$, $t = 9.21$, $CI [.14, .21]$, $p < .001$. It was further seen that the direct effect is significant $b = .14$, $t = 7.87$, $CI [.10, .17]$, $p < .001$. Results also explained that the indirect effect is statistically significant, $b = .03$, $CI [.02, .05]$. Hence it is concluded that self-related mentalization mediated the relationship among mother attachment Anxiety and Borderline Personality Features.

Table 4.25

Simple Mediation of the effect of Mother Attachment Anxiety on Borderline Personality Features by Other- related Mentalization

Predictors	Borderline Personality Disorder			
	Model 1	Model 2	95% CL	
	B	B	LL	UL
Constant	21.27***	40.06***	36.43	43.68
Mother Attachment Anxiety	.179***	.141***	.10	.17
Other- related Mentalization		-.488***	-.41	-.56
Indirect effect-ANX_M → Ments_O → BPF		.03	.02	.05
R^2	.14	.37		
ΔR^2		0.23		
F	84.96***	148***		
ΔF		63.04		

*** $p < .001$

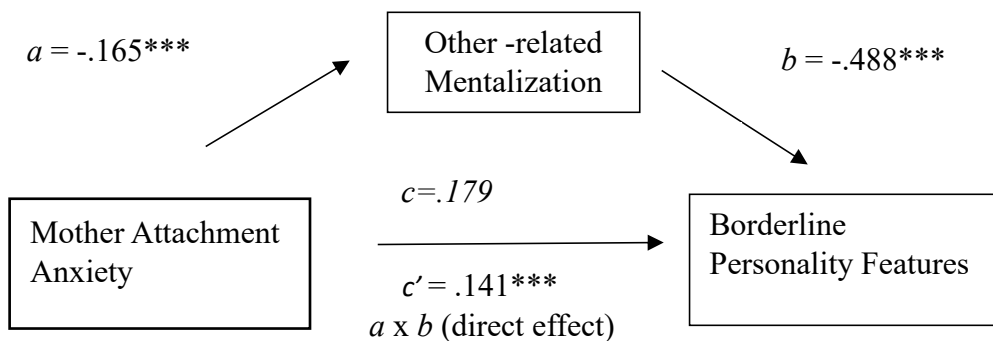


Figure 4.6: Mediation of Mother Attachment Anxiety on Borderline Personality Features by other- related Mentalization.

The above table shows the mediation analysis on mother attachment anxiety and Borderline Personality Features by other related mentalization. The total effect of the model was found to be significant where, $b = .17$, $t = 9.21$, $CI [.14, .21]$, $p < .001$. It was further seen that the direct effect is significant $b = .14$, $t = 8.37$, $CI [.10, .17]$, $p < .001$. Results also explained that the indirect effect is statistically significant, $b = .03$, $CI [.02, .05]$. Hence it is concluded that other related mentalization mediated the relationship among mother attachment Anxiety and Borderline Personality Features.

Table 4.26

Simple Mediation of the effect of Mother Attachment Anxiety on Borderline Personality Features by Motivation to Mentalize

Predictors	Borderline Personality Disorder			
	Model 1	Model 2	95% CL	
	B	B	LL	UL
Constant	21.27***	40.52***	2.12	10.11
Mother Attachment Anxiety	.179***	.141***	.07	.15
Mentalization		-.517***	.18	.26
Indirect effect-ANX_M → Ments_M → BPF		.037	.018	.057
R^2	.14	.32		
ΔR^2		0.18		
F	84.96***	119.93***		
ΔF		34.97		

*** $P < .001$

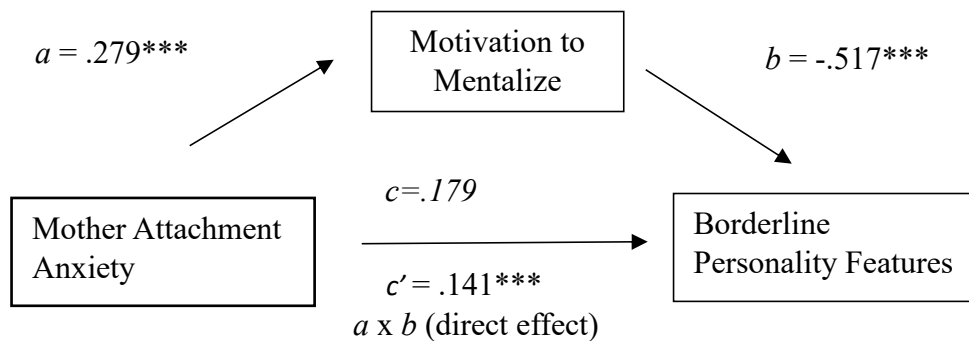


Figure 4.7: Simple Mediation of the effect of Mother Attachment Anxiety on Borderline Personality Features by Motivation to Mentalize

Results in the table show the mediation analysis on mother attachment anxiety and Borderline Personality Features by motivation to mentalize. The total effect of the model appeared to be significant, $b = .17$, $t = 9.21$, $CI [.14, .21]$, $p < .001$. For the direct effect the relationship was found to be statistically significant, $b = .14$, $t = 8.07$, $CI [.10, .17]$, $p < .001$. Indirect effect of the model was found to have a statistically significant impact, $b = .03$, $CI [.01, .05]$. All these results give enough evidence to conclude that motivation to mentalize mediated the relationship among mother attachment anxiety and Borderline Personality Features.

Table 4.27

Simple Mediation of the effect of Mother Attachment Anxiety on Borderline Personality Features by Mentalization

Predictors	Borderline Personality Disorder			
	Model 1	Model 2	95% CL	
	B	B	LL	UL
Constant	21.27***	50.57***	46.51	54.61
Mother Attachment Anxiety	.179***	.117***	.08	.14
Mentalization		-.280***	-.24	-.31
Indirect effect-ANX_M → Ments_T → BPF		.03	.02	.05
R^2	.45	.05		
ΔR^2		0.40		
F	108.61***	27.51***		
ΔF		81.1		

*** $p < .001$

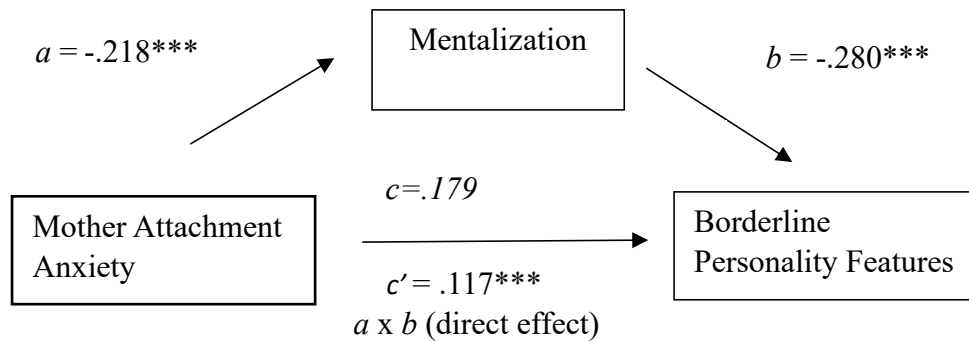


Figure 4.8: Simple Mediation of the effect of Mother Attachment Anxiety on Borderline Personality Features by Mentalization

Results in the table show the mediation analysis on mother attachment anxiety and Borderline Personality Features by mentalization. The total effect of the model came out to be significant, $b = .17$, $t = 9.21$, $CI [.14, .21]$, $p < .001$. For the direct effect the relationship came out to be statistically significant, $b = .11$, $t = 7.38$, $CI [.08, .14]$, $p < .001$. Indirect effect of the model was found to have a statistically significant impact, $b = .06$, $CI [.03, .08]$. All these results give enough evidence to prove that mentalization mediated the relationship between the mother attachment anxiety and borderline personality features

Table 4.28

Simple Mediation of the effect of Father Attachment Anxiety on Borderline Personality Features by Mistrust

Predictors	Borderline Personality Disorder			
	Model 1	Model 2	95% CL	
	B	B	LL	UL
Constant	22.81***	17.60***	14.51	20.70
Father Attachment Anxiety	.163***	.120***	.07	.16
Mistrust		.36***	.26	.46
Indirect effect-ANX_F → Mistrust → BPF		.01	.03	.07
R^2	.10	.19		
ΔR^2		.09		
F	59.67***	58.37***		
ΔF		1.30***		

*** $P < .001$

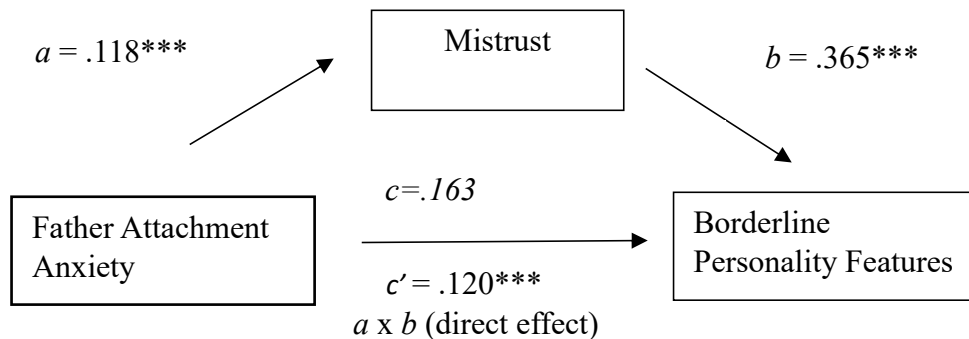


Figure 4.9: Simple Mediation of the effect of Father Attachment Anxiety on Borderline Personality Features by Mistrust

Results in the table show the mediation analysis on father attachment anxiety and Borderline Personality Features by Mistrust. The total effect of the model came out to be significant, $b = .16$, $t = 7.72$, $CI [.12, .20]$, $p < .001$. For the direct effect the relationship appeared to be statistically significant, $b = .12$, $t = 5.71$, $CI [.07, .16]$, $p < .001$. Indirect effect of the model is found to have a statistically significant impact, $b = .04$, $CI [.02, .06]$. All these results give enough evidence to prove that mistrust mediated the relationship between the father attachment anxiety and Borderline Personality Features.

Table 4.29

Simple Mediation of the effect of Father Attachment Anxiety on Borderline Personality Features by Credulity

Predictors	Borderline Personality Disorder			
	Model 1	Model 2	95% <i>CL</i>	
	B	B	<i>LL</i>	<i>UL</i>
Constant	22.81***	17.98***	15.02	20.95
Father Attachment Anxiety	.163***	.107***	.06	.14
Credulity		.412***	.31	.51
Indirect effect-ANX_F → Credulity → BPF		.05	.03	.07
R^2	.10	.20		
ΔR^2		.10		
F	59.67***	65.27***		
ΔF		5.60***		

*** $P < .001$

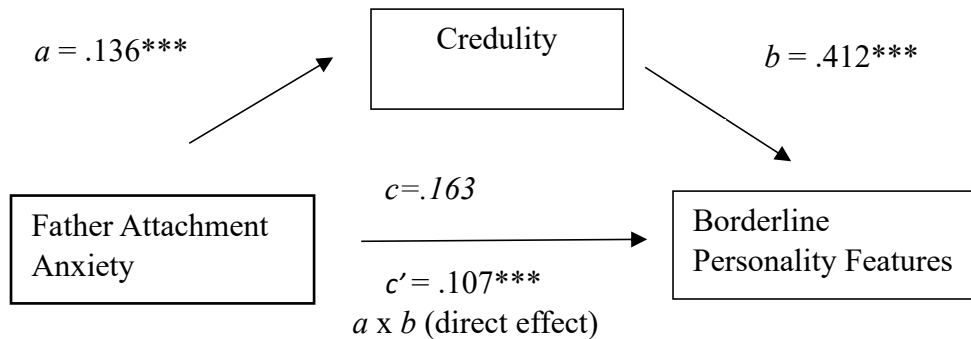


Figure 4.10: Simple Mediation of the effect of Father Attachment Anxiety on Borderline Personality Features by Credulity

Results in the table show the mediation analysis on father attachment anxiety and Borderline Personality Features by credulity. The total effect of the model came out to be significant, $b = .16$, $t = 7.72$, $CI [.12, .20]$, $p < .001$. For the direct effect the relationship appeared to be statistically significant, $b = .10$, $t = 5.05$, $CI [.06, .14]$, $p < .001$. Indirect effect of the model is found to have a statistically significant impact, $b = .05$, $CI [.03, .07]$. All these results give enough evidence to prove that Credulity mediated the relationship between the father attachment anxiety and Borderline Personality Features.

Table 4.30

Simple Mediation of the effect of Mother Attachment Anxiety on Borderline Personality Features by Mistrust

Predictors	Borderline Personality Disorder			
	Model 1	Model 2	95% <i>CL</i>	
	B	B	<i>LL</i>	<i>UL</i>
Constant	21.27***	17.24***	14.29	20.18
Mother Attachment Anxiety	.179***	.133***	.09	.17
Mistrust		.324***	.22	.42
Indirect effect-ANX_M → Mistrust → BPF		.04	.02	.06
R^2	.14	.20		
ΔR^2		.06		
F	84.96***	65.20***		
ΔF		19.76***		

*** $P < .001$

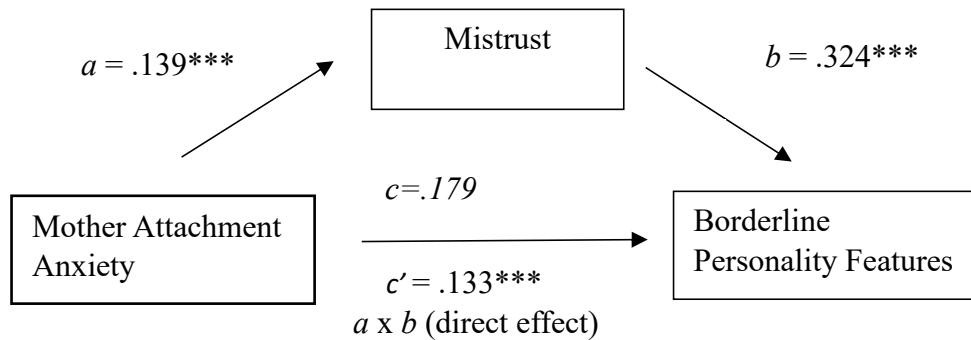


Figure 4.11: Simple Mediation of the effect of Mother Attachment Anxiety on Borderline Personality Features by Mistrust

Results in the table show the mediation analysis on mother attachment anxiety and Borderline Personality Features by mistrust. The total effect of the model came out to be significant, $b = .17$, $t = 9.21$, $CI [.14, .21]$, $p < .001$. For the direct effect the relationship appeared to be statistically significant, $b = .13$, $t = 6.66$, $CI [.09, .17]$, $p < .001$. Indirect effect of the model is found to have a statistically significant impact, $b = .04$, $CI [.02, .06]$. All these results give enough evidence to prove that mistrust mediated the relationship between the mother attachment anxiety and Borderline Personality Features

Table 4.31

Simple Mediation of the effect of Mother Attachment Anxiety on Borderline Personality Features by Credulity

Predictors	Borderline Personality Disorder			
	Model 1	Model 2	95% <i>CL</i>	
	B	B	<i>LL</i>	<i>UL</i>
Constant	21.27***	17.96***	15.16	20.77
Mother Attachment Anxiety	.179***	.117***	.07	.15
Credulity		.367***	.26	.47
Indirect effect-ANX_M → Credulity → BPF		.05	.03	.07
R^2	.14	.21		
ΔR^2		.07		
F	84.96***	69.09***		
ΔF		15.87***		

*** $P < .001$

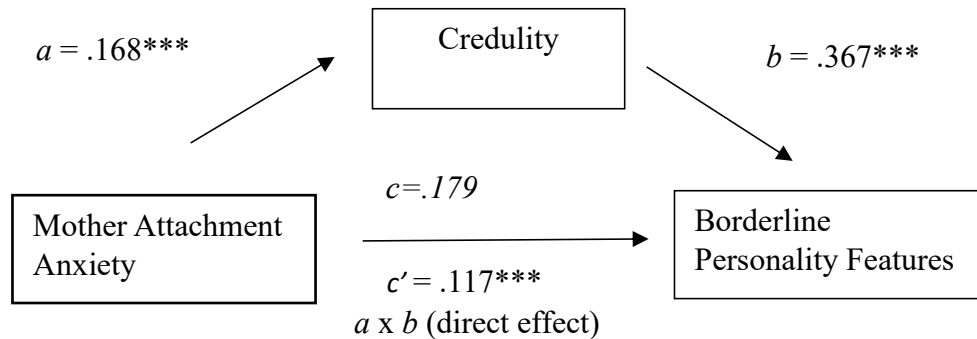


Figure 4.12: Simple Mediation of the effect of Mother Attachment Anxiety on Borderline Personality Features by Credulity

Results in the table show the mediation analysis on mother attachment anxiety and Borderline Personality Features by credulity. The total effect of the model came out to be significant, $b = .17$, $t = 9.21$, $CI [.14, .21]$, $p < .001$. For the direct effect the relationship appeared to be statistically significant, $b = .11$, $t = 5.64$, $CI [.07, .15]$, $p < .001$. Indirect effect of the model is found to have a statistically significant impact, $b = .06$, $CI [.04, .08]$. All these results give enough evidence to prove that credulity mediated the relationship between the mother attachment anxiety and Borderline Personality Features.

Chapter 5

SUMMARY, DISCUSSIONS, CONCLUSIONS AND SUGGESTIONS

5.1 Summary

This research aims to compare mentalization together with epistemic trust in order to explain the adolescents' attachment and their borderline personality elements. It thus seeks to establish whether or not these factors distort the quality of relationships and or perceived happiness among adolescents. Furthermore, the research also aims at determining the influence of communication apprehension as a mediator and emotional intelligence as the moderator of attachment and borderline personality features

5.2 Discussions

This research was performed with the purpose of assessing the mediation model of mentalization and epistemic trust by adolescents' attachment to outline the borderline personality features in the context of Pakistani culture. It is important to note that the research was conducted on a particular type of attachment, namely the adolescents' parents, where the research analyzed the impact on personality change. The rationale for this study was drawn from a number of earlier research that showed how anxious attachment is postulated to cause harm to the adolescent and can even result to the growth of borderline personality features (Bateman & Fonagy, 2004; Levy, 2005). Moreover, the research questions focused on the mediating effect of epistemic trust and mentalization in the above-mentioned relationship. Moreover, the study aimed at comparing the relation of gender, family type, and working status of the mother to BPD features in adolescents.

In the present study, several instruments were employed to gather data: of which are Adolescent Anxiety and Avoidance Attachment Inventory (Moretti & Obsuth, 2009), Borderline

Personality Features Scale (BPFS-11) (Sharp et al., 2014), Mentalization Scale (Dimitrijević et al., 2018) and Epistemic Trust, Mistrust, and Credulity Questionnaire (Saunders et al., 2021). Moreover, in order to gather participant data, a questionnaire that included a detailed demographic sheet was employed. It was as well noted that the Cronbach's alpha reliabilities for all the instruments used in this study were satisfying and most within acceptable standards. For the scores obtained from the scales and subscales, the transformed scores from mean differences and standard deviations were used. To do so, sample's descriptive statistics regarding mean age and gender, family system, parents' education levels, participant's education level, and working status of the mother were computed in order to perform additional data analyses. To investigate the effect of adolescents' attachment on Borderline Personality Features with a focus on mentalization and epistemic trust as mediators, several hypotheses were posited.

5.2.1 Adolescents' Attachment and Borderline Personality Features

The aim was to find out how such adolescents' attachment with father and mother is connected with borderline personality disorder, therefore, it is assumed that there is positive connection between parental adolescents' attitudes and borderline personality disorder. Through the results it was also validated that father's attachment anxiety is positively correlated to borderline personality features(H1b) and is also a positive predictor of borderline personality features. Based on attachment theory it is known that insecure attachment especially attachment anxiety plays a part in the development of BPD. For instance, fathers who reported high attachment anxiety are likely to have low emotional self-control, feeling of rejection, and unstable relationships. These characteristics are also there in BPD individuals which suggest that there might be a direct way through which anxiety in fathers can influence features of BDP (Fonagy et al., 2002). This can also be validated through another study that concluded Self-

reported attachment styles such as attachment anxiety may be passed from parents to children in the process of socialization, and therefore, affect the children's emerging patterns of attachment and the likelihood of developing features of BPD. Growing paternal attachment anxiety might lead fathers to display anxious models, resulting in children's developing comparable attachment anxieties and related psychopathological features (Steele et al., 2008). Agrawal and his colleagues (2004), reviewed many studies on attachment and BPD and they noted that there is high frequency of anxious attachment in BPD clients. Their review involved analysis of different indices of attachment and BPD where they establish that it is the attachment anxiety that is predictive of the development and continuation of BPD. There are number of other researches that support the findings of the study (Ringer and Crittenden 2007; Bekker and Croon 2010; Zanarini et al., 2000; Conradi et al., 2006; Rehman et al., 2017).

It was also hypothesized that adolescents' attachment anxiety with mother will have positive correlation with borderline personality disorder and results of the study also supported this hypothesis. It also leads to accept that adolescents' anxious attachment with mother is a positive predictor of borderline personality features. The results in this regard are backed up by theory and evidence available in the literature as well. Lyons-Ruth and his colleague's study in 2005 investigated the effect of maternal care on the development of BPD in adolescent girls. In their own longitudinal study enlisted children who were observed from infancy to adolescence, the results of which showed that the child with anxious-ambivalent attachment to the mother had higher BPD features. Maternal factors were of great concern in the study; more specifically, the kind of attachment a child had with the mother played the most crucial role in the etiology of the BPD; maternal anxiety levels had a way of affecting the child's psychological and emotional wellbeing. In their study, Steele et al. (2008) described the following significant relations

between parents and children concerning the attachment styles. In their study, they discovered that, due to their high level of attachment anxiety, such mothers were likely to raise children who also exhibited similar outcomes and consequently developed BPD elements. Thus, further supporting the importance of maternal attachment in the development of BPD, this transmission of attachment anxiety from mother to a child is observed. Sharp and Fonagy (2008) discussed a study showing that attachment anxiety is associated with interpersonal problems, and BPD characteristics in adolescence.

Further it was also hypothesized that there is positive correlation between adolescents' attachment avoidance with father and mother and borderline personality features. The results however did not prove these hypotheses and showed no correlation. There can be few reasons and hence can also be supported by literature. It could be viewed that there are links between attachment styles and borderline personality disorder, but there are multiple factors affecting this connection. In dealing with BPD features, attachment avoidance may combine with other factors, including family interactions, peer relations, and individual temperament, hence, the lack of a straight relationship (Crittenden, 1995). Thus, work by Allen et al. (2002) showed that there was an inconsistency in which attachment avoidance with mothers could predict BPD symptoms in adolescents. In the research, it was concluded that there may be other contributors like attachment anxiety or trauma that might increase the emergence of BPD features more than self-criticism. This implies that while attachment avoidance could reasonably be expected to correlate with BPD, it could be the case that this fear is not sufficient on its own to cause BPD in every case. According to Main & Solomon (1990), these attachment styles are central in evaluating affective and behavioral consequences yet their link with disorders such as BPD is rather complex. For instance, in their study on disorganized attachment pattern, they established the

fact that although there are patterns of attachment; these concepts of attachment closely work hand in hand with other psychological factors and other developmental experiences that might even temporarily neutralize the effects of these patterns of attachment. Some of the other past work stressed that BPD is a complex disorder that is affected not only by the quality of attachment but by genetic endowment, environment and social experiences also. According to their findings, attachment styles are crucial, although it is also revealed that the some of these aspects do not necessarily have a clear relation to BPD features, indicating the impact of numerous developmental factors (Sroufe et al., 2005). Several theories have been put in place regarding the factors leading to the development of BPD ranging from genetics, childhood experiences as well as chronic stressors. The potential moderators which may produce this pattern are different from those that can produce BPF and; therefore, attachment avoidance may interact with these factors in a way that does not necessarily result in BPF. These interactions can however be very complex and, therefore, it becomes difficult to clearly link attachment avoidance with BPF (Fonagy et al., 2017).

5.2.2 Adolescents' attachment and Epistemic trust

For the second hypothesis it was assumed that there will be negative correlation between father's and mother's both anxious and avoidant attachment with epistemic trust (H2a, H2b, H2c, H2d). The findings of the study also illustrated the negative relationship between the adolescents' attachment and epistemic trust. One justification for this association is that a research pointed out that people with avoidant attachment would have low epistemic trust for reasons that such individuals will not seek or value others' opinion (Mikulincer and Shaver 2016). In another research Kobak, R. R. and Sceery, A (1988) aimed at analyzing the kind of relationships and trust

in late adolescence based on attachment styles. It indicates that anxious and avoidant attachment results to challenges in trusting other people's judgment and knowledge, in line with the findings on the inverted relationship with epistemic trust. According to Guerra and Bradshaw (2020), there is a strong negative association between avoidant as well as anxious attachment and the epistemic trust in adolescents suggesting that the individuals with avoidant attachment are relatively less trustful of the information obtained from the external world. Schenk and Bögels (2019) complemented these observations, proving that avoidant and anxious attachment contributes to the negative relationship between epistemic trust where such adolescents distrust other people's knowledge. In this research, distinct types of attachment are considered and their relationship with epistemic trust in adolescents explored. It notes that avoidant and anxious attachment with others directly reduce epistemic trust or in simple terms, adolescents with avoidant or anxious attached relationships lack trust in other people's knowledge

For the third hypothesis it was assumed that there will be positive correlation between father's and mother's both avoidant attachment with mistrust (H3a, H3c). The findings of the study illustrated that there is no relationship between the adolescents' avoidant attachment with both father and mother and mistrust. The source of mistrust can be found in some environmental conditions, other behaviors of parents, or child's personality traits. Hence, it appears that mistrust in children can be not exclusively related to the parental attachment style but would be, in fact, a multifaceted issue. Murray, L. , & Cooper, P. J. (2023) looked at how attachment with parents and avoidant attachment affects children. It concludes that, although, avoidant attachment has relationships with some child behaviours, direct relationship with mistrust is not always established and is moderated by several variables. A meta-analysis was conducted to understand how parental attachment insecurity influences children's mistrust and their general behavioral

pattern where contextual characteristics and child temperament acted as moderators for these relations. The study showed the finding that the straight-forward relationship between the parents' avoidant attachment and the children's mistrust may be moderated by many additional variables (Liu, & Kerns, K. A. 2023). Benoit, D. , & Carlson E. A. (2024) refined the established link between parental avoidant attachment and children's trust to be more complex than actually understood. Implications of the study indicate that the parents' attachment style does make a difference in the child outcomes; nevertheless, mistrust in children is best understood as a function of parents' behaviors, context, and child factors.

For adolescents' attachment anxiety with father and mother it was hypothesized to have positive correlation with mistrust and the results also supported the hypotheses (H3b, H3d). The literature also supports the notion. It was established that anxious attachment in adolescents correlates with the higher degree of mistrust. They pointed out that youths who had anxious models of attachment are more prone to report and display mistrust especially in the relations with parents and peers (Schimmenti, A. , & Bifulco, A. 2015). In the research conducted by Murray, L. & Cooper, P. J. (2021) it sought to understand how adolescents' anxious attachment style relates to mistrust with emphasis on the mediating effect of the quality of parent-child relationships. Other questionnaires involved the assessment of the parents' and children's attachment styles, as well as the level of mistrust of the subject and his/her parents and other family members. They discovered that only anxious attachment led to greater mistrust, and that this effect was contingent on the perceived quality of the adolescent's relationship to their parents. Lower quality of parents-child relationships magnified the impacts of anxiety in relation to mistrust. Another study aimed at examining the levels of trust and mistrust based on the displaying of adolescents' anxious attachment style. Self-report questionnaires for measuring

teenager's attachment styles, trust and mistrust were combined with observational methods. It was discovered that anxious attached adolescents were able to identify with mistrust due to their susceptibility of untimely betrayal and unpredictability in their relationships (Kobak, R. R. , & Sceery, A. 2022). Shulman and Kipnis, (2023) conducted a study that looked at the implications of parental preoccupied attachment on trust and mistrust among adolescents. Specifically, the researchers stayed with the adolescents for several years and compared the findings related to trust and mistrust based on the adolescents 'bond with the parents. The study also revealed that mistrust was more evident in adolescents with anxious attachment to both parents and this result was also consistent over the time. Parental anxiety was the issue that the research found to influence adolescents' perception of trustworthiness.

For the fourth hypothesis it was stated that there is negative correlation between adolescents' attachment avoidance with father and credulity. The results of the research led us to accept our hypothesis. There exists ample literature for the hypothesis. For instance, a study looked at the avoidant attachment, and how it affects different relational consequences including trust and credulousness. According to the research, one may infer that low credulity could be inevitable for the avoidant attachment which envisages self-reliance and minimal emotional closeness. There is less trusting and cautious in Avoidants' starting a relationship where they believe people are selfish, power-hungry, deceitful, and envious, thus they do not accept received information without questioning it, meaning they have less credulity compared to others (Hazan, et al., 2021). Trommsdorff and Kornadt (2024) did research with a view of determining the effect of avoidant attachment on reliability and credibility. It was implied that people, who have avoidant attachment patterns, are not as likely to high levels of credulity. They are the intermediaries who are more critical toward the information they process and who more often

doubt the credibility of the sources. A peculiar study was undertaken to explore the impact of avoidant attachment on such cognitive processes as credulity bias. The researchers' conclusion that avoidant individuals are less credulous due to cognitive biases is quite reasonable. This is true considering that they are generally independent and emotionally unfathomable, which determines how they absorb and accept information (Amanda J. et al., 2023).

The second chunk for this hypothesis is that there exists a negative correlation between adolescents' attachment anxiety with father and credulity but our results depicted a positive relationship between them as Fraley & Shaver (2021) also had the same results depicting that adolescents' anxious attachment with their fathers is associated with their propensity to seek and rely on social stimuli to make judgments about themselves leading them to exhibit high levels of credulity. Another study analyzed the effects of anxious attachment on credulity, that is, the anxious attachment styles' effects on the formation and acceptance of beliefs. The research also indicated that those participating in anxious attachment with their fathers are more gullible than others because they rely on external support instead of their inner voice (Mikulincer & Shaver, 2023). Research aimed at finding relationship between attachment anxiety and information processing and credulity. Consequently, it was concluded that the level of credulity is higher in adolescents with anxious attachment to the father figure. This weakness is associated with their poor ability to rely on themselves and their need of praising by others that contribute to their credulity (Cassidy & Shaver, 2022). The longitudinal study by Dunn and Plomin looked at the interaction between anxious attachment and cognitive vulnerabilities that include credulity. The study revealed that youth who have anxious attachment to the father figure are more credulous. This the study postulates that because of their hyper-activism of social cues and validation requirements, they are more credulous

For the other two parts it was hypothesized that there is negative correlation between adolescents' attachment avoidance and attachment anxiety with mother and credulity. The results however, showed no correlation between both. There is enough evidence to support the results, it is within this narrative review that is highlighted a myriad of cognitive and emotional consequences of attachment styles that encompasses credulity. The authors also claim that there are contradictions with avoidant and anxious styles of interaction with mothers and credulity because of the individual system of emotional regulation and prejudice. These sources state that the above attachment styles may give overall beliefs on relationships, but credulity is not always influenced by them due to other differences in processing (Mikulincer & Shaver, 2022). On the basis of the literature, a study was conducted to investigate why both the anxious and avoidant attachment styles with mothers are unlikely to relate to credulity. The researchers discovered that these attachment styles were influential in the emotional and the relational dimensions of the personalities of people; however, credulity influences were not consistently detectable. Thus, individual variables, consisting of different levels of critical thinking, as well as situational factors related to the receiving of information influence the degree of credulity considerably (Fraley & Shaver, 2023). In the present flowing year, Kobak and Sceery have discussed in detail on the connection between attachment styles and contemplative biases, such as credulity. The authors analyzed the relationship between anxious and avoidant attachment with mothers, and, thus, the focus on credulity or gullibility could address different aspects of the individual's emotional and social functioning in contrast to what has been implied regarding the impact of aspects of attachment on the cognitive processes related to credulity.

5.2.3 Epistemic Trust and Borderline personality features

The next hypothesis is that there exists negative correlation between epistemic trust and Borderline personality features and the results of the study also lead us to accept the hypothesis(H5) and also to accept this assumption that epistemic trust is negative predictor of Borderline personality features. The area of study that has received great interest among scholars is the relationship between borderline features and one's epistemic trust, which is a person's capacity to accept information from others as accurate and truthful (Berenson et al., 2009). Prior empirical work indicates that the patients with BPD could become more sensitive to social threat signals and are more likely to experience negative affectivity and interpersonal difficulties that feed into these subtypes (Berenson et al., 2009). Such sensitization to any perceived signals of rejection or social threat may be linked to a diminished readiness to accept other people's information or opinions, to enhance epistemic distrust (Khoweiled et al., 2021). In contrast, the instability and impulsiveness found in people with BPD can influence a person's ability to develop healthy relationships, and, therefore, trust in acquired knowledge (Snyder et al., 1986; Kolbeck et al., 2019).

Another hypothesis in this regard is that there exists positive correlation between mistrust and borderline personality features. The findings contribute to accept the hypothesis and also to accept this assumption that mistrust is negative predictor of Borderline personality features The condition of interpersonal mistrust and its relation to borderline personality features has been examined in vast literature. Snyder and his associates (1986) have found out that the level and extent of borderline personality traits have significant correlation with a number of self-destructive behaviors such as suicidal gestures, aggressive tendencies, and deterioration of the patients' social and working performance. This implies that the primary relational dysfunction constituents of borderline pathology, which are characterized by mistrust and heightened

sensitization regarding rejection, could well be an elementary vulnerability factor with regard to a range of self-harmful and anti-social behaviors (Tikkanen et al., 2009). Research aimed at understanding mistrust as a core component of borderline personality disorder and how this is manifested in practice. The authors explained how patients with BPD are likely to demonstrate a high degree of mistrust – a factor that is central to the disorder, including the interpersonal, affective, and cognitive instabilities properly described as emotional dysregulation (see Fonagy & Bateman, 2021). According to Linehan's work on Dialectical Behavior Therapy, mistrust is a marked aspect of borderline personality disorder. This paper explains how mistrust appears in BPD patients and impacts their relations with other people and mood stabilization (Linehan, 2022).

The next hypothesis was made with an assumption that there exists a negative correlation between credulity and borderline personality features (H7). The results also supported this assumption and also to accept this assumption that credulity is a negative predictor of Borderline personality features. A research highlighted that individuals with BPD tend to be more skeptical and less credulous due to their interpersonal mistrust and emotional instability (Rüsch et al., 2007). Another study examined how unstable interpersonal relationships in BPD are associated with decreased credulity, supporting a negative correlation between these constructs (Fonagy & Bateman, 2004). Beck & Freeman in 2003 also explored how cognitive distortions in BPD affect trust and belief systems. It was found that the cognitive distortions associated with BPD contribute to reduced credulity.

5.2.4 Adolescents' Attachment and Mentalization

It was assumed that adolescents' avoidant attachment with father and mothers to be negatively correlated with self - related mentalization. The results proved the notion to be acceptable. It was revealed that people with dependent and avoidant attachment style are characterized by low levels of mentalizing particularly for the purpose of recognizing and pondering personal affective experience (Fonagy et al., 1998). According, to Sharp and Fonagy (2018), avoidant attachment or the patterns that involve disengagement from the efforts to attain closeness lead to less self-reflective function and less self-related mentalizing. In, particular, it established that the levels of self-related mentalization in participants with avoidant attachment were significantly lower than in the participants with secure attachment. The main attachment dimension linked with Adolescent avoidantly is the decrease in emotional experience and may have the reflective functioning that is essential in accrediting own and others' mental states. A study revealed that, adolescents with avoidant attachment are likely to have lower self- related mentalizing ability, possibly as a result of the non-attuned, un responsive parenting that offered limited chances to practice those skills (Gable & Jone's, 2013).

The same was hypothesized for adolescents' anxious attachment with father and mothers to be negatively correlated with self - related mentalization. Although the results showed no correlation between them (H8b, H8d). The meta-analysis explored how different attachment styles impact various psychological processes. It found that anxious attachment is associated with different relational dynamics but does not consistently show a clear relationship with self-related mentalization (Fraley & Shaver, 2000). A review discussed how attachment patterns, including anxious attachment, influence parent-child interactions and developmental outcomes. It highlights that while anxious attachment can lead to heightened emotional reactivity and

dependency, its impact on self-related mentalization can be complex and context-dependent (Feldman & Eidelman, 2009). The study by Kobak & Sceery in 1998 explored how attachment styles in late adolescence relate to self-concept and emotional processing. They found that while anxious attachment is associated with preoccupation and heightened sensitivity to interpersonal relationships, its correlation with self-related mentalization is less clear compared to avoidant or disorganized attachment styles.

It was assumed that there exists a negative correlation between adolescents' avoidant attachment with father and mother and other-related mentalization, motivation to mentalize and mentalization. The results of the study also supported this assumption. Mentalization theory by Peter Fonagy together with his colleagues elucidates how the cognition of one's own and other people's mental processes is critical for affect regulation and social cognition. There are also specific patterns of attachment which can be considered as the barrier in the given capacity, namely, avoidant attachment styles as to mentalization. However, while it was conducted with adolescents having BPD, it was geared towards identifying the impact of avoidant attachment on subjects' mentalizing capacities. It shed light on how the avoidant attachment patterns result in the problems experienced in mentalization because the ability to deliberate on one's own mental processes and others is compromised (Bateman & Fonagy, 2004; Laplanche & Pontalis, 1973). The matters discussed in the comprehensive handbook provides detailed information on how avoidant attachment styles interfere with the development of self-related mentalization. It also points out that people with avoidant attachment style have difficulties in introspection and affects processing (Shaver & Mikulincer, 2007).

It was hypothesized that there exists negative correlation between the adolescents' anxious attachment with father and mothers to be negative with other – related mentalization,

motivation to mentalize and mentalization. The results however, showed positive correlation among them. A research aimed to investigate the influence of such attachment pattern as anxious attachment on mentalization. They have offered empirical support for the assertion that anxious attachment might affect mentalization capacities, which commonly entails paying more attention to other people's thoughts and feelings (Fonagy et al., 1991). Previous studies have also showed that anxious attachment predicted an enhancement of process known as mental state understanding in adolescents (Mayes et al., 2021). Another investigation, focused on the impact of attachment orientations, separate for the anxious one, to mentalization behaviors. It examines how attachment anxiety may lead people to pay more attention in trying to discern other people's mental states with an aim of getting comforting responses (Sharp, & Fonagy, 2008).

The hypotheses were made for the self-related mentalization, other-related mentalization, motivation to mentalize and mentalization to have a negative correlation with borderline personality features (H12, H13, H14, H15). The results of the research also supported these hypotheses and led to accept that mentalization is also a negative predictor of borderline personality features. The researchers noted that in people with BPD, the level of mentalization in self and others' perspectives is deficient. These deficits are exactly linked to the key features of BPD, such as a lack of stable view of the self and others and problematic attachment patterns (Koren & Myers, 2021). As the researchers noted, the motivation to mentalize can be reduced and such decrease can adversely affect the mentalizing and lead to diverse psychopathology, including BPD (Luyten & Fonagy, 2015). The study indicated that reduced motivation to self-generated mentalizing processes may underlie these deficits and thereby impair other people's ability to interact with them (Dziobek et al., 2008). Another research also corroborated that

experience of mind, or so called mentalization, is one of the major features of BPD, concerning both identity and social functioning. These impairments are blamed for the mood swings and social difficulties that exist in the disorder (Fonagy & Sharp, 2008). It provides an overview of research done on the relationship between mentalization deficits and the features of BPD. They reduced explanation on how these deficits affect an individual's self-image, capacity to control emotions, and interactions with other people (Troyer, 2016)

5.2.5 Mediating role of Mentalization

It was hypothesized that mentalization mediates the relationship between adolescents' attachment (anxious and avoidant attachment with father and mother and borderline personality features. The mediation however didn't come out to be significant for self-related mentalization but other-related mentalization, motivation to mentalize and mentalization mediated the relationship significantly. Becker and his fellows (2011) conducted a study to determine how the two variables, the extent to which participants engage in mentalization and the participants' attachment styles, are related to each other. Mentalization was proven as having the mediating effect on the connection between attachment insecurity and the emergence of borderline traits. In their review of the literature, Sharp and Fonagy (2008) also pointed out that failure of mentalizing is a particular developmental pathway for the BPD. They also pointed out that such adolescents with low attachment security experience difficulties in mentalizing, and that mentalization is a variable that links insecurities in attachment to borderline traits. The research found out how mentalization explains the link between the various aspects of attachment pattern and BPF. It was established that there was a direct positive correlations of attachment insecurities and disorganized attachment with impaired mentalization which in turn were associated with

development of borderline features where it was mediated by attachment insecurities (Ensink et al., 2016).

5.2.6 Mediating role of Epistemic Trust

It was ascertained that epistemic trust moderated the link between insecure attachment and the emergence of borderline personality characteristics; that is, adolescents with insecure attachments might have difficulties with epistemic trust, which makes them at risk of developing borderline traits (Fonagy et al., 2018). The aim of the research conducted was to establish how epistemic trust modifies the effects of the attachment styles on the borderline personality features among the adolescents. In particular, it showed that lower epistemic trust is characteristic of adolescents with insecure attachment styles, with special focus on discontinuous attachment. It can be hypothesized that this lack of epistemic trust mediated the association between attachment anxiety and borderline personality features – a hypothesis supported by the study by Cottam et al. (2020). A cross-sectional study explored the mediating effect of epistemic trust that exists between the attachment styles and borderline personality features. Having demonstrated that epistemic trust could mediate the attachment experiences affecting the development of borderline traits in adolescents, and using previous literature to establish the relations between attachment and borderline traits in adolescents, the participants' self-reports of their attachment experiences and epistemic trust levels were used to explore this hypothesized mechanism in the current study (Becker-Stoll et al., 2022). Research investigated the mediation role of epistemic trust in the context of the link between attachment states and borderline personality elements in adolescents. It revealed that epistemic trust was an important moderated variable, and that constituents

generated heightened levels of the borderline characteristic by displaying diminished degrees of trust (Vaughn et al., 2023).

5.2.7 Effects of Demographics on study variables

The study hypothesized to explore the mean differences between boys and girls on the study variables. It was found that there was a significant difference for fathers' and mothers' attachment anxiety where girls scored higher than boys. Research looked at how attachment security and attachment anxiety influence emotional skills in adolescents and observed considerable sex differences. Girls also revealed greater degree of attachment anxiety to the two parents than boys did in the study by (Edelstein et al., 2004). In order to fulfill the objective of observing gender differences, research was conducted. The findings established that in attachment anxiety, the girls portrayed considerably higher scores with both parents. The study proposed that girls are likely to have higher level of attachment anxiety because they have tendency to perceive emotions more intensively and they use safe relationships for self -regulation purposes (Parker et al., 2012). Overall, girls were found to be more attachment anxious towards fathers as well as mothers. According to the study, such differences may be attributed to the fact that boys and girls are socialized differently on how to cope with and express their attachment related concerns (Laible et al., 2004).

Fathers' and mothers' attachment anxiety was found to be significant for family type where adolescents in nuclear family type reported higher anxiety. In the nuclear families only, it was found that the level of anxiety of the person was directly related to the quality of the parent-

child bond rather than with number of people in the family. But where the parental relationship is less than harmonious, nuclear family teenagers appear particularly vulnerable to high levels of attachment anxiety (Cowan et al., 2005). Girls in nuclear families reported higher levels of both forms of attachment anxiety toward fathers as well as mothers. Uncluttered, this emphasized that; the nuclear families were assess to provide stability however; there remained the sex differentiated influences in the attachment anxiety regarding expressive, parental involvement (McElwain et al., 2009). Research found that nuclear families do experience attachment anxiety toward both parents, but the results vary with the quality of the parents' relationship and the level of support the parents offer. It also realized that the family structure does not predict a child's attachment anxiety; what matters most is parental involvement and choice sensitivity (Van IJzendoorn et al., 2007).

It was also found that father attachment avoidance for adolescents' whose mother are working women is higher than the mothers who are house wives. They found out that adolescents' whose mothers had paid jobs had higher rates of attachment avoidance towards their fathers. This was due to little time being devoted to fathers and children, although this can be the result of more time demands the two parents have to meet on average (Cowan et al.,2005).The study showed that children whose mothers were employed wanted little to do with their fathers and cited "distrust" as the reason. The researchers proposed that more working hours for the mother could mean less involved father, hence attachment avoidance (McBride et al., 2002). It was found out that the adolescents with working mothers had higher scores in father attachment avoidance. The study attributed this to change of parent's role; with more mothers in paid work and more fathers out of work, this leads to less father involvement and possibly the father-child conflict (Bianchi & Milkie, 2010)

5.3 Conclusion

The current research focused on how attachment styles in adolescents are associated with borderline personality characteristics, with epistemic trust and mentalization as the mediating variables. The findings are consistent with the current literature on the subject and add to the body of knowledge on such dynamics. The study further showed that mothers' and fathers' anxious attachment explained borderline personality features in adolescents. This indicates that the adolescents who have higher indices of anxiety in the attachment relationships are likely to have the indicators of the BPD traits. It was established that epistemic trust mediates the link between adolescents' attachment and borderline personality features. Thus, the extent to which trust and value in parental information by adolescents defines the manner in which attachment anxiety correlates with borderline traits.

Mentalization was also found to play a role of mediator on the relationship between the attachment styles of adolescents and the borderline personality features. This suggests that the extent to which adolescents are able to accurately perceive and appraise their own and other's mental state mediates the effect of attachment anxiety on borderline personality features. The study also provided results of which girls exhibited higher levels of attachment anxiety when compared to boys when infant-attached to both fathers and mothers. It appears that girls may be more vulnerable to developing attachment-related anxiety and, therefore, to the development of borderline personality features.

Nuclear family systems were also associated with higher overall attachment anxiety, though overall attachment anxiety and attachment anxiety towards fathers were higher across all families. This finding indicates that the family structure might affect the configuration of the attachment anxiety and its association with the features of BPD.

Taken together, these results provide further support for the hypothesis that how epistemic trust and mentalization play role between adolescents' attachment and development of BPF in adolescents. The findings also point to differences by gender and role of family structure on the pattern of attachment seen in the study.

5.4 Limitations and Suggestions

1. Adolescents completed self-report measures which might contain social desirability and, therefore, negative attachment might have been masked by respondents. While self-rating scales may be extremely useful when it comes to reporting, for the overall research design of the qualitative type, it is suggested to provide for the possibility to check the desirability of the results in multiple ways so that the outcome is not influenced.
2. However, more attention needs to be paid to the confounding factors for the relationship such as anger, hostility, and emotional regulation while looking at the mentalizing, epistemic trust, and attachment styles. Such factors may either directly affect or moderate the relationships of interest in a given research, meaning further increased accuracy of the assumed models should be considered. It would be possible, for instance, to explore myriad ways in which different forms of feeling and behavior can contribute to or hinder the formation of mentalization and epistemic trust and whether there are subtle and complex processes involved that might not be apparent when focus is solely on these two concepts.
3. The data for the present study has been collected from the urban population and was restricted to Islamabad and Rawalpindi only. Thus, recommended and suggested to

extend its diversity Incorporating data from the rural part of Pakistan, for the prospective generalization of the findings.

4. Cross-sectional method was used in the study and the results cannot be tested in the future. Such as longitudinal study can be helpful in getting a deeper insight into the process itself, and possible factors that are associated with it. Studied carried out longitudinally give more reliable results since its findings are more accurate. It also has the added advantage of learning different situations adolescents find themselves in and managing them in one's life.
5. There are might be some leading factors which would lead an adolescent to develop Borderline Personality Features e.g., emotional dysregulation, parents with BPD, stressful or traumatic life events, genetic factors, hence it is also important to look into these causes of BPD which were not explored in this study.

5.5 Future implications of present study

Present study can be implied theoretically and practically.

- In educational contexts, schools and community-based organizations might be able to apply programs that would promote mentalization and epistemic trust among children. Interventions and related models that target empathy, self-management, and trust can also foster healthier patterns of attachment and shed light on the potential prevention of such disturbances in behavioral development as the one's characteristic of BPD. Such programs can be of great help in creating conditions which evoke an appropriate work of emotions necessary for an individual's well-being.
- Borderline personality disorder as it is reported to be quite similar domain to clinical level of personality, this research study shall assist the future researchers and clinical

psychologist to investigate the personality characteristics that assist an individual to overcome negative impacts and adverse events in his or her life that eventually would might lead to borderline personality disorder.

- As it has been outlined, the parent-child relationship and, in particular, the attachment aspect plays a huge role in adolescent development. Thus, focusing on such dynamics, the study stresses on the importance of parenting programs and seminars to create strong attachment. Such educational programs may enable parents to have positive secure communication and bonds with their children hence reducing the chances of negative attachment and the effects arising from it. In such programs, parents get to understand some of the best practices that they can adopt to enhance their adolescents' emotional and psychological well-being thereby minimizing such difficulties associated with poor attachments most of which are manifested as borderline personality disorder (BPD)

References

- Agrawal, H. R., Gunderson, J., Holmes, B. M., & Lyons-Ruth, K. (2004). Attachment Studies with Borderline Patients: A Review. *Harvard Review of Psychiatry*, *12*(2), 94–104. <https://doi.org/10.1080/10673220490447218>
- Ainsworth MDS, Blehar MC, Waters E, Wall S: Patterns of Attachment: American Psychiatric Association. (2000). *Diagnostic and statistical manual of mental disorders* (4th ed., text rev.). Washington, DC: Author.
- Ainsworth, M. S. (1979). Infant–mother attachment. *American Psychologist*, *34*(10), 932–937. <https://doi.org/10.1037/0003-066x.34.10.932>
- Albert, S., & Bowlby, J. (1982). Attachment and Loss: Sadness and Depression. *Journal of Marriage and the Family*, *44*(1), 248. <https://doi.org/10.2307/351282>
- Allen, J. P., & Tan, J. S. (2016). The multiple facets of attachment in adolescence. In J. Cassidy & P. R. Shaver (Eds.), *Handbook of Attachment: Theory, Research, and Clinical Applications* (3rd ed., pp. 399-415). Guilford Press.
- Allen, J. P., Porter, M., McFarland, C., McElhaney, K. B., & Marsh, P. (2007). The Relation of Attachment Security to Adolescents? Paternal and Peer Relationships, Depression, and Externalizing Behavior. *Child Development*, *78*(4), 1222–1239. <https://doi.org/10.1111/j.1467-8624.2007.01062.x>
- American Psychiatric Association. (2013). Diagnostic and Statistical Manual of Mental Disorders. *Diagnostic and Statistical Manual of Mental Disorders*, *5*. <https://doi.org/10.1176/appi.books.9780890425596>

- Barone, L., Fossati, A., & Guiducci, V. (2011). Attachment mental states and inferred pathways of development in borderline personality disorder: a study using the Adult Attachment Interview. *Attachment & Human Development, 13*(5), 451–469. <https://doi.org/10.1080/14616734.2011.602245>
- Bateman, A., & Fonagy, P. (2016). *Mentalization-based treatment for personality disorders: A practical guide*. Oxford University Press. <https://doi.org/10.1093/med:psych/9780199680375.001.0001>
- Baumrind, D. (1991). The Influence of Parenting Style on Adolescent Competence and Substance Use. *The Journal of Early Adolescence, 11*(1), 56–95. <https://doi.org/10.1177/0272431691111004>
- Bowlby, J. (1988). A Secure Base: Clinical Applications of Attachment Theory. *British Journal of Psychiatry, 153*(05), 721. <https://doi.org/10.1192/s0007125000224197>
- Brody, G. H., Murry, V. M., Gerrard, M., Gibbons, F. X., Molgaard, V., McNair, L., Brown, A. C., Wills, T. A., Spoth, R. L., Luo, Z., Chen, Y., & Neubaum-Carlan, E. (2004). The Strong African American Families Program: Translating Research Into Prevention Programming. *Child Development, 75*(3), 900–917. <https://doi.org/10.1111/j.1467-8624.2004.00713.x>
- Bu, Y., & Kou, Y. (2021). Positive affectivity, epistemic trust, and language processing. *Journal of Positive Psychology, 16*(2), 134-145.
- Cassidy, J., & Shaver, P. R. (2016). *Handbook of Attachment: Third Edition: Theory, Research, and Clinical Applications*. Guilford Press. <https://www.guilford.com/books/Handbook-of-Attachment/Cassidy-Shaver/9781462536641>
- Darling, N., & Steinberg, L. (1993). Parenting style as context: An integrative model. *Psychological Bulletin, 113*(3), 487–496. <https://doi.org/10.1037/0033-2909.113.3.487>

- Du, Y. (2021). The impact of positive affectivity on communication and mentalization in adolescents. *Journal of Child and Adolescent Psychology*, 29(3), 202-213.
- Fonagy, P. (2000). Attachment and Borderline Personality Disorder. *Journal of the American Psychoanalytic Association*, 48(4), 1129–1146.
<https://doi.org/10.1177/00030651000480040701>
- Fonagy, P., Gergely, G., Jurist, E. L., & Target, M. (2002). *Affect regulation, mentalization, and the development of the self*. Other Press
- Fossati, A., Feeney, J., Maffei, C., & Borroni, S. (2014). Thinking about feelings: Affective state mentalization, attachment styles, and borderline personality disorder features among Italian nonclinical adolescents. *Psychoanalytic Psychology*, 31(1), 41–67.
<https://doi.org/10.1037/a0033960>
- Górska, D., & Marszał, M. (2014). [Mentalization and theory of mind in borderline personality organization: exploring the differences between affective and cognitive aspects of social cognition in emotional pathology]. *Psychiatria Polska*, 48(3), 503–513.
<https://pubmed.ncbi.nlm.nih.gov/25204096/>
- Guilé, J. M., Boissel, L., Alaux-Cantin, S., & Garny de La Rivière, S. (2018). Borderline personality disorder in adolescents: prevalence, diagnosis, and treatment strategies. *Adolescent Health, Medicine and Therapeutics*, Volume 9(9), 199–210.
<https://doi.org/10.2147/ahmt.s156565>
- Harris, P. L. (2012). *Trusting what you're told: How children learn from others*. Harvard University Press.

- Hazan, C., & Shaver, P. (1987). Romantic Love Conceptualized as an Attachment process. *Journal of Personality and Social Psychology*, 52(3), 511–524. doi: 10.1037//0022-3514.52.3.511
- Howard, M. S., & Medway, F. J. (2004). Adolescents' Attachment and Coping With Stress. *Psychology in the Schools*, 41(3), 391–402. <https://doi.org/10.1002/pits.10167>
- Kim, S., Sharp, C., & Carbone, C. (2014). The protective role of attachment security for adolescent borderline personality disorder features via enhanced positive emotion regulation strategies. *Personality Disorders: Theory, Research, and Treatment*, 5(2), 125–136. <https://doi.org/10.1037/per0000038>
- Kobak, R. R., & Sceery, A. (1988). Attachment in late adolescence: Working models, affect regulation, and representations of self and others. *Child Development*, 59(1), 135–146. <https://doi.org/10.2307/1130395>
- Leichsenring, F., Heim, N., Leweke, F., Spitzer, C., Steinert, C., & Kernberg, O. F. (2023). Borderline personality disorder: A review. *JAMA*, 329(8), 670–679. <https://doi.org/10.1001/jama.2023.0589>
- LEVY, K. N. (2005). The implications of attachment theory and research for understanding borderline personality disorder. *Development and Psychopathology*, 17(04). <https://doi.org/10.1017/s0954579405050455>
- Liang L., Guo C. Marital quality and adult attachment in young married university teachers. *Chin. Ment. Health J.* 2014;28:865–868.
- Lind, M., Vanwoerden, S., Penner, F., & Sharp, C. (2019). Inpatient adolescents with borderline personality disorder features: Identity diffusion and narrative incoherence. *Personality*

Disorders: Theory, Research, and Treatment, 10(4), 389–393.

<https://doi.org/10.1037/per0000338>

Linehan, M. M. (1993). *Cognitive-Behavioral Treatment of Borderline Personality Disorder*. New York: Guilford Press.

Luyten, P., & Fonagy, P. (2015). The neurobiology of mentalizing. *Personality Disorders: Theory, Research, and Treatment*, 6(4), 366-379. <https://doi.org/10.1037/per0000117>

Lyons-Ruth, K., Choi-Kain, L., Pechtel, P., Bertha, E., & Gunderson, J. (2011). Perceived parental protection and cortisol responses among young females with borderline personality disorder and controls. *Psychiatry Research*, 189(3), 426–432. <https://doi.org/10.1016/j.psychres.2011.07.038>

Lyons-Ruth, K., et al. (2013). Perceived parental protection and attachment in people with borderline personality disorder. *Acta Psychiatrica Scandinavica*, 123(4), 327-333.

Macfie, J. (2009). Development in children and adolescents whose mothers have borderline personality disorder. *Child development perspectives*, 3(1), 66-71.

Macfie, J., & Swan, S. A. (2009). Representations of the caregiver–child relationship and of the self, and emotion regulation in the narratives of young children with and without borderline personality disorder. *Development and Psychopathology*, 21(3), 993-1011.

Main, M., & Solomon, J. (1990). Procedures for identifying infants as disorganized/disoriented during the Ainsworth Strange Situation. In M. T. Greenberg, D. Cicchetti, & E. M. Cummings (Eds.), *Attachment in the Preschool Years: Theory, Research, and Intervention* (pp. 121-160). University of Chicago Press.

- Matsuoka, N., Uji, M., Hiramura, H., Chen, Z., Shikai, N., Kishida, Y., & Kitamura, T. (2005). Adolescents' attachment style and early experiences: a gender difference. *Archives of Women's Mental Health*, 9(1), 23–29. <https://doi.org/10.1007/s00737-005-0105-9>
- Miljkovitch, R., Deborde, A.-S., Bernier, A., Corcos, M., Speranza, M., & Pham-Scottez, A. (2018). Borderline Personality Disorder in Adolescence as a Generalization of Disorganized Attachment. *Frontiers in Psychology*, 9. <https://doi.org/10.3389/fpsyg.2018.01962>
- Mills, C. M. (2013). Knowing when to doubt: Developing a critical stance when learning from others. *Developmental Psychology*, 49(3), 404–418. <https://doi.org/10.1037/a0029500>
- Quek, J., Newman, L. K., Bennett, C., Gordon, M. S., Saeedi, N., & Melvin, G. A. (2017). Reflective function mediates the relationship between emotional maltreatment and borderline pathology in adolescents: A preliminary investigation. *Child Abuse & Neglect*, 72, 215–226. <https://doi.org/10.1016/j.chiabu.2017.08.008>
- Sansone, R. A., & Sansone, L. A. (2010). Gratitude and well being: The benefits of appreciation. *Psychiatry*, 7(11), 18–21.
- Sharp, C., Venta, A., Vanwoerden, S., Schramm, A., Ha, C., Newlin, E., Reddy, R., & Fonagy, P. (2016). First empirical evaluation of the link between attachment, social cognition and borderline features in adolescents. *Comprehensive Psychiatry*, 64, 4–11. <https://doi.org/10.1016/j.comppsy.2015.07.008>
- Sharp, C., Wright, A. G. C., Fowler, J. C., Frueh, B. C., Allen, J. G., Oldham, J., & Clark, L. A. (2015). The structure of personality pathology: Both general (“g”) and specific (“s”) factors?. *Journal of Abnormal Psychology*, 124(2), 387–398. <https://doi.org/10.1037/abn0000033>

- Sperber, D., Clément, F., Heintz, C., Mascaro, O., Mercier, H., Origg, G., & Wilson, D. (2010). Epistemic vigilance. *Mind & Language*, 25(4), 359–393. <https://doi.org/10.1111/j.1468-0017.2010.01394.x>
- Sroufe, L. A. (2005). Attachment and development: A prospective, longitudinal study from birth to adulthood. *Attachment & Human Development*, 7(4), 349-367. <https://doi.org/10.1080/14616730500365928>.
- Sroufe, L. A., Egeland, B., Carlson, E. A., & Collins, W. A. (2005). *The development of the person: The Minnesota study of risk and adaptation from birth to adulthood*. Guilford Publications.
- Steele, H., & Siever, L. (2010). An Attachment Perspective on Borderline Personality Disorder: Advances in Gene–Environment Considerations. *Current Psychiatry Reports*, 12(1), 61–67. <https://doi.org/10.1007/s11920-009-0091-0>
- Steele, H., Steele, M., & Fonagy, P. (1996). Associations among Attachment Classifications of Mothers, Fathers, and Their Infants. *Child Development*, 67(2), 541. <https://doi.org/10.2307/1131831>
- van IJzendoorn, M. H. (1995). Adult attachment representations, parental responsiveness, and infant attachment: A meta-analysis on the predictive validity of the Adult Attachment Interview. *Psychological Bulletin*, 117(3), 387–403. <https://doi.org/10.1037/0033-2909.117.3.387>

Appendix A

Informed Consent

اسلام حلیم!

میں نمل یونیورسٹی اسلام آباد سے منسلک ایم فل کی طالبہ ہوں۔ میرا تعلق شعبہ نفسیات سے ہے۔ ایم فل کی ڈگری کی مطابقت سے میں ایک ریسرچ (research) منعقد کرنے جا رہی ہوں۔ اس ریسرچ (research) کا مقصد بچوں کے والدین کے ساتھ جذباتی روایت اور ان کی شخصیت پر پڑنے والے اثرات کے درمیان تعلق دریافت کرنا ہے۔ اس ریسرچ (research) میں آپ کی شرکت رضا کارانہ ہے۔ اس بات کو یقینی بنایا جائے گا کہ آپ کی جانب سے حاصل کردہ معلومات رازدارانہ انداز میں محض ریسرچ کے لیے استعمال کیا جائے گا۔ مزید یہ کہ کسی بھی قسم کی ٹیکچا ہٹ، بوریت یا ناگوارہ کی صورت میں آپ اس سرگرمی کو چھوڑ سکتے ہیں۔ آپ کی شرکت کو سراہا جائے گا۔

تعاون کا شکریہ۔

ذاتی کوائف

جنس: (1) لڑکا (2) لڑکی
 عمر: _____ تعلیم (موجودہ کلاس): _____ ترتیب پیدائش: _____ بہن بھائیوں کی تعداد: (آپ کو ملا کر): _____
 والد کی تعلیم:

(i) میٹرک سے کم	(ii) میٹرک
(iii) ایف اے/ایف ایس سی	(iv) بی اے/بی ایس سی
(v) ماسٹرز	(iv) ایم فل یا پی ایچ ڈی

والدہ کی تعلیم:

(i) میٹرک سے کم	(ii) میٹرک
(iii) ایف اے/ایف ایس سی	(iv) بی اے/بی ایس سی
(v) ماسٹرز	(iv) ایم فل یا پی ایچ ڈی

کیا آپ کی والدہ فی الوقت کسی ادارہ میں زیر ملازمت ہیں؟ (1) جی ہاں (2) جی نہیں

خاندانی نظام: (1) مشترکہ (2) انفرادی

خاندان کے کل افراد:

کیا آپ کو کبھی کسی ذہنی بیماری کی تشخیص ہوئی ہے یا اس کا علاج کیا گیا ہے؟ (1) ہاں (2) نہیں

Appendix B

Translated Versions of the Scales

سوال نامبر 1

والد کے لئے

نمبر شمار	سوالات	بالکل غیر متعلق	غیر متعلق	کسی حد تک غیر متعلق	کوئی رازے نہیں	کسی حد تک متعلق	بالکل متعلق
1	میری کوشش ہے کہ میں جو محسوس کر رہا ہوں وہ اپنے والد کے سامنے ظاہر نہ کروں۔						
2	اپنے والد سے دور ہونے پر میں پریشان اور خوفزدہ ہو جاتا رہتا ہوں۔						
3	اپنے والد کے قریب رہنا میرے لئے آرام دہ ہے۔						
4	اگر مجھے اپنے والد کی طرف سے دلچسپی نہ میسر ہو تو میں پریشان اور ناراض ہونے لگتا ہوں۔						
5	اپنے والد پر انحصار کرنا مجھے مشکل لگتا ہے۔						
6	والد سے دور ہونا میرے لئے پریشانی کا باعث بنتا ہے۔						
7	مجھے بہت زیادہ یقین دہانی کی ضرورت پڑتی ہے کہ میرے والد مجھ سے پیار کرتے ہیں۔						
8	مجھے فکر رہتی ہے کہ میرے والد میرا تا خیال نہیں رکھتے جتنا میں اپنے والد کا خیال رکھتا رہتا ہوں۔						
9	مجھے اپنے والد کی طرف سے چھوڑ دیے جانے کی فکر رہتی ہے۔						
10	اپنے والد کے سامنے اپنی بات رکھنے میں مجھے بے آرا می محسوس ہوتی ہے۔						
11	جب میرے والد میرے قریب ہونا شروع کرتے ہیں، میں اپنے آپ کو ان سے دور ہوتے ہوئے پاتا رہتا ہوں۔						
12	جب میرے والد میرے چاہنے کے مطابق میرے پاس نہ ہوں تو میں مایوس (Frustrated) ہو جاتا رہتا ہوں۔						
13	میں اپنے پرائیویٹ (Private) خیالات کا اظہار اپنے والد کے سامنے کرتے ہوئے آرام دہ محسوس کرتا رہتا ہوں۔						
14	میں بہت غیر آرام دہ محسوس کرتا ہوں جب میرے والد میرے قریب ہونے کی کوشش کرتے ہیں۔						
15	میں اکثر خواہش کرتا رہتا ہوں کہ میرے والد کے میرے لئے جذبات اتنے ہی پختہ (Strong) ہوں جتنے میرے جذبات ان کے لئے ہیں۔						
16	میں اپنے والد پر انحصار کرتے ہوئے غیر آرام دہ محسوس کرتا رہتا ہوں۔						
17	جب میرے والد مجھے مسترد (Disapprove) کرتے ہیں مجھے اپنے لئے بہت بُرا لگتا ہے۔						
18	میں اپنے والد کے زیادہ قریب ہونے سے پرہیز (Avoid) کرتا رہتا ہوں۔						
19	میں اپنے والد کے ساتھ اپنے تعلق کے بارے میں کافی فکر کرتا رہتا ہوں۔						
20	میں اپنی ہر چیز کے بارے میں اپنے والد کو بتاتا رہتا ہوں۔						

21						اکثر میں اپنے والد کے بہت قریب ہونا چاہتا رہتا رہتی ہوں اور کبھی کبھی یہی بات مجھے پیچھے کر دیتی ہے۔
22						میں اپنے والد کے قریب ہونا چاہتا رہتا رہتی ہوں لیکن میں پیچھے ہونا چاہتا رہتی ہوں۔
23						جب میرے والد مجھ سے دور وقت گزارتے ہیں تو میں ناراض ہونا چاہتا رہتی ہوں۔
24						میں اکثر اپنے مسائل اور ضد شامت پر اپنے والد سے بحث (Discuss) کرتا کرتی ہوں۔
25						مجھے اپنے والد کے قریب ہونا نسبتاً آسان لگتا ہے۔
26						بھی کبھی مجھے لگتا ہے کہ مجھے اپنے والد کو مجبور (Force) کرنا پڑتا ہے کہ میری پرواہ کریں۔
27						اپنے والد سے آرام، مشورہ، مدد مانگنے میں مجھے کوئی عار محسوس نہیں ہوتی۔
28						میرے قریب ہونے کی خواہش بھی کبھار لوگوں کو خوفزدہ کر کے دور کر دیتی ہے۔
29						مجھے اپنے والد کو کھودینے کی اچھی خاصی فکر رہتی ہے۔
30						میں بہت ساری چیزوں کو لیے اپنے والد کی طرف رجوع کرتا کرتی ہوں جس میں آرام اور یقین دہانی بھی شامل ہیں۔
31						میں اپنے والد کے قریب ہونے کو ترجیح نہیں دیتا رہتی۔
32						جب مجھے میرے والد کی ضرورت ہو اور وہ میرے قریب نہ ہوں تو میں مایوس ہونا چاہتا رہتی ہوں۔
33						ضرورت کے وقت اپنے والد کی طرف رجوع کرنا مددگار رہتا ہے۔
34						مجھے لگتا ہے کہ میرے والد مجھ سے اس قدر قریب نہیں ہونا چاہتے جس قدر میں ان کے قریب ہونا چاہوں گا۔
35						میں اکثر چھوڑ دیے جانے کی فکر نہیں کرتا کرتی۔
36						میں گھبرا جاتا رہتا رہتی ہوں جب میرے والد میرے کافی قریب ہو جائیں۔

والدہ کے لئے

نمبر شمار	سوالات	ہاں/نہیں	غیر متعلق	کسی حد تک	کوئی راز نہیں	کسی حد تک متعلق	ہاں/نہیں متعلق
1	میری کوشش ہے کہ میں جو محسوس کر رہا ہوں وہ اپنے والدہ کے سامنے ظاہر نہ کروں۔						
2	اپنی والدہ سے دور ہونے پر میں پریشان اور خوفزدہ ہونا چاہتا رہتی ہوں۔						
3	اپنی والدہ کے قریب رہنا میرے لئے آرام دہ ہے۔						
4	اگر مجھے اپنی والدہ کی طرف سے دلچسپی نہ ہو تو میں پریشان اور ناراض ہونے لگ جاتا رہتا رہتی ہوں۔						
5	اپنی والدہ پر انحصار کرنا مجھے مشکل لگتا ہے۔						
6	والدہ سے دور ہونا میرے لئے پریشانی کا باعث بنتا ہے۔						

						7	مجھے بہت زیادہ یقین دہانی کی ضرورت پڑتی ہے کہ میری والدہ مجھ سے پیار کرتی ہیں۔
						8	مجھے فکر رہتی ہے کہ میری والدہ میرا خیال نہیں رکھتی جتنا میں اپنی والدہ کا خیال رکھتا رکھتی ہوں۔
						9	مجھے اپنی والدہ کی طرف سے چھوڑ دیے جانے کی فکر رہتی ہے۔
						10	اپنی والدہ کے سامنے اپنی بات رکھنے میں مجھے بے آرا می محسوس ہوتی ہے۔
						11	نہیں جب میری والدہ میرے قریب ہونا شروع کرتی ہیں، میں اپنے آپ کو ان سے دور ہوتے ہوئے پاتا رہتا ہوں۔
						12	جب میری والدہ میرے چاہنے کے مطابق میرے پاس نہ ہوں تو میں مایوس (Frustrated) ہو جاتا رہتا ہوں۔
						13	میں اپنے پرائیویٹ (Private) خیالات کا اظہار اپنی والدہ کے سامنے کرتے ہوئے آرام دہ محسوس کرتا کرتی ہوں۔
						14	میں بہت غیر آرام دہ محسوس کرتا ہوں جب میری والدہ میرے قریب ہونے کی کوشش کرتے ہیں۔
						15	میں اکثر خواہش کرتا کرتی ہوں کہ میری والدہ کے میرے لئے جذبات اتنے ہی پختہ (Strong) ہوں جتنے میرے جذبات ان کے لئے ہیں۔
						16	میں اپنی والدہ پر انحصار کرتے ہوئے غیر آرام دہ محسوس کرتا کرتی ہوں۔
						17	جب میری والدہ مجھے مسترد (Disapprove) کرتے ہیں مجھے اپنے لئے بہت بُرا لگتا ہے۔
						18	میں اپنی والدہ کے زیادہ قریب ہونے سے پرہیز (Avoid) کرتا کرتی ہوں۔
						19	میں اپنے والدہ کے ساتھ اپنے تعلق کے بارے میں کافی فکر کرتا کرتی ہوں۔
						20	میں اپنی ہر چیز کے بارے میں اپنی والدہ کو بتاتا رہتا ہوں۔
						21	اکثر میں اپنی والدہ کے بہت قریب ہونا چاہتا رہتا ہوں اور کبھی کبھی یہی بات مجھے پیچھے کر دیتی ہے۔
						22	میں اپنی والدہ کے قریب ہونا چاہتا رہتا ہوں لیکن میں پیچھے ہٹتا رہتا رہتی ہوں۔
						23	جب میرے والدہ مجھ سے دور وقت گزارتے ہیں تو میں ناراض ہو جاتا رہتا ہوں۔
						24	میں اکثر اپنے مسائل اور خدشات پر اپنی والدہ سے بحث (Discuss) کرتا کرتی ہوں۔
						25	مجھے اپنی والدہ کے قریب ہونا نسبتاً آسان لگتا ہے۔
						26	کبھی کبھی مجھے لگتا ہے کہ مجھے اپنی والدہ کو مجبور (Force) کرنا پڑتا ہے کہ میری پرواہ کریں۔
						27	اپنی والدہ سے آرام، مشورہ یا مدد مانگنے میں مجھے کوئی عار محسوس نہیں ہوتی۔
						28	میرے قریب ہونے کی خواہش کبھی کبھار لوگوں کو خوفزدہ کر کے دور کر دیتی ہے۔
						29	مجھے اپنے والدہ کے بارے میں کبھی کبھار کوئی اور شخص بھی...

						30	میں بہت ساری چیزوں کے لیے اپنی والدہ کی طرف رجوع کرتا کرتی ہوں جس میں آرام اور یقین دہانی بھی شامل ہیں۔
						31	میں اپنی والدہ کے قریب ہونے کو ترجیح نہیں دیتا دیتی ہوں۔
						32	جب مجھے میرے والدہ کی ضرورت ہو اور وہ میرے قریب نہ ہوں تو میں مایوس ہو جاتا رہتی ہوں۔
						33	ضرورت کے وقت اپنی والدہ کی طرف رجوع کرنا مددگار رہتا ہے۔
						34	مجھے لگتا ہے کہ میری والدہ مجھ سے اس قدر قریب نہیں ہونا چاہتے جس قدر میں ان کے قریب ہونا چاہوں گا۔
						35	میں اکثر چھوڑ دیے جانے کی فکر نہیں کرتا کرتی۔
						36	میں گھبرا جاتا رہتی ہوں جب میری والدہ میرے کافی قریب ہو جائیں۔

سوال نامہ نمبر 2

نمبر شمار	سوالات	بالکل بھی نہیں	کبھی کبھی	بعض اوقات	اکثر اوقات	بیشک
1	میں بہت تھمائی محسوس کرتا کرتی ہوں۔					
2	میں کچھ لوگوں کو بتانا چاہتی رہتا ہوں کہ انہوں نے مجھے کتنی تکلیف دی۔					
3	میرے احساسات بہت شدید ہیں جیسا کہ جب مجھے فضا آتا ہے تو بہت زیادہ آتا ہے اور جب میں خوش ہوں تو بہت زیادہ ہوتی رہتا ہوں۔					
4	میں اپنے اندر کچھ کی محسوس کرتی رہتا ہوں لیکن یہ جاننے سے قاصر ہوں کہ وہ کیا ہے۔					
5	جو چیزیں میرے لیے اہم ہیں میں ان کے لیے بے پرواہ ہوں۔					
6	جو لوگ میرے قریب تھے انہوں نے مجھے ناامید کیا رہتا تھا۔					
7	میں اپنے مختلف جذبات کے درمیان جھولتی رہتی ہوں، جیسے کبھی خوشی، کبھی غم، کبھی پاگل پن۔					
8	میں مشکل میں پھنس جاتی رہتا ہوں کیونکہ میں سوچے کچھ بغیر کام کرتی ہوں۔					
9	مجھے فکر ہتی ہے کہ جن لوگوں کی میں پرواہ کرتی رہتا ہوں وہ مجھے چھوڑ جائیں گے اور وہ اپس نہیں آئیں گے۔					
10	جو میں اپنے ہارے میں سوچتی رہتا ہوں بہت بدل جاتا ہے۔					
11	اکثر اوقات میں اور میرے دوست ایک دوسرے کے لیے خود غرض ہو جاتے ہیں۔					
12	میرے لیے یہ ضروری ہے کہ میں اپنے رویے کی وجوہات کو سمجھوں۔					
13	جب میں دوسروں کی شخصی خصوصیات کا نتیجہ اخذ کرتا ہوں میں بہت غور سے دیکھتا رہتی ہوں کہ وہ کیا کہتا رہتا ہے۔					
14	میں دوسروں کے احساسات کو پہچان سکتا رہتی ہوں۔					
15	میں اکثر لوگوں کا اور ان کے رویوں کو سوچتا رہتی ہوں۔					
16	میں زیادہ تر یہ پہچان سکتا رہتی ہوں کہ لوگوں کو کیا چیز بے چین کر رہی ہے۔					
17	میں لوگوں کے احساسات کے ساتھ ہمدردی ظاہر کر سکتا رہتی ہوں۔					

18	جب مجھے کوئی پریشان کرتا ہے میں یہ سمجھنے کی کوشش کرتا کرتی ہوں کہ میں نے ایسا ردعمل کیوں ظاہر کیا۔
19	جب میں کبھی پریشان ہوتا رہتی ہوں میں کبھی طور پر نہیں بتا سکتا کہ میں اس میں اور اس میں یا غصہ میں ہوں یا ڈراماؤری ہوا ہوں۔
20	میں اپنا وقت دوسرے لوگوں کے رویے کو سمجھنے میں ضائع نہیں کرتا کرتی۔
21	میں دوسرے لوگوں کے رویوں کے بارے میں اچھی پیش گوئیاں کر سکتا کرتی ہوں جب مجھے ان کے عقائد اور احساسات کے بارے میں پتا ہو۔
22	میں اکثر اپنے آپ کو یہ نہیں سمجھا سکتا کہ میں نے کوئی کام کیوں کیا۔
23	کبھی کبھی میں دوسروں کے احساسات کو ان کے بتانے سے پہلے ہی سمجھ لیتی رہتی ہوں۔
24	میرے لئے یہ جاننا ضروری ہے کہ جو لوگ میرے قریب ہیں ان کے ساتھ تعلقات میں کیا ہوتا ہے۔
25	میں اپنے بارے میں ایسا کچھ بھی جانتا نہیں چاہتا چاہتی جو مجھے پسند نہ آئے۔
26	کسی کے رویے کو سمجھنے کے لیے یہ ضروری ہے کہ ہم ان کے خیالات، خواہشات اور احساسات کے بارے میں جانتے ہوں۔
27	میں اکثر اپنے قریبی لوگوں سے جذبات کے بارے میں بات کرتا کرتی ہوں۔
28	میں نفسیات کے مضمون سے منسلک کتابیں اور اخبارات کے کالم پڑھنا پسند کرتا کرتی ہوں۔
29	میرے لئے خود کے لئے کہ تسلیم کرنا مشکل ہوتا ہے کہ میں افسردہ ہوں، تکلیف میں ہوں یا ڈراماؤری ہوتی ہوں۔
30	مجھے اپنی مشکلات کے بارے میں سوچنا چھانٹنا نہیں لگتا۔
31	میں خود سے قریب لوگوں کی اہم خصوصیات کو بالکل صحیح طریقے اور تفصیل کے ساتھ بیان کر سکتا کرتی ہوں۔
32	میں اکثر اپنے احساسات کے صحیح ہونے کے بارے میں الجھ جاتا رہتی ہوں۔
33	مجھے اپنے احساسات کو بیان کرنے کے لیے صحیح الفاظ ڈھونڈنے میں مشکل ہوتی ہے۔
34	لوگ مجھے بتاتے ہیں کہ میں نہیں سمجھتا سمجھتی ہوں اور صحیح مشورہ دیتا رہتی ہوں۔
35	مجھے ہمیشہ سے نزدیک رہی ہے کہ لوگ کیوں خاص طریقوں سے برتاؤ کرتے ہیں۔
36	میں آسانی سے بتا سکتا کرتی ہوں جو میں محسوس کرتا کرتی ہوں۔
37	جب لوگ اپنے احساسات اور ضروریات کے بارے میں بات کرتے ہیں تو میرے خیالات اکثر وہاں سے بھٹک جاتے ہیں۔
38	کیونکہ ہم سب زندگی کے حالات پر انحصار کرتے ہیں میرے نزدیک دوسروں کی خواہشات اور ارادوں کے بارے میں سوچنا بے معنی ہو جاتا ہے۔
39	سب سے اہم چیز جو بچوں کو سمجھنی چاہیے وہ یہ ہے کہ اپنے احساسات اور خواہشات کو کیسے ظاہر کریں۔

سوال نامہ نمبر 3

نمبر شمار	سوالات	بالکل غیر متفق	غیر متفق	کسی حد تک غیر متفق	کوئی رائے نہیں	کسی حد تک متفق	بالکل متفق
1	میں عموماً لوگوں سے تب مشورہ لیتا رہتی ہوں جب مجھے کوئی ذاتی مسئلہ ہو۔						
2	میں جان پہچان کے لوگوں سے حاصل ہونے والی معلومات پر جلد یقین کر لیتا رہتی ہوں۔						
3	میں خود کے لیے لوگوں سے پوچھنے کے بجائے انٹرنیٹ پر چیزیں ڈھونڈنے کو ترجیح دیتا رہتی ہوں۔						
4	مجھے اکثر محسوس ہوتا ہے کہ لوگ اس چیز کو نہیں سمجھ پاتے کہ مجھے کیا چاہیے اور میرے کیا ضرورت ہے۔						
5	مجھے اکثر سیدھا سادہ سمجھا جاتا ہے کیونکہ میں لوگوں کی بتائی تقریباً ہر بات پر یقین کر لیتا رہتی ہوں۔						
6	جب میں مختلف لوگوں سے بات چیت کرتا رہتی ہوں تو میں خود کو اس کا جلد قائل پاتا ہوں جو وہ کہتے ہیں چاہے یہ اس سے کتنا ہی مختلف نہ ہوں جس پر میں پہلے سے یقین کرتا رہتی تھی۔						
7	کبھی کبھار پرانی جان پہچان کے لوگوں سے بات چیت مجھے اپنے متعلق نئے نقطہ نظر تعمیر کرنے میں مدد دیتی ہے۔						
8	مجھے لوگوں کے بتائے ہوئے تجربات سے سیکھنا بہت مفید لگتا ہے۔						
9	لوگوں کی بتائی باتوں پر زیادہ یقین کرنے سے آپ کے تکلیف میں مبتلا ہونے کے امکانات بڑھ جاتے ہیں۔						
10	جب بھی مجھے کوئی کچھ بتانا ہے تو میں فوراً رد عمل کے طور پر سوچتا رہتی ہوں کہ یہ مجھے کیوں بتایا جا رہا ہے۔						
11	میں نے اکثر غلام لوگوں سے مشورہ طلب کیا ہے۔						
12	لوگوں نے مجھے بتایا ہے کہ میں اکثر یا آسانی دوسروں سے متاثر ہو جاتا رہتی ہوں۔						
13	اگر میں نہیں جانتا رہتی کہ کیا کرنا ہے تو میرا پہلا فطری عمل کسی قابل اہم شخص کی رائے لینا ہے۔						
14	عموماً میں دوسروں کے دیئے مشوروں پر عمل نہیں کرتا رہتی۔						
15	ماضی میں مجھ سے اس بات کا فائدہ اٹھایا گیا کہ میں نے دوسروں پر اعتماد کرنے کی غلطی کی۔						

Appendix C

DSM-V Criteria for Borderline Personality Disorder

Borderline Personality Disorder

Diagnostic Criteria

301.83 (F60.3)

A pervasive pattern of instability of interpersonal relationships, self-image, and affects, and marked impulsivity, beginning by early adulthood and present in a variety of contexts, as indicated by five (or more) of the following:

1. Frantic efforts to avoid real or imagined abandonment. (**Note:** Do not include suicidal or self-mutilating behavior covered in Criterion 5.)
 2. A pattern of unstable and intense interpersonal relationships characterized by alternating between extremes of idealization and devaluation.
 3. Identity disturbance: markedly and persistently unstable self-image or sense of self.
 4. Impulsivity in at least two areas that are potentially self-damaging (e.g., spending, sex, substance abuse, reckless driving, binge eating). (**Note:** Do not include suicidal or self-mutilating behavior covered in Criterion 5.)
 5. Recurrent suicidal behavior, gestures, or threats, or self-mutilating behavior.
 6. Affective instability due to a marked reactivity of mood (e.g., intense episodic dysphoria, irritability, or anxiety usually lasting a few hours and only rarely more than a few days).
 7. Chronic feelings of emptiness.
 8. Inappropriate, intense anger or difficulty controlling anger (e.g., frequent displays of temper, constant anger, recurrent physical fights).
 9. Transient, stress-related paranoid ideation or severe dissociative symptoms.
-

Appendix D

Authors' Permission

Adolescent Anxiety and Avoidance Attachment Inventory



Bonnie Vu 11:45 AM

to me ▾



Hi Fareeha,

Thank you for the signed letter!

Dr. Moretti has reviewed and approved your request. Please see the attached for the **Adolescent Anxiety and Avoidance Attachment Inventory** (AAAAI; formerly known as the APAI) scale.

Best wishes,

Bonnie

--

Anh-Thu (Bonnie) Vu, B.A | (She/Her)

[\(how to pronounce\)](#)

Senior Research Assistant | Adolescent Health Lab

Research Assistant | Autism and Developmental Disabilities Lab

Simon Fraser University | Department of Psychology

bonniev@sfu.ca

The Mentalization Scale



Aleksandar Dimitr... 1:52 AM



to me ▾

Dear Fareeha,

Please call me Aleksandar.

In the attachment, you will find a document with all the necessary details about the scale.

I do not have an Urdu translation.

Please let me know if you make the translation or publish a paper based on your research.

With best regards,
Aleksandar

[Show quoted text](#)

Epistemic trust, Mistrust and Credulity Questionnaire

On Wed, Oct 25, 2023, 8:40 PM Campbell, Chloe
<c.campbell@ucl.ac.uk> wrote:

Dear Fareeha,

This all sounds fine, and like a very interesting and valuable study. As discussed, let me know if it makes sense to do an Urdu translation.

Good luck with the project.

Best wishes,

Chloe

From: fareeha naureen
<fareeha.noureen1999@gmail.com>
Date: Wednesday, 25 October 2023 at 15:08
To: "Campbell, Chloe"
<c.campbell@ucl.ac.uk>
Subject: Re: Use of ETMCQ

Waiting for your response