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# The association between conditional regard and relationship quality: A daily diary study

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## Abstract

Research on conditional positive regard (CPR) and conditional negative regard (CNR) has shown that these practices are associated with some maladaptive qualities of romantic relationships. The current study investigated the associations between CPR and CNR and romantic relationship satisfaction using a daily diary methodology. A multilevel analysis of a sample of 80 individuals revealed that both CPR and CNR were negatively linked to relationship satisfaction at the between-person level. However, at the within-level, CPR was positively linked to relationship satisfaction, whereas CNR showed a negative association. The findings are discussed within self-determination theory (E. L. Deci & R. M. Ryan, 2000) and highlight how motivating one's partner by providing positive regard may be satisfying in the short term but controlling in the long run.

Partners in a romantic relationship engage in various practices to adjust to one another. Contingent acceptance and affection is a common and powerful way to get things done one's way (Kanat-Maymon, Roth, Assor, & Raizer, 2016). This strategy has been termed *conditional regard* (e.g., Assor, Roth, & Deci, 2004). Compared to other control strategies, such as verbal and physical coercion, conditional regard can be viewed as a more indirect strategy, involving subtler and less painful tactics, but is just as effective (Dunbar & Burgoon, 2005; Falbo & Peplau, 1980; Knee, Canevello, Bush, & Cook, 2008).

Conditional regard in close relationships is defined as the belief that the regard of the partner depends on whether one complies with the partner's expectations (e.g., Assor et al., 2004; Kanat-Maymon et al., 2016). The practice of

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conditional regard was found to have considerable maladaptive correlates when used by close others, such as parents and romantic partners (Kanat-Maymon, Roth, Assor, & Reizer, 2012), mostly because it involves aspects of rejection when expectations are not met (see Assor, Kanat-Maymon, & Roth, 2014). However, research on the facets of contingent acceptance in this strategy is scant and more controversial (Israeli-Halevi, Assor, & Roth, 2015). Moreover, studies on the correlates of conditional regard have relied heavily on retrospective reports, which are more susceptible to faulty reconstruction processes (Scollon, Prieto, & Diener, 2009). Hence, the present research aimed to overcome these shortcomings by focusing on the unique effects of contingent acceptance and rejection on romantic relationship quality using a diary methodology.

Recently, the concept of conditional regard was further differentiated into two facets: conditional positive regard (CPR) and conditional negative regard (CNR, which is also known as love withdrawal; Assor & Tal, 2012; Roth, Assor, Niemiec, Ryan, & Deci, 2009). CPR involves showing much more affection and acceptance than usual only when the partner fulfills a particular expectation, desire, or

requirement. It conveys the message that the close other will approve of, love, or accept the partner much more than usual if he or she acts or behaves in a specific way. By contrast, CNR involves withholding affection and warmth when the partner does not behave according to a specific expectation or demand.

The practice of CNR, or love withdrawal, has been examined in close relationships in several studies that have demonstrated its eroding effect (Assor & Tal, 2012; Roth, Assor, et al., 2009; Roth, Ron, & Benita, 2009; Swanson & Mallinckrodt, 2001). For instance, Kanat-Maymon et al. (2016) found that perceived romantic partner's CNR was negatively associated with relationship quality. Similar findings were reported for parent-child relationships. For example, parent's love withdrawal was found to be strongly related to a child's unsecured attachment, beyond other family factors (Swanson & Mallinckrodt, 2001). In addition, Roth et al. (2009) found that adolescents' perceptions of parental CNR were associated with resentment toward parents; Israeli-Halevi et al. (2015) found it to correlate with maladaptive emotion regulation.

Contrary to CNR and love withdrawal, there has been little research on CPR. Several studies have used a combined measure of CPR and CNR, making the unique contribution of CPR to close relationship quality unclear (Assor et al., 2004). To the best of our knowledge, Kanat-Maymon et al. (2016) is the only study to have explored outcomes of CPR in intimate relationships. The findings showed that certain costs were associated with attempts to control a partner's behavior by using CPR, above and beyond CNR. Specifically, when people use CPR to shape their partner's behavior, this may predict their partner's behavioral engagement. However, the partner may also feel obligated or constrained to comply with the expectations to preserve his/her mate's love and acceptance. This controlled experience was found to deteriorate relationship quality (Kanat-Maymon et al., 2016; Roth et al., 2009). Roth et al. (2009), who also contrasted CPR with CNR, found that only perceived parental CNR but not CPR was associated with children's resentment toward their parents. They showed, however, that CPR predicted a sense of internal compulsion, which reflects a shallow and conflictual level of internalization and behavioral regulation (Deci & Ryan, 2000).

In contrast, many relationship and parenting guidance books suggest that people can benefit from receiving more attention and affection when they meet the standards defined by their close others, such as parents, teachers, or romantic partners (e.g., Latham, 1994; Sears, Maccoby, & Levin, 1957; Steinberg, 2004). Although studies have shown that retrospective reports of CPR in close relationships have psychological costs, there is in fact some evidence that in the short term, CPR may have positive effects. The Heavey, Christensen, and Malamuth (1995) study on partner's communication strategies found that at least in the short term, using positive affect as a power strategy was related to a positive view of the relationship. Consistent with this finding, Assor et al. (2004) indicated that parental conditional regard (a combined measure of both CNR and CPR) was linked to children's short-lived satisfaction after successfully meeting parental expectations in four domains (academics, sports, prosocial behavior, and emotional functioning). Assor and Tal (2012) found that academic CPR was related to experiencing extreme self-esteem enhancement following success. In an earlier study, Assor et al. (2004) suggested that satisfaction following success may be attributed to CPR, which may be experienced as benign in the short term, but in the long term may exert a sense of compulsion to behave according to parental (or spousal) expectations so as to preserve this conditional affection. Given this lack of agreement on the desirability of PCR as an interpersonal power strategy, especially in the short term, there appears to be a clear need for further research on CPR that may shed light on the extent to which linking one's regard to the partner's enactment of desired behaviors is indeed benign.

Self-determination theory (SDT; Deci & Ryan, 2000) may shed more light on the correlates of CNR and CPR. SDT posits that people have innate psychological needs for *relatedness*, *autonomy*, and *competence* that must be satisfied to achieve optimal psychological growth (Deci & Ryan, 2000) and to maintain

satisfying close relationships (Patrick, Knee, Canevello, & Lonsbary, 2007). *Relatedness* refers to the "need to belong," that is, the need to feel connected and loved (Baumeister & Leary, 1995; Deci & Ryan, 2000). *Autonomy* refers to the need for self-direction and organization, as expressed in striving to form authentic, self-directed values and goals and freedom from coercion (e.g., deCharms, 1968; Deci & Ryan, 2000). *Competence* refers to one's need to feel efficacious and capable (Deci & Ryan, 2000).

From the SDT perspective, CNR is likely to thwart or at least not support the three basic needs. It is likely to undermine the need for autonomy because it involves pressure to behave in ways that the individual may not fully accept. It may also thwart the need for relatedness because it involves withholding affection. It is also not likely to support competence because it may not involve a high degree of structure or bolster confidence in one's abilities. Kanat-Maymon et al. (2016) found that perceived partner's CNR was negatively associated with satisfying the needs for autonomy and relatedness. The lack of need satisfaction was put forward to account for the negative correlates of CNR with facets of relationship satisfaction.

Similar to CNR, CPR also involves nonvolitional demands and expectations and is therefore likely to thwart the need for autonomy as found in Kanat-Maymon et al. (2016). However, because CPR entails receiving future love and acceptance, it would appear to support the need for relatedness and also competence to some extent. Thus, CPR may pit the fulfillment of the need for autonomy against the fulfillment of the need for relatedness. This conflict between needs may explain the mixed associations between CPR and relationship satisfaction. In the short term, meeting the partner's expectations may result in getting more affection and attention than usual. This may temporarily enhance relationship satisfaction, as was evident in studies by Heavey et al. (1995) and Assor and Tal (2012). However, repeated exposure to this form of interaction may also cause the object of CPR to feel that the partner's love and acceptance are only temporary, far from guaranteed, and may disappear if he or she does not comply. In the long run, such conditional love may not support relatedness in a reliable way. Kanat-Maymon et al. (2016) found that retrospective reports of CPR were not significantly associated with satisfaction of the need for relatedness.

Another factor that limits a better understanding of the effects of CPR and bolsters the need for further research is that the few studies that have been conducted have relied on retrospective reports of these strategies. This method of data collection has a number of shortcomings (Nisbett & Wilson, 1977; Ross, 1989; Tourangeau, Rips, & Rasinski, 2000), including memory bias in which responses are susceptible to state-congruent recall and hence reflect a faulty reconstruction of the phenomenon (Scollon et al., 2009). Obtaining more accurate data on the experience of conditional regard may thus shed light on the correlates of CNR and CPR with relationship satisfaction.

The main goal of this study was thus to better understand the impact of CPR and CNR on intimate relationship satisfaction. It examined this association using a daily diary methodology. The daily diary method is a recommended way to overcome the limitations of retrospective reports (Bolger, Davis, & Rafaeli, 2003). Among other advantages, daily diaries allow researchers to obtain more accurate evidence on the daily and temporary experiences of people in a natural context than summaries of self-reports or retrospections (Bolger et al., 2003). Moreover, this sort of longitudinal design makes it possible to examine hypotheses more rigorously.

Based on previous studies, which have clearly shown that CNR tends to associate negatively with relationship quality, we hypothesized that CNR would be inversely related to relationship quality both at the daily level and at the aggregated level across days (i.e., person level). Despite the general psychological costs of CPR documented in previous research, there is some evidence for positive associations with dimensions of relationship satisfaction in the immediate term. Thus, we hypothesized that at the daily level, CPR would evidence a positive association with relationship satisfaction. However, based on

previous research, we hypothesized that at the person level (an aggregate of the daily level), CPR would be negatively associated with relationship satisfaction. In other words, we posited that the more immediate effect of CPR from one's partner on relationship satisfaction would be positive but that the accumulation and repetition of CPR experiences over time would be likely to undermine relationship satisfaction.

#### Method

## **Participants**

A total of 80 students (54 female) from undergraduate psychology classes participated in this study in exchange for course credit. All the participants were involved in an exclusive romantic relationship. Participants' ages ranged from 20 to 26 (M = 22.98, SD = 1.44). Their relationship duration ranged from 6 to 145 months (M = 23.30, SD = 26.78). Participants were required to have regular, easy access to a computer with Internet capabilities.

#### Procedure

Data collection was carried out in two phases: an orientation session in the laboratory and 14 days of diary recording. First, participants were invited to the lab and attended an orientation session in which research assistants explained the procedure for completing interval-contingent diary entries. The daily entries were made online via a data collection website. The research assistants then asked participants to sign up for daily telephone, e-mail, and text message reminders to submit diary entries. In the second phase, participants began completing their online diary entries on the Sunday of the week following their orientation session. Participants were asked to submit diary entries for 14 consecutive days, completing an entry by midnight each night. Participants who did not complete an entry by midnight were allowed to submit their entry until noon of the following day. When participants forgot to submit their entries, the research assistants contacted them on the following day to remind them to submit the entry by noon. Participants completed 1,110 out of 1,120 possible entries over the 14-day period.

#### Measures

The diary entry website assessed the responses to the questionnaire packet using several measures. For the purpose of this study, the measures were the daily perceived CPR and CNR from their partner, daily relationship satisfaction, and daily perceived closeness. The measures were modified to assess the daily levels of the variables rather than the participants' overall experiences (i.e., the diary entries asked participants to "consider TODAY only" when completing the entries).

## Daily perceived CPR and CNR

Daily CPR and CNR were assessed on a 10-item scale (Kanat-Maymon et al., 2016), which was modified to assess daily experiences. Five items measured daily CPR ("Today, I felt that my partner cared for me much more only because I satisfied my partner's expectations and wishes"), and five items measured daily CNR ("Today, when I did not meet my partner's expectations, my partner stayed away from me for a while"). The items were rated on a 1 (*strongly disagree*) to 7 (*strongly agree*) scale. Cronbach's αs were .77 for CPR and .88 for CNR.

## Daily relationship satisfaction

This variable was assessed with a single item ("Today, I am very satisfied with my relationship with my partner"). The item was rated on a 1 (*strongly disagree*) to 7 (*strongly agree*) scale.

## Daily perceived closeness

Perceived closeness was assessed by the pictorial instrument of the Inclusion of Other in the Self (IOS) Scale (Aron, Aron, & Smollan, 1992). The IOS Scale refers to feeling connected with another and behaving interdependently. The measure consists of a series of images with two circles (labeled *self* and *other*) that overlap in equally increasing degrees in

|                              | M    | SD   | 1     | 2    | 3     |
|------------------------------|------|------|-------|------|-------|
| 1. CPR                       | 4.04 | 1.65 |       |      |       |
| 2. CNR                       | 1.89 | 1.17 | .04   |      |       |
| 3. Relationship satisfaction | 5.50 | 1.37 | .19** | 38** |       |
| 4. Perceived closeness       | 7.97 | 1.45 | .16** | 34** | .76** |

**Table 1.** Descriptive statistics and correlations between research variables

*Note.* CPR = conditional positive regard; CNR = conditional negative regard. \*\*p < .01.

seven stages. Participants selected the picture that best represented their relationship, and their selection was translated into a score from 1 to 7, with a higher score reflecting more IOS.

#### Results

Table 1 presents the descriptive statistics and correlations among the research variables at the daily level. CPR and CNR were not significantly associated, which further supports their discriminative validity. As expected, CNR was inversely associated with relationship satisfaction and closeness. CPR was positively associated with relationship satisfaction and closeness. These results should be interpreted with caution because Pearson correlation coefficients do not differentiate between withinand between-person levels.

To examine the associations between partner's perceived CPR and CNR and relationship quality in a more rigorous manner, we used a two-level hierarchical model in which daily measures were nested within each person (Bryk & Raudenbush, 1992). This analysis controls for dependencies in the same person's reports across days. Daily CPR and CNR and person-level CPR and CNR predicted each person's outcomes (relationship satisfaction and closeness). Person-level CPR and CNR were computed as aggregated scores of the daily level entries across 14 days. In addition, to rule out daily serial dependency, we controlled for the previous day's outcome. In other words, in predicting today's relationship satisfaction, yesterday's relationship satisfaction was partialed out. Thus, the outcome variables were interpreted as change scores or residual changes from the previous day. The generic daily level (i.e., within-person) equation was:

OUTCOME<sub>ti</sub> = 
$$\pi_{0i} + \pi_{1i} \left( \text{CPR}_{ti} \right)$$
  
+  $\pi_{2i} * \left( \text{CNR}_{ti} \right) + \pi_{3i}$   
\* (yesterday's outcome<sub>ti</sub>) +  $e_{ti}$ .

All Level 1 predictors were centered around the individual's mean, so the effects could be easily interpreted as deviations in outcomes associated with variations from the person's mean score across the days for which the person completed the diary entries. Each  $\pi$  coefficient in the daily-level equation (Level 1) had a corresponding component in the person-level model (Level 2), such that b represented the average slope for that predictor across persons. In Level 2, slopes were treated as random. The corresponding Level 2 equations for each Level 1 effect were:

$$\pi_{0i} = b_{00} + b_{01} (CPR_i) + b_{02} (NCR_i) + r_{0i}$$

$$\pi_{1i} = b_{10} + r_{1i}$$

$$\pi_{2i} = b_{20} + r_{2i}$$

$$\pi_{3i} = b_{30} + r_{3i}.$$

OUTCOME<sub>ti</sub> refers to daily relationship satisfaction and daily closeness scores of the *i*th individual on the *t*th day; CPR<sub>ti</sub> and CNR<sub>ti</sub> refer to the daily CPR and CNR scores of the *i*th individual on the *t*th day, respectively;  $\pi_{0i}$  refers to the random intercept, which represents the mean daily relationship satisfaction or daily closeness for the *i*th person across the days for which the person completed the diary entries;  $\pi_{1i}$  is the random slope that represents the day-level relation between CPR and the

| Predictors          | Relationship satisfaction |     |     | Percei         | Perceived closeness |     |  |
|---------------------|---------------------------|-----|-----|----------------|---------------------|-----|--|
|                     | В                         | SE  | β   | $\overline{B}$ | SE                  | β   |  |
| Daily level         |                           |     |     |                |                     |     |  |
| CPR                 | .27***                    | .03 | .32 | .24***         | .05                 | .27 |  |
| CNR                 | 35***                     | .05 | 29  | 27***          | .04                 | 22  |  |
| Yesterday's outcome | 04                        | .03 | 04  | .04            | .03                 | .04 |  |
| Person level        |                           |     |     |                |                     |     |  |
| CPR                 | 34***                     | .09 | 22  | 21             | .15                 | 12  |  |
| CNR                 | $18^{\dagger}$            | .09 | 13  | 31*            | .13                 | 22  |  |

**Table 2.** Multilevel model with perceived partner's positive and negative conditional regard as predictors of relationship satisfaction and closeness on a daily level and person level

*Note.* CPR = conditional positive regard; CNR = conditional negative regard. The *b* coefficients are unstandardized hierarchical linear modeling (HLM) weights, whereas the  $\beta$  coefficients refer to the standardized HLM weights.  $\dagger < .06. *p < .05. **p < .01. ***p < .001.$ 

outcome variables for the *i*th individual;  $\pi_{2i}$  is the random slope that represents the day-level relation between CNR and the outcome variables for the *i*th individual;  $\pi_{3i}$  is the random slope that represents the daily-level relation between yesterday's outcome and today's outcome variables; CPR<sub>i</sub> and CNR<sub>i</sub> refer to the aggregated CPR and CNR scores of the ith individual, respectively;  $b_{00}$  refers to the grand mean of the daily outcome variables (the averages of relationship satisfaction and closeness across all participants and all days);  $b_{01}$  and  $b_{02}$ are the effects of the aggregated CPR and CNR scores on the mean daily outcome variables;  $b_{10}$  and  $b_{20}$  are the mean slopes of the daily CPR and daily CNR;  $b_{30}$  refers to the mean slope of yesterday's outcome as a predictor of today's outcome variables; and  $r_{0i}$ ,  $r_{1i}$ ,  $r_{2i}$ , and  $r_{3i}$  represent the error terms for the intercept and the slope for the jth individual. We used the HLM7 to estimate the coefficients.

Table 2 presents the results of the MLM equations for each dependent variable. Results for the daily level (Level 1) revealed that the mean slope of CPR ( $b_{10}$ ) was positive and significant. In other words, when controlling for CNR and yesterday's satisfaction, daily CPR was a significant predictor of increase in daily relationship satisfaction. Similarly, when controlling for CNR and yesterday's closeness, daily CPR was a significant predictor of the increase in perceived closeness on that day compared to the previous day. Thus, across

all participants, relationship quality tended to increase on days when CPR was higher. In contrast, daily CNR significantly predicted a poor level of daily relationship satisfaction and closeness. These findings support our hypotheses that in the more immediate term, CNR is negatively associated with relationship quality, whereas CPR is positively associated with relationship quality.

At the person level (Level 2), our results suggested that, as expected, CPR and CNR ( $b_{01}$  and  $b_{02}$ , respectively) were negatively associated with relationship quality. Specifically, CPR had a significant inverse association with relationship satisfaction. The inverse association of CPR with perceived closeness was not significant. CNR was a significant predictor of poor closeness and was marginally associated with relationship dissatisfaction. These findings support our hypotheses that CPR and CNR are negatively related to relationship quality on the overall aggregated level (i.e., the person level).

## **Discussion**

This study is an extension of a previous pioneering research that explored conditional regard among romantic partners (Kanat-Maymon et al., 2016). Our aim was to provide a more rigorous examination of the association between CPR, CNR, and relationship quality among couples by using a daily diary method.

As hypothesized, perceived partner's CNR was associated with less perceived relationship satisfaction and closeness. This inverse correlation was evident at the person level and at the daily level. To the best of our knowledge, the current study is the first to demonstrate the detrimental consequences of CNR on the daily level. The results suggest that partners felt less close and satisfied in their relationship on days in which they perceived their partners as using CNR. This finding was found even while controlling for satisfaction and closeness from the previous day.

Thus, in accordance with previous research on the overall effect of CNR (Kanat-Maymon et al., 2016), our findings provide additional support for the assumption of the negative consequences of CNR on couples' romantic relationships. While previous studies have demonstrated the detrimental effects of CNR using mainly retrospective reports, the current investigation demonstrates the harmful consequences of CNR through a different methodology, which is considered more accurate in capturing temporary effects (Bolger et al., 2003).

CPR, however, has shown mixed effects. Here, at the person level, perceived CPR was inversely associated with relationship satisfaction. Therefore, at that level of analysis, the results of this study are compatible with previous findings suggesting that CPR is detrimental to close relationship satisfaction. For instance, Kanat-Maymon et al. (2016) showed that CPR was associated with relationship dissatisfaction. However, at the daily level, CPR was positively associated with both relationship satisfaction and closeness. Thus, this study suggests that participants were more satisfied and felt closer to their romantic partners on days in which they perceived their partners as offering CPR, despite CPR's undesirable consequences for relationship quality at the between-person level.

The positive association between CPR and relationship quality on the daily level can be explained according to the SDT framework of basic psychological needs (Deci & Ryan, 2000). In cases where the partner's demands and expectations did not affect autonomy in an extreme manner, receiving more attention and affection from a loved partner may have

satisfied the need for relatedness and thus increased relationship satisfaction and closeness in the sample examined here.

Interdependence theory (Rusbult, Arriaga, & Agnew, 2001), which posits that people are constantly evaluating their current interactions with their expectations (i.e., comparison level), can also help account for these findings. When desirable outcomes in an interaction exceed people's expectations, they experience satisfaction, whereas when outcomes are below the expected standard, people experience dissatisfaction (Rusbult et al., 2001). Given that relationship satisfaction refers to the degree of positive affect associated with the relationship, when one's partner provides much more attention and affection than usual, the result, in the short term, may be an enhancement in relationship satisfaction. However, repeated exposure to CPR may also be a snare because the cumulative experience of CPR results in relationship dissatisfaction. A possible explanation that can reconcile the discrepancies in the consequences of CPR over time is that CPR acts as a "bear hug" in that it controls partners by rewards (i.e., positive regard). That is, the temporary effects of receiving more regard can cause a temporary elevation in relationship quality because partners temporarily feel more accepted. However, this satisfaction is short-lived because the person is not truly being accepted for who he or she is as the acceptance is contingent on meeting the partner's expectations (Roth, Kanat-Maymon, & Assor, in press). Moreover, the continuous pressure to meet external standards may frustrate the need for autonomy. Because satisfaction of the need for autonomy is essential for relationship quality (Deci, La Guardia, Moller, Scheiner, & Ryan, 2006; La Guardia, Ryan, Couchman, & Deci, 2000), its frustration can explain the overall negative correlates of CPR with relationship quality. Further research is needed to map the ways in which PCR is associated with relationship satisfaction through both the need for autonomy and the need for relatedness.

A number of caveats to this study should be mentioned. First, although the data in the current study were all cross-sectional, we controlled for the outcome variables on the previous day, an analytical strategy that strengthens causation. Nevertheless, this method does not make it possible to draw definitive conclusions about the direction of causation. Gaining a fuller understanding of these processes would require experimental designs and further longitudinal examination, for instance, by manipulating conditional regard during a natural interaction between romantic partners.

Second, measuring perceived conditional regard using self-report measures assumes that people are aware that their partner's regard is contingent upon their compliance with their demands. Although reasonable, this assumption does not preclude the possibility that the partner's contingencies operate at subconscious levels or that people are merely projecting their own regard contingencies on their partners. Third, the current investigation was based on reports of only one of the partners. Using a single rater may inflate the associations between the research variables due to common rater variance (Podsakoff, MacKenzie, Lee, & Podsakoff, 2003). Future research should thus incorporate the partner's report with self-reports and collect data from both romantic partners. The fourth limitation concerns generalizability. The participants were heterosexual in the early years of their romantic relationships, and most of them were women. Further research is needed to explore the effects of CPR in later stages of a relationship.

Despite these limitations, this study highlights the complexity of implementing CPR in close relationships. The discrepancies in results between the person and daily levels open up new possibilities for future studies to research the more immediate and long-term effects of CPR. Another future line of research would be to investigate the antecedents of conditional regard, for instance, by studying whether perceived parental conditional regard serves as a predictor of conditional regard in romantic relationships.

In conclusion, the findings highlight once again the detrimental effects of CNR on relationship quality. Regarding CPR, the findings paint a more complicated picture, which may explain the lack of consensus in the literature. While in the long run, it appears that perceived CPR is detrimental to relationship quality, in the short term, CPR appears to generate temporary positive effects that amplify perceived relationship quality. Thus, gaining the love and esteem of a close other, even when these are contingent, is accompanied by increased relationship satisfaction. Further research is required to understand the processes by which romantic partners are controlled by contingent regard.

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