

# Mindset, Resilience, and Rejection Sensitivity in Individuals with Physical Disabilities

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## Keywords

physical disabilities, mindset, resilience, rejection sensitivity, social rejection, hierarchical regression, psychological intervention

## Disclaimers

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## Conflict of Interest

None declared

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## ABSTRACT

**Background:** Individuals with physical disabilities often experience social rejection, leading to heightened rejection sensitivity. Mindset and resilience may play crucial roles in how these individuals cope with rejection sensitivity, but their relationship has not been fully explored.

**Objective:** To examine the relationship between mindset, resilience, and rejection sensitivity in individuals with physical disabilities, and to determine if mindset and resilience predict rejection sensitivity.

**Methods:** A correlational research design was used, with a purposive sample of 70 participants (41 males, 29 females) from public colleges and universities in Lahore. Data were collected using the Mindset Inventory (Dweck, 1999), State-Trait Resilience Scale (Hiew, 1999), and Rejection Sensitivity Questionnaire (RSQ). Data were analyzed using SPSS version 25. Descriptive statistics, Pearson correlation, and hierarchical regression were applied.

**Results:** A fixed mindset was positively correlated with rejection sensitivity ( $r = 0.38, p < 0.01$ ). Resilience did not significantly predict rejection sensitivity. Demographic factors like family system ( $\beta = 0.31, p < 0.01$ ) and education ( $\beta = -0.27, p < 0.05$ ) were significant predictors.

**Conclusion:** Fixed mindset was linked to increased rejection sensitivity, while resilience did not predict it. Interventions should focus on modifying fixed beliefs to reduce rejection sensitivity in individuals with physical disabilities.

## INTRODUCTION

Individuals with physical disabilities encounter unique challenges, particularly in social and academic settings, where interactions often reinforce feelings of being different (1-3). The perception that non-disabled individuals form initial impressions based on observable traits can result in social exclusion and rejection, which increases vulnerability to feelings of rejection sensitivity. Rejection sensitivity, a tendency to anxiously anticipate, perceive, and overreact to rejection, is particularly heightened in those with physical disabilities as they navigate environments that are often not inclusive or supportive of their needs (4). These individuals may face rejection in various forms, including limited social acceptance, which can compound the emotional burden already associated with their disabilities. The nature of rejection sensitivity in individuals with physical disabilities is a largely unexplored area, particularly in relation to psychological constructs such as mindset and resilience. Mindset, as defined by Dweck, is the belief individuals hold about the malleability of their intelligence and abilities. Students with a growth mindset believe that their abilities can be developed through effort and perseverance, whereas those with a fixed mindset view their abilities as static traits (5). Research suggests that a growth mindset is linked to resilience, which allows individuals to adapt to challenges and setbacks with greater ease (1). In contrast, a fixed mindset has been associated with avoidance of challenges and a tendency to perceive criticism as a personal attack,

further exacerbating rejection sensitivity (2). Resilience, defined as the ability to bounce back from adversity, is critical for individuals with physical disabilities, who often face systemic barriers and social exclusion. However, it remains unclear whether resilience, in conjunction with mindset, can mitigate the effects of rejection sensitivity in this population (3).

Previous studies have shown that students with physical disabilities often experience lower levels of social acceptance, which can negatively impact their emotional and academic performance. This may be compounded by the fixed mindset, where individuals are more likely to focus on their limitations and avoid situations where failure is a possibility (4). On the other hand, a growth mindset has been shown to enhance psychological well-being and foster resilience, which may reduce the likelihood of rejection sensitivity (5). Given the critical role of these psychological factors, this study aims to examine the relationship between mindset, resilience, and rejection sensitivity in individuals with physical disabilities (6).

The present study investigates how mindset and resilience are related to rejection sensitivity in individuals with physical disabilities. We hypothesized that individuals with a growth mindset and higher levels of resilience would demonstrate lower rejection sensitivity, while those with a fixed mindset would exhibit greater sensitivity to rejection. The findings of this study are expected to contribute to the understanding of the psychological factors influencing rejection sensitivity in individuals with physical disabilities,

providing insights for developing interventions aimed at enhancing their emotional well-being and social integration (6).

## MATERIAL AND METHODS

This study employed a correlational research design to explore the relationship between mindset, resilience, and rejection sensitivity in individuals with physical disabilities. A purposive sampling technique was used to recruit a sample of 70 participants, consisting of 41 boys and 29 girls, from various public sector colleges and universities in Lahore. The inclusion criteria specified that participants must be undergraduate students aged 19 to 24 years, with a diagnosed physical disability, and enrolled in regular academic programs. Students who were married, had lost their parents, or had visual or auditory impairments were excluded from the study to maintain the homogeneity of the sample. Data collection was conducted with the permission of the respective academic institutions, and informed consent was obtained from all participants prior to their inclusion in the study. Participants were assured that their data would remain confidential and used solely for research purposes in accordance with the Declaration of Helsinki. The study employed several standardized assessment tools to measure mindset, resilience, and rejection sensitivity. The Mindset Inventory/Implicit Theories of Intelligence Scale (Dweck, 1999) was used to assess participants' mindset, categorizing them into either a fixed or growth mindset based on their responses. Resilience was measured using the State-Trait Resilience Scale (STRS; Hiew, 1999), which captures both state and trait resilience, providing insights into the participants' ability to cope with adversity. Rejection sensitivity was assessed using the Rejection Sensitivity Questionnaire (RSQ; Downey & Feldman, 1996), which measures anxious expectations of

rejection and the degree to which individuals perceive and respond to social rejection. Demographic information, including age, gender, education, birth order, number of siblings, type of disability, use of prosthetics, and family income, was collected using a demographic information sheet. The assessment tools were administered to participants in person, and no strict time limit was imposed for completing the questionnaires (7-13).

Data analysis was performed using SPSS version 25. Descriptive statistics, including means and standard deviations, were calculated for the primary study variables, namely mindset, resilience, and rejection sensitivity. Pearson product-moment correlation was applied to assess the relationships between demographic variables and the primary study variables. A hierarchical regression analysis was conducted to examine the predictive value of mindset and resilience on rejection sensitivity, controlling for significant demographic variables such as gender, education, and family system. Multicollinearity was assessed using tolerance values, and the assumption of independence of errors was verified using the Durbin-Watson statistic, which was within the acceptable range of 1 to 3. Ethical approval for the study was obtained from the relevant institutional review boards, and the study adhered to ethical standards as outlined by the Helsinki Declaration (7).

## RESULTS

The results of this study aimed to investigate the relationship between mindset, resilience, and rejection sensitivity in individuals with physical disabilities. Descriptive statistics were calculated for the key variables, including mindset, resilience (state and trait), and rejection sensitivity. The mean scores and standard deviations for each variable are presented in Table 1 below.

**Table 1: Descriptive Statistics for Study Variables (N = 70)**

Variable	Mean	Standard Deviation
Mindset Inventory	4.07	0.98
State Resilience Scale	3.47	0.72
Trait Resilience Scale	3.36	0.72
Rejection Sensitivity Scale	3.41	0.27

Pearson product-moment correlation analysis was conducted to assess the relationships among demographic variables, mindset, resilience, and rejection sensitivity. The results revealed a significant positive correlation between a fixed mindset and rejection sensitivity ( $r = 0.38, p < 0.01$ ). However, no significant correlations were found between state resilience or trait resilience and rejection sensitivity. Furthermore, several demographic variables, such as gender and family system, were found to be significantly related to rejection sensitivity. Females and individuals living in a joint family system showed higher levels of rejection sensitivity compared to males and those living in a nuclear family system (Table 2). A hierarchical regression analysis was conducted to explore the predictors of

rejection sensitivity. In the first block, demographic variables (gender, education, and family system) were entered, explaining 22% of the variance in rejection sensitivity ( $R^2 = 0.22, F(3, 66) = 6.34, p < 0.01$ ).

In this block, education and family system emerged as significant predictors of rejection sensitivity, with individuals from joint family systems and first-year undergraduate students demonstrating higher levels of rejection sensitivity. In the second block, mindset, state resilience, and trait resilience were added to the model, explaining an additional 14% of the variance ( $R^2 = 0.36, F(6, 63) = 6.01, p < 0.01$ ). However, mindset and resilience did not significantly predict rejection sensitivity in this model (Table 3)

**Table 2: Correlation Coefficients Between Demographics, Mindset, Resilience, and Rejection Sensitivity (N = 70)**

Variable	Gender	Age	Family Income	Family System	Education	Mindset	State Resilience	Trait Resilience	Rejection Sensitivity
Gender	--	0.11	0.12	-0.04	-0.15	0.11	-0.11	-0.39***	0.25*
Age	--	--	0.07	0.36**	0.05	0.03	0.09	0.08	0.03
Family Income	--	--	--	0.29*	0.05	0.08	-0.10	-0.11	0.16
Family System	--	--	--	--	-0.03	0.11	0.10	0.06	0.31**
Education	--	--	--	--	--	-0.03	0.14	0.19	-0.29**
Mindset	--	--	--	--	--	--	0.63**	0.42**	0.38**
State Resilience	--	--	--	--	--	--	--	0.66***	0.35
Trait Resilience	--	--	--	--	--	--	--	--	0.09
Rejection Sensitivity	--	--	--	--	--	--	--	--	--

**\*Note: \*p < 0.05, \*\*p < 0.01, \*\*\*p < 0.001.**

In summary, the results indicated that a fixed mindset was positively correlated with rejection sensitivity, while resilience did not significantly predict rejection sensitivity. Demographic factors such as family system and education

**Table 3: Hierarchical Regression Analysis Predicting Rejection Sensitivity (N = 70)**

Predictor	Model 1 ( $\beta$ )	Model 2 ( $\beta$ )	95% CI
Constant	20.53**	18.91**	[6.05, 31.77]
Gender	0.23*	0.22	[-0.08, 2.04]
Education	-0.24*	-0.27*	[0.13, 1.98]
Family System	0.31**	0.24*	[-2.16, -0.30]
Mindset	--	0.14	[-0.29, 0.96]
State Resilience	--	0.31	[-0.04, 1.97]
Trait Resilience	--	-0.05	[-1.12, 0.78]
R <sup>2</sup>	0.22	0.36	
F	6.34**	6.01**	
$\Delta R^2$	--	0.14	
$\Delta F$	--	4.64	

**\*Note: \*p < 0.05, \*\*p < 0.01, \*\*\*p < 0.001.**

were significant predictors of rejection sensitivity, with students living in joint family systems and first-year undergraduate students exhibiting higher levels of sensitivity.

## DISCUSSION

This study explored the relationship between mindset, resilience, and rejection sensitivity in individuals with physical disabilities, revealing significant insights into how these psychological constructs interact. The findings indicated that a fixed mindset was positively associated with rejection sensitivity, supporting previous research that links a fixed belief in abilities to higher levels of sensitivity to failure and social rejection. This aligns with studies by Dweck (1999), which demonstrated that individuals with a fixed mindset tend to avoid challenges, fear failure, and interpret criticism as personal attacks (1). The present results extend this understanding to individuals with physical disabilities, who may already experience heightened social exclusion, further intensifying their rejection sensitivity when holding a fixed mindset (2). Interestingly, the study did not find a significant relationship between resilience and rejection sensitivity, which contrasts with earlier findings that resilience typically

buffers against adverse emotional responses, including rejection. Studies such as those by Zeng, Hou, and Peng (2016) showed that high resilience is generally associated with reduced sensitivity to rejection, as resilience equips individuals to cope with social stressors more effectively (3). One possible explanation for this discrepancy lies in the unique challenges faced by individuals with physical disabilities, who may encounter rejection in ways that resilience alone cannot mitigate. The persistent social barriers and exclusionary environments they face might override the protective effects of resilience, making it less effective in reducing rejection sensitivity compared to non-disabled populations (4).

Furthermore, the non-significant relationship between growth mindset and rejection sensitivity in this study was unexpected, given that previous research has suggested a strong negative relationship between these variables. For example, Dweck's (2000) theory posits that individuals with a growth mindset are more likely to embrace challenges and view failure as an opportunity for growth, thus reducing their vulnerability to rejection (5). However, the absence of such a relationship in the current study might suggest that the specific context of physical disability presents additional factors that influence rejection sensitivity, such as societal

stigma or institutional barriers. These factors may interact with mindset in complex ways, limiting the protective effects of a growth mindset on rejection sensitivity in this population (6).

The study's findings also revealed significant demographic predictors of rejection sensitivity, particularly in relation to gender, education, and family system. Females were found to be more sensitive to rejection than males, which is consistent with prior research showing that females tend to exhibit higher levels of social anxiety and rejection sensitivity due to societal expectations and pressures (7). Similarly, students from joint family systems showed higher levels of rejection sensitivity compared to those from nuclear families. This could be attributed to the increased social interactions and competition within joint family systems, which may heighten the need for approval and increase sensitivity to perceived rejection (14). First-year undergraduate students were also found to be more sensitive to rejection, aligning with studies that show the transition to higher education, particularly for individuals with disabilities, can be stressful and isolating, exacerbating feelings of rejection (15-17).

Despite the valuable insights gained from this study, several limitations should be considered. The sample size was relatively small, limiting the generalizability of the findings to broader populations of individuals with physical disabilities. Additionally, the study relied on self-report measures, which may be subject to biases such as social desirability or inaccurate self-assessment. Future research should aim to replicate these findings with larger, more diverse samples and incorporate objective measures of resilience and rejection sensitivity. Moreover, longitudinal studies could provide a more comprehensive understanding of how mindset and resilience evolve over time in individuals with physical disabilities and how these changes influence rejection sensitivity (18-21).

In terms of practical implications, the findings suggest that interventions aimed at reducing rejection sensitivity in individuals with physical disabilities should not only focus on fostering a growth mindset but also address the broader social and environmental factors that contribute to their experiences of rejection. For example, creating more inclusive educational and social environments may help mitigate the impact of a fixed mindset on rejection sensitivity. Furthermore, resilience training programs tailored to the unique challenges faced by individuals with physical disabilities could be beneficial, although such programs should account for the complex interplay of individual and environmental factors. In conclusion, while mindset and resilience play important roles in shaping rejection sensitivity, addressing the systemic barriers faced by individuals with physical disabilities remains critical for fostering their emotional and psychological well-being (23).

## CONCLUSION

The study concluded that a fixed mindset is positively associated with rejection sensitivity in individuals with physical disabilities, while resilience and a growth mindset did not significantly predict rejection sensitivity. These

findings suggest that addressing fixed beliefs about abilities is essential in reducing social rejection sensitivity among this population. In terms of healthcare implications, psychological interventions should focus on fostering a growth mindset while simultaneously addressing broader societal and environmental barriers. Enhancing inclusive practices in healthcare and educational settings can contribute to better emotional well-being and social integration for individuals with physical disabilities, ultimately improving their overall quality of life.

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