

Rejectivity

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October 7, 2025

RECOMMENDED CITATION

mohammad looti (2025). *Rejectivity*. PSYCHOLOGICAL SCALES. Retrieved from <https://scales.arabpsychology.com/?p=34616>

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Primary Disciplinary Field(s): Developmental Psychology; Psychoanalysis

1. Core Definition of Rejectivity

Rejectivity is defined within the structural framework of Erik Erikson's theory of psychosocial development as the core psychosocial pathology or maladaptation arising from the unsuccessful resolution of the seventh stage: **Generativity versus Stagnation**. This critical period, typically spanning the middle adult years (often delineated as ages 25 to 64), demands that individuals successfully focus outward--contributing substantially to society, nurturing the next generation, and securing a sense of lasting productivity. When the positive ego quality of generativity is not achieved, the resultant state of stagnation precipitates the adverse characteristic of rejectivity. This pathology is fundamentally characterized by an inability or unwillingness to include certain persons, groups, or societal issues within one's circle of concern, manifesting as excessive **self-absorption**, psychological isolation, and a profound lack of meaningful connection to the broader human future.

The concept represents a failure of the mature ego to expand its boundaries beyond immediate personal needs and the confines of the nuclear family unit. In successful development, the generative adult finds profound fulfillment in guiding, mentoring, and creating, thereby establishing a meaningful legacy and securing the psychosocial strength of "care." Rejectivity, conversely, signifies a retreat into egoistic needs and comforts, where the individual actively rejects the inherent responsibilities and demands of broader social contribution. This psychological closure severely limits the individual's capacity for empathy and reciprocal engagement, culminating in a pervasive feeling of meaninglessness and an existential vacuum. It is the antithesis of the care virtue, reflecting a failure to care for what one has created or what one is responsible for sustaining in the world.

2. Context within Erikson's Theory: Generativity vs. Stagnation

To comprehensively understand **rejectivity**, one must situate it within its proper developmental context: the crisis of Generativity versus Stagnation. Generativity, the positive pole of this conflict, involves the capacity to establish, guide, and protect the next generation, often realized through activities such as effective parenthood, committed mentorship, artistic and scholarly creation, or dedicated societal leadership. It is an expansive, outward-looking drive rooted in the psychological need to leave a lasting, positive mark on the world. The successful resolution of this stage confirms the individual's enduring value and contribution, providing a crucial psychological foundation for navigating the final stages of life with integrity rather than despair.

Stagnation, the negative pole, occurs when the individual fails to engage in generative activity and

focuses excessively on their own personal needs, comforts, and material possessions. This leads to a crippling sense of psychological impoverishment and purposelessness. Stagnation represents a dangerous turning inward, marked by excessive self-indulgence and an inability to develop or sustain productive activity that transcends personal gain. Individuals experiencing stagnation often feel psychologically "stuck" or disconnected from the dynamic societal processes around them, leading to a profound sense of uselessness. It is from this fertile ground of self-absorption and emotional inertia that the specific negative ego quality of rejectivity emerges, serving as a defensive psychological adaptation against the anxiety of unfulfilled potential and the recognition of wasted time.

The broad developmental timing of this crisis--encompassing the entirety of the middle adult years--makes its resolution paramount for long-term psychological equilibrium. Failure during this stage is not merely a transient unhappiness but constitutes a foundational collapse of the adult ego's purpose. The individual, having reached a peak in potential productivity and influence, begins to recognize the limitations of time and opportunity. If this extensive period has not been spent productively or generously, the resulting psychological distress is internalized as a pervasive feeling of having been rejected by life itself, which is then projected outward as **rejectivity** towards others and society, preventing future connections.

3. Characteristics of Stagnation and Self-Absorption

Stagnation serves as the immediate psychological precursor to the manifestation of rejectivity. It is typically characterized by three interlocking dimensions: pseudo-intimacy, over-extension, and personal impoverishment. Individuals struggling with stagnation often find it difficult to move beyond the rigid boundaries set by their own immediate needs and concerns. While they may engage in outwardly generative activities, such as raising children or pursuing career success, these activities are frequently pursued with a self-serving or instrumental motive, lacking genuine commitment to the autonomous welfare of others. This superficial engagement results in the feeling of being "stuck" or "idle," even if they maintain an illusion of outward success.

The defining core characteristic of stagnation is intense and debilitating **self-absorption**. This excessive preoccupation means that the individual's psychological energy and focus are directed almost exclusively toward maintaining their current lifestyle, satisfying immediate personal desires, or nursing past grievances, rather than investing in the growth of younger generations or the betterment of the community. This pervasive self-centeredness cripples the capacity to form meaningful, reciprocal connections required for generativity. Since generativity necessitates an outward flow of psychological resources, the stagnant individual essentially hoards emotional and intellectual energy, often fearing emotional depletion. This hoarding mechanism is mistakenly employed as self-preservation but inevitably results in severe emotional and social isolation, cementing the path toward rejectivity.

Furthermore, stagnation is inextricably linked to a profound lack of connection to the future. Because the individual is not successfully invested in creating something that will substantially outlast them, they struggle to perceive their current actions as possessing long-term significance or legacy. This absence of a future-oriented perspective contributes directly to the resulting experience of **meaninglessness**. The resulting psychological cycle involves the individual withdrawing further into the self, which limits opportunities for generative activities, thereby reinforcing the stagnant state and deepening the purposelessness that defines the pathology of rejectivity.

4. Behavioral and Emotional Manifestations of Rejectivity

When stagnation escalates into the specific psychosocial pathology of **rejectivity**, the individual begins to overtly or covertly exclude others from their emotional and practical sphere of concern. Behaviorally, this can manifest in various ways, all rooted in an underlying inability to tolerate human imperfection, dependency, or the inherent demands of nurturing relationships. At the interpersonal level, the individual might become hypercritical of family members, subordinates, or trainees, harshly rejecting their efforts because they fail to meet the individual's rigid, often narcissistic, standards. This is a powerful defensive maneuver: by preemptively rejecting others, the individual attempts to avoid the vulnerability and emotional risk inherent in genuine nurturing, mentoring, and selfless contribution.

On a broader societal level, rejectivity often expresses itself as profound social indifference, cynicism, or outright misanthropy. The affected individual may actively reject social responsibility, dismissing civic duties, philanthropic contributions, or environmental concerns as irrelevant burdens or the problems of others. They frequently display a generalized disdain for the younger generation, viewing them not as future beneficiaries of accumulated wisdom, but rather as troublesome competitors for limited resources. This active rejection of overarching societal obligations is a direct behavioral consequence of having failed to embrace the generative task of contributing beyond the self's immediate interests.

The most damaging and defining manifestation, however, is the pervasive emotional withdrawal that accompanies established rejectivity. The individual becomes emotionally sterile, unable to offer genuine warmth, encouragement, or support to those who rely upon them. Relationships are maintained only to the extent that they serve the individual's immediate comfort, status, or convenience. This psychological closing off, or active rejection of emotional interdependence, is what ultimately solidifies the individual's isolation, transforming stagnation from a passive state of being stuck into an active, harmful pathology that damages social bonds and cements the experience of an **inability to feel any sense of meaning**.

5. Conceptual Link to the Unresolved Mid-Life Crisis

The concept of rejectivity is directly linked to the more commonly understood phenomenon of an **unresolved mid-life crisis**. The mid-life crisis, a more generalized term, describes a period of intense questioning, re-evaluation, and introspection typically occurring during the peak productivity years, characterized by a sudden, acute awareness of mortality, aging, and the finite nature of life's opportunities. When this crisis is unresolved--meaning the individual fails to successfully adjust priorities, accept limitations, and effectively transition into a generative phase--the resultant psychological failure is effectively synonymous with the state that breeds and sustains rejectivity.

During this crisis, the individual often attempts impulsive, non-constructive changes, such as sudden career shifts, irresponsible financial decisions, or the dissolution of stable relationships, often driven by desperate attempts to regain a sense of youthful possibility or to escape personal accountability. These actions, rooted in self-absorption and a fear of confronting their mortality, often fail to address the core developmental challenge of Generativity. Consequently, they lead to deeper stagnation and intensify the feeling of **rejectivity** toward the very responsibilities and commitments that define mature adulthood. The crisis remains unresolved precisely because the individual rejects the challenging imperative for mature, outward, and selfless contribution.

The centrality of **meaninglessness** within rejectivity cannot be overstated. Erikson's framework implies that deep human meaning is derived primarily through existential connection and enduring contribution. By actively rejecting social bonds and evading the generative task, the individual severs the psychological link between their personal existence and the enduring human narrative. Lacking this vital context, all personal efforts and achievements appear trivial and temporary, leading inevitably to severe existential angst and despair. Rejectivity thus operates as the maladaptive defense mechanism that attempts to shield the ego from the painful, core recognition that one's life has lacked significant purpose or lasting positive impact.

6. Clinical Implications and Therapeutic Interventions

From a clinical standpoint, treating rejectivity necessitates therapeutic intervention focused on fundamentally re-establishing outward investment and fostering a genuine commitment to external realities. Therapeutic approaches must systematically address the deep-seated self-absorption and narcissistic tendencies that maintain the stagnant state. Cognitive Behavioral Therapy (CBT) might be employed to identify and challenge the cynical, overly critical, or rigidly judgmental thought patterns that the individual uses to justify the rejection of others, while psychodynamic approaches could explore the underlying fears--such as fear of death, fear of emotional failure, or fear of dependency--that drive the protective, exclusionary barrier of rejection.

Effective intervention strategies often involve carefully guiding the individual toward tangible,

generative activities that require long-term commitment and a sincere external focus. This may include enrollment in structured mentorship programs, dedicated volunteer work focused on the development of youth or marginalized populations, or substantive creative projects designed explicitly to leave a communal legacy. The primary therapeutic objective is to shift the individual away from passive, internal self-reflection and toward active, meaningful engagement that validates their ongoing utility and wisdom. Successful re-engagement helps the individual gradually replace the maladaptive rejectivity with the adaptive psychosocial virtue of **care**, thereby allowing the ego to tolerate vulnerability and interdependence.

Crucially, clinical treatment must also address the profound sense of isolation that rejectivity perpetuates. Since this pathology actively isolates the individual, group therapy or sustained community involvement can be absolutely vital. By fostering structured environments where the individual is required to interact generatively--to share accumulated knowledge, offer dedicated support, and tolerate the inevitable imperfections of others--the rigid boundaries of self-absorption can be slowly and safely dismantled. Ultimately, overcoming rejectivity is a fundamental process of learning to accept responsibility for the world beyond the self, thereby regaining an intrinsic and lasting sense of purpose and psychological coherence.

Further Reading

[Erik Erikson's Stages of Psychosocial Development \(Wikipedia\)](#)

[Generativity versus Stagnation \(Wikipedia\)](#)