Original Article

Can attachment styles predict psychological and emotional well-being?

Shahana Masood & Saima Masoom Ali
Department of Psychology. University of Karachi

Abstract

Background: Attachment is an intangible form of sharing love, concerns, and emotion between two individuals or sometimes in terms of society. Attachment styles with an individual's parents, peers, or loved ones greatly affect an individual's different domains of life. Many studies have been conducted to identify the relationship of attachment styles and personality traits, physical and mental health. However, a few kinds of research have focused on the relationship of attachment styles with well-being. Therefore, the main objective of the research was to assess whether attachment style can predict psychological and emotional well-being.

Methodology: The study required a sample of 300 students from different public and private universities in Karachi. Measures used in the study are The Relationships Questionnaire (RQ) and Mental Health Continuum-Short Form (MHC-SF). The Relationships Questionnaire (RQ) was used to assess the attachment style, and the Mental Health Continuum-Short Form (MHC-SF) was used in the study to assess psychological and emotional wellbeing, items related to a specific variable used in the study were included in the assessment. Data were analyzed through regression analysis which is an inferential statistical test using SPSS version 24.

Results: Results were not as per the assumption of the study hypotheses; there was no significant effect of attachment styles on psychological and emotional wellbeing.

Conclusion: Hence, results indicated that attachment style alone could not be considered a good predictor of psychological and emotional well-being. It only has a minor effect, but for the prediction of psychological and emotional wellbeing, other mediating variables and personality factors should also be assessed or considered.

Keywords
Attachment Styles, Psychological Well-Being, Emotional Well-Being.
Introduction

Attachment is an intangible form of sharing love, concerns, and emotion between two individuals or sometimes in terms of society. This enlightens the particular behaviors in children; attachment allows children to express their feelings of fear and disturbance with the one they trust and who can bring them out of the difficult situation. For the first time, the theory on attachment was given by a psychoanalyst named John Bowlby; he wanted to know about the distress felt by infants on being away from their parents. John Bowlby came up with the theory of maternal deprivation, which stated that in the absence of a mother, a child feels insecure. This theory further continues to the theory of attachment, and then came an experiment on attachment by Harlow and Zimmerman. This experiment was conducted with monkeys and their mothers, and monkeys were put in a cage with surrogate mothers and separated from their mothers. Two mothers were situated in the cage; one was prepared with a cloth that gave warmth and comfort to the child, and the other was made of wire, but that mother was able to feed the child. The child preferred a mother who was made of cloth rather than a wired mother because they wanted comfort more than a need for food. Based on this experiment, Bowlby gave the attachment theory by stating that a child needs an emotional bond with the caregiver instead of contacting the mother only for food; a relationship between mother and child is greater than the need for food. As individuals develop, their attachment-related functions are shifted from parents to friends or loved ones.

Attachment styles Bowlby specified are: anxious resistant insecure, secure, disorganized/disoriented attachment, and anxious-avoidant insecure attachment. Looking at secure attachment, it states that children feel comfortable in the presence of a mother, and even if a mother leaves them, they have developed a faith in the mother that she will return for them. The anxious-avoidant insecure attachment explains that child feels anxiety they have not developed trust in their mother that she will fulfill their need, and the child becomes emotionally distant. Anxious resistant insecure attachment style is developed when a mother is responsive at times and unresponsive at another; the child feels anger and helplessness. The disorganized/Disoriented attachment style indicates that children who have this style show anger, depression, passivity, and apathetic behavior, all of this happens because their mothers behave passively, and at times their mothers are scared. According to the findings of Hazen and Shave, the same type of attachment differences is found in children and adults, and attachment models help shape and guide the behavior of close relationships in whole life.

According to Bowlby, emotional life of an adult is affected by attachment relationships, and he considers attachment to be a major element of the experience of humans "from the cradle to the grave." It has been suggested in many studies that lonely adults were found to have trouble relationships with their parents in childhood and either distant or involved type of relationship with their partners; it estimated that history of attachment has an impact on the form and frequency of loneliness in adult. It has been observed in a study that a bond between pairs or romantic love has the same step of attachment which is found between an infant and an adult. Hazen & Shaver started working on the romantic attachment, which was based on three categories of attachment by Ainsworth to understand how adults feel, think and behave in a romantic relationship and they came up with a short multi-sentence depiction of the types of attachment.
as each individual is experiencing them which are: Secure; "I find it relatively easy to get close to others and am comfortable depending on them and having them depend on me. I don't worry about being abandoned or about someone getting too close to me." Avoidant; "I am somewhat uncomfortable being close to others; I find it difficult to trust them completely, difficult to allow myself to depend on them. I am nervous when anyone gets too close, and often, others want me to be more intimate than I feel comfortable being." Anxious-Ambivalent "I find that others are reluctant to get as close as I would like. I often worry that my partner doesn't love me or won't want to stay with me. I want to get very close to my partner, and this sometimes scares people away."4.

Past researches demonstrate that there is a connection of attachment style with well-being. As per the historical background of well-being, it was defined by two approaches; a hedonic tradition which is comprised of constructs such as satisfaction with life, positive affect, happiness, and low negative affect10 the other one is a eudemonic tradition which focuses on human development and positive psychological functioning11. According to Keyes, mental health is a syndrome of well-being i.e., positive functioning in life12. Ryff worked on the concept of psychological well-being, which is comprised of six dimensions of psychological functioning; autonomy, positive relationships with others, environmental mastery, a realization of potential, purpose in life, and self-acceptance17. Emotional well-being is defined as "A positive sense of well-being enables an individual to be able to function in society and meet the demands of everyday life; people in good mental health can recover effectively from illness, change or misfortune."7.

Attachment Styles and Psychological Wellbeing
Mental health can be predicted by attachment styles18. It was reported that relations with incompatible, doubtful, or unkind persons might have an impact on the development of secure and established mental health. The insecure attachment lowers the flexibility to tackle stressful life events and influences a person to break down psychologically in crisis moments. Insecure attachment can therefore be observed as a general weakness to mental disorders, with the specificity of genetics, developmental, and environmental factors19.

Many studies suggested contemporary relations between insecure attachment and psychopathology in adolescence and adulthood20. In a ten years longitudinal study, it was found that insecure parent-adolescent attachment had more psychopathological symptoms in adulthood than secure attachment. Therefore, it may be assumed that attachment insecurity for parents remains related to the psychopathology symptoms in adulthood than secure attachment. Therefore, it may be assumed that attachment insecurity for parents remains related to the psychopathology symptoms in adulthood. It was also found that subjects with insecure attachment do not deal practically and productively in stressful situations; rather, they focus on self-blame, ruminative thoughts, and feelings of helplessness21. These features can intensify one's negative
emotional experience, leading to symptoms of psychopathology experienced in adulthood22.

Greenberg conducted a study on 161 adults diagnosed with bipolar disorder predicted that individuals who had insecure attachment styles were found to show symptoms of depression and their psychosocial functioning was poorest, whereas those individuals had better psychological functioning and low depression whose attachment style was secure23. According to Palitsky et al., People who have an insecure attachment style are prone to having suicidal ideation or attempt suicide and also reported to have other categories of mental health disorders, while those who have a secure attachment style report decreased levels of suicidal ideation and suicidal attempt and anxiety disorders24.

**Attachment Styles & Emotional Wellbeing**

Attachment experiences play an essential role in emotional development25. There is an absence of successful emotion regulation in insecure children. At the early childhood age of 4 months, children of insensitive mothers have poorly regulated emotions as compared to children with sensitive mothers26.

A review included studies done with middle school kids and adolescents that suggest that secure attachment is linked with each emotional domain’s adaptive functioning27. Pascuzzo et al. did a longitudinal study with adolescents till their adulthood, that is measure was filled by the participants at age 14 and then at age 24, which states that anxious romantic attachment or parent-child attachment is linked with psychopathology and this relationship is mediated by emotion-focused strategies28.

Research is done with patients of Cerebral Autosomal Dominant Arteriopathy with Subcortical Infarcts, and Leukoencephalopathy (CADASIL), Huntington’s Disease (HD), and Hereditary Cerebral Hemorrhage with Amyloidosis - Dutch type (HCHWA-D) propose that attachment anxiety is related to distress and it has been predicted that distress remains even after 2 months of feeling attachment anxiety and catastrophizing29.

**Rationale**

Attachment styles play an important role in every step of life, from infancy till old age. When a child is born, he is attached to parents only then attachment circle gradually grows from parents to peers, and with the growth of an individual attachment, the circle keeps expanding. Therefore, a lot of researches have been conducted to understand the impact of attachment styles on an individual.

The main purpose of researching this topic is to focus on the mental well-being of an individual. Checking the impact of attachment style on well-being is necessary. For leading a happy and better life, well-being is considered important because if a person will not take care of his psychological and emotional health, life is disturbed, and the survival of such people would be difficult. Results of this study would able to be used as a guide for the parents, peers, or loved ones so that they can form a type of attachment style with their partners so that they would develop any psychosocial and emotional issues.

**Significance of Topic**

Conducting this study is important because once an individual knows what type of attachment would lead to a better lifestyle. Then parents of newborn babies would work on establishing such type of attachment pattern with their child who would be helpful in the mental development and growth of a child. Identifying the impact of...
attachment style would benefit clinicians as well as they would work on interventions for the clients who have disturbed attachment patterns, and clinicians would already know which style leads to which type of issues, such as mentioned in past literature that insecure attachment style can harm health and wellbeing.

Therefore, the main objective of the research was to assess whether attachment style can predict psychological and emotional well-being.

Methodology
This was a survey based prospective, cross-sectional study. Participants between the ages range 18-35 years, i.e., young adults, were selected through convenient and purposive sampling from different public and private universities of Karachi.

Sample
The sample of the participants is comprised of 300 students. Participants were selected from different private and public universities in Karachi. The age range of the sample size was between 18-35 years.

Sampling Technique
The sample was selected via non-probability sampling techniques, purposive and convenient sampling method, from different universities of Karachi.

Sample Size
The sample size was decided by keeping in view past studies' sample size. Two public sector universities and three private sector universities were visited for data collection.

Exclusion Criteria
- University students enrolled in the private study program are enrolled for exams only and do not take regular classes at the university.
- Students above the range of 18-35 years of age were excluded from the study, as this study only includes those who come under young adulthood.

Inclusion Criteria
- University students enrolled in the universities of Karachi.
- Students between the age ranges of 18-35 years, i.e., young adults, were included in the study.

Informed Consent Form
Before taking part in the study, participants were informed through a consent form by which they were able to know what this study is all about and make their decision accordingly to participate in the study. Informed consent briefed them about the purpose of the study and regarding their rights of participation in the study.

Measures
Following measures were used in the study:

Demographics Form
Demographics form is based on information of the participants, which includes age, gender, weight, height, university. This information of the participant helped analyze the results of the study in detail.

The Relationships Questionnaire (RQ)
It was developed in 1991 by Bartholomew and Horowitz. The questionnaire measures adult attachment style. It has four statements that identify four dimensions of attachment; securely attached, fearful-avoidant, preoccupied, and dismissive-avoidant. Participants are asked to tick in front of the one or more out of four sentences that describes them best; after this, they are supposed to rate themselves for every 4 sentences on the basis of Likert scale ranging
from 1 (does not describe me at all) to 7 (describes me exactly).

Mental Health Continuum-Short Form (MHC-SF)

MHC-SF measures emotional, psychological, and social wellbeing. The scale was developed by Keyes et al. in the year 2008. The original questionnaire consisted of 40 items; the short version has 14 items and is known as MHC-SF. These items evaluate positive mental health and cover three dimensions which are emotional well-being, social well-being, and psychological well-being. Responses of the items are based on a six-point Likert scale which ranges from 0 (never) to 6 (every day). This test can be used with individuals of age 12 years or older. The scale is considered to have high internal consistency, which is greater than .80, test-retest reliability, and discriminant validity. Approximation of test-retest reliability for four weeks are; emotional wellbeing (.64) and psychological wellbeing (.57). Items that were relevant to the variables of the study were included, and items that assessed social wellbeing were excluded.

Procedure

Different private and public sector universities were visited for data collection, and participants were asked to fill out the measures mentioned above. Any of the forms in which one or more items were left blank by the participants, that form was discarded and not included in the study. Questionnaires were given in the same sequence mentioned above in methodology to the participants after they agreed to participate voluntarily in the study.

Statistical Analysis

After the data collection procedure, data was analyzed on statistical software SPSS version 24.0. A regression analysis test was used to assess the effect of attachment style on psychological and emotional wellbeing.

Result

Participants between the ages range 18-35 years, i.e., young adults, were selected through convenient and purposive sampling from different public and private universities of Karachi.

Table 1: Effect of attachment styles on psychological wellbeing.

| Variable | B   | Beta | t    | Sig. | R    | R Square |
|----------|-----|------|------|------|------|----------|
| (Constant) | 19.063 |      | 14.185 | .000 | .151 | .023     |
| Style A  | .039 | .011 | .186 | .853 |
| Style B  | -.296 | -.085 | -1.380 | .169 |
| Style C  | .235 | .066 | 1.082 | .280 |
| Style D  | .416 | .126 | 2.159 | .032 |

Table 1 indicates that around 2.3% of attachment styles can predict health behavior, which is very low; therefore, attachment styles cannot predict psychological well-being statistically. A p-value is greater than 0.05, which indicates that attachment styles (A, B, C, and D) are not good predictors of psychological wellbeing.
Table 2: Effect of attachment styles on emotional wellbeing.

| Variable | $\beta$ | Beta | $t$  | Sig. | R   | R Square |
|----------|--------|------|------|------|------|----------|
| Constant | 9.646  |      | 11.808 | .000 | .073 | .005     |
| Style A  | .094   | .044 | .738 | .461 |
| Style B  | -.141  | -.067 | -1.080 | .281 |
| Style C  | .059   | .027 | .449 | .654 |
| Style D  | .046   | .023 | .389 | .697 |

Table 2 indicates that around 0.5% of attachment styles can predict health behavior, which is very low; therefore, attachment styles cannot predict emotional well-being statistically. A p-value is greater than 0.05, which indicates that attachment styles (A, B, C, and D) are not good predictors of emotional well-being.

Discussion

The present study is aimed to examine the impact of attachment styles on psychological and emotional well-being. The result of the study did not prove the hypotheses which were; there would be a significant effect of attachment styles on psychological well-being, and there would be a significant effect of attachment styles on emotional well-being.

It is estimated in the study results that attachment styles are not a significant predictor of psychological wellbeing. The relationship of attachment has been supported by previous researches. Most of the researches has shed light on the perspective that other variables mediate the relationship between attachment and psychological wellbeing. It is highlighted in a study that when well-being is measured by considering depression, anxiety, and stress, it has a strong association with attachment style; people who had secure attachment style showed a low level of depression, anxiety, and stress as compared to those with insecure attachment style. It was also reported in the study that mindfulness acts as a moderator between attachment style and wellbeing. If an individual with an insecure attachment style is trained in mindfulness, he can learn to cope with a negative effect of attachment style. Another study finding reports that gratitude act as a mediator between attachment and psychological wellbeing.

Study findings reported that attachment styles are not a significant predictor of emotional wellbeing, which is against the past findings. Research conducted with pregnant women observed that those with avoidant attachment style had lower emotional bonding with the fetus, but in the case of pregnant women with anxious attachment style, it was observed that there was no association of emotional bonding and anxious attachment which is in support of the current study. It was observed in a study that individuals who have an avoidant attachment style face no difficulty in coping with threatening events by utilizing their emotional distancing.

If we discuss the limitation of the study, the first one is that it is a cross-sectional study, which itself is not considered ideal when trying to assess the impact of one variable on another. Longitudinal research is needed for the ultimate relationship. The sample of this study is not ethnically, racially, and...
socioeconomically different, and the sample is based on the Pakistani population only. Another limitation of this study is that it cannot rule out the potential health effects of pre-existing physical diseases, mental disorders, or personality factors, nor can it assess whether these factors mediate the relationship between insecure attachment styles and poor wellbeing.

Recommendations of the study are that if someone wants to work on the same topic, other mediating variables such as personality factors and health issues should also be assessed. A causal relationship between the variables should also be analyzed. A longitudinal study from childhood to the stage of young adulthood can be very helpful; personality factors and developmental factors playing a role in the impact of attachment on wellbeing will be assessed too. As attachment patterns, either adult attachment or child attachment, are still a topic that needs in-depth investigation because it's about human psychology, and it is hard to manipulate human behaviors and personality factors. In future studies, while conducting the study, physical health, medical conditions, and psychological disorders should also be one of the variables of the study.

Conclusion

The study found that attachment styles may influence the individual’s psychological and emotional well-being, but they are not enough as a predictor of mentioned behaviors. In line with previous studies, we may conclude that anxiously attached individuals may have poorer psychological wellbeing and irregular emotional strategies.

Acknowledgment

The authors would like to thank the participants of the study, without whom the study would not have been possible and also the research board for the approval. We are grateful to the Department of Psychology, the University of Karachi, for letting us work in this area.

References

1. McLeod S. Mary Ainsworth; The strange Situation. Simple Psychology. 2008. Available at: https://www.simplypsychology.org/mary-ainsworth.html
2. Harlow HF, Zimmermann RR. Affectional response in the infant monkey: Orphaned baby monkeys develop a strong and persistent attachment to inanimate surrogate mothers. Science. 1959;130(3373):421-32.
3. Bowlby J. A secure base: Parent-child attachment and healthy human development. Basic books. 2008.
4. Hazan C, Shaver PR. Romantic love conceptualized as an attachment process. J Pers Soc Psychol. 1987;52:511-524.
5. Bowlby J. Attachment and loss. Random House. 1998;3.
6. Bowlby J. The making and breaking of affectional bonds. New York: Routledge. 1979.
7. American Mental Health Foundation. Emotional Well-being. Available at: http://americanmentalhealthfoundation.org/
8. Bartholomew K, Horowitz, LM. Attachment styles among young adults: A test of a four-category model. J Pers Soc Psychol. 1991;61(2):226-244.
9. Bekker MHJ, Croon MA. The roles of autonomy-connectedness and attachment styles in depression and anxiety. J Soc Pers Relat. 2010;27(7):908–923.
10. Altaf M, Noushad S, Ahmed S, Azher SZ, Tahir SM. Emotional stress estimation in general population. IJEHSR. 2014;2(1):34-37.
11. Waterman AS. Two conceptions of happiness: Contrasts of personal expressiveness (eudaimonia) and hedonic
12. Keyes C. Mental illness and/or mental health? Investigating axioms of the complete state model of health. J Consult Clin Psychol. 2005;73(3):539-548.

13. Furlong MJ, Gilman R, Huebner ES, editors. Handbook of positive psychology in schools, 2nd edition. New York: Routledge. 2014:1-349.

12. Keyes C. Mental illness and/or mental health? Investigating axioms of the complete state model of health. J Consult Clin Psychol. 2005;73(3):539-548.

13. Furlong MJ, Gilman R, Huebner ES, editors. Handbook of positive psychology in schools, 2nd edition. New York: Routledge. 2014:1-349.

12. Keyes C. Mental illness and/or mental health? Investigating axioms of the complete state model of health. J Consult Clin Psychol. 2005;73(3):539-548.

13. Furlong MJ, Gilman R, Huebner ES, editors. Handbook of positive psychology in schools, 2nd edition. New York: Routledge. 2014:1-349.

12. Keyes C. Mental illness and/or mental health? Investigating axioms of the complete state model of health. J Consult Clin Psychol. 2005;73(3):539-548.

13. Furlong MJ, Gilman R, Huebner ES, editors. Handbook of positive psychology in schools, 2nd edition. New York: Routledge. 2014:1-349.

12. Keyes C. Mental illness and/or mental health? Investigating axioms of the complete state model of health. J Consult Clin Psychol. 2005;73(3):539-548.

13. Furlong MJ, Gilman R, Huebner ES, editors. Handbook of positive psychology in schools, 2nd edition. New York: Routledge. 2014:1-349.

12. Keyes C. Mental illness and/or mental health? Investigating axioms of the complete state model of health. J Consult Clin Psychol. 2005;73(3):539-548.

13. Furlong MJ, Gilman R, Huebner ES, editors. Handbook of positive psychology in schools, 2nd edition. New York: Routledge. 2014:1-349.
attachment style. J Soc Clin Psychol. 1999;18(3):255-276.

35. Mikulincer M, Shaver PR. Attachment orientations and emotion regulation. Curr Opin Psychol. 2019;25:6-10.