How does attachment styles relate to intimate relationship to aggravate the depressive symptoms?

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Abstract

The present study aimed to examine the mediator roles of psychological tendency to intimate relationship between attachment styles and depressive symptoms. A series of regression analysis indicated that while the negative relationship between secure attachment and depressive symptoms was mediated by relational satisfaction, relational monitoring mediated the positive relationship between preoccupied attachment and depressive symptoms. Results also revealed that different from secure and preoccupied attachment styles, avoidant attachment showed a direct and strong relation with depression.

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1. Introduction

Attachment is the strong emotional bond that develops between infant and the caregiver, providing the infant with emotional security. By the second half of the first year, infants have become attached to familiar people who have responded to their need for physical care and stimulation (Pendry, 1998). Since attachment theory developed by John Bowlby (1969; 1973; 1980), several studies have consistently showed that person’s attachment style has a crucial role in individuals’ life across the life span and that attachment behaviors define the formation and maintenance of close relationships (Simpson & Rholes, 1998).

Based on Ainsworth’s three-fold taxonomy of attachment styles, Bartholomew and Horowitz (1991) generated a new attachment model that defines four attachment styles might exist in adults. Bartholomew suggested (1990) that infant’s early attachment relationships with caregivers form the stage for later attachment relationships. Bartholomew and Horowitz (1991) identified four attachment categories which include individuals who are considered securely attached (positive internal working model of self, positive internal working model of others), preoccupied (negative model of self, positive model of others), fearful-avoidant (negative models of self and of others), and dismissing-avoidant (positive model of self, negative model of others) (Walker & Ehrenberg...
Securely attached adults are comfortable being close to others; they find it relatively easy to get close to others without feeling worry about being abandoned or about someone getting too close to them. Avoidant adults find it difficult to trust others completely and are somewhat uncomfortable to lean on others and having others depend on them. Avoidant adults are nervous when anyone tries to get too close, and often, their love partners want them to be more intimate than they feel. Anxious / ambivalent adults often worry that others are reluctant to get as close as they would like. Anxious / ambivalent adults usually willing to merge completely with another person and this strong desire sometimes scares people away. Preoccupied adults are characterized by a feeling of being unloved and have a belief that other people are trustworthy and available when needed.

Attachment styles in adults are thought to stem directly from the working models (or mental models) of oneself and others that were developed during infancy and childhood. Ainsworth, Blehar, Waters, and Wall (1978) claimed that infants’ attachment provides not only a framework for understanding the emotional relationship between infant and primary caregivers, but also a framework for understanding love, loneliness, and grief in adult romantic relationship. Research consistently showed that among these four attachment styles, only the secure attachment style was found to be positively associated with greater emotional health; happier, healthier, and more enduring intimate relationships; better work adjustment; and greater levels of perceived social support as compared with insecurely attached people. Secure attachment appears to play a more functional role in establishing and maintaining close relationships (Buellow et al., 1996; Horowitz et al., 1988; Scharfe & Bartholomew, 1995). On the other hand, researchers have found that when compared to securely attached individuals, individuals with insecure attachment styles tend to report greater levels of depressive symptomatology (Roberts, Gotlib, & Kassel, 1996) and that their intimate relationships tend to be characterized by lower levels of trust, satisfaction, and commitment (Mikulincer, 1998; Simpson, 1990).

Although traditionally, attachment theory has been used to describe the affectional bond established between an infant and a caregiver, recent conceptualization of attachment have been extended to describe a range of significant relationships across the human life span, including intimate relationships during late adolescence and young adulthood (Walker & Ehrenberg, 1998). Considering the association between attachment style, success, and satisfaction in intimate relationships, it seems very important to develop a clear understanding of how attachment styles affect satisfaction in intimate relationship (Walker & Ehrenberg, 1998).

Recently, Snell and colleagues (2002) examined the factors which would influence the quality of intimate relationship and they found that various psychological variants related to intimate relationship, including relational esteem: positive evaluation tendency of own skills and capacity in close relationships (as seen in secure attachment), relational anxiety: worrying about sentimental relationship, relational depression: discouragement, unhappiness and disappointment about close relationship, fear of relationship: fear from building up close relationship with someone else (as seen in fearful attachment), relational satisfaction and being happy of close relationship, relational monitoring: consider external evaluation as important, relational preoccupation: obsession to close relationships and continuously thinking about them (as seen in preoccupied attachment). Based upon these variables which were thought to be effective on close relationships, Snell and colleagues developed Multidimensional Relationship Questionnaire (2002) to assess individuals’ psychological tendencies associated with intimate relationships. They suggested that individuals’ intimate relationship styles can be classified into twelve different dimensions named as “relational esteem”, “relational preoccupation”, “internal relational control”, “relational consciousness”, “relational anxiety”, “relational assertiveness”, relational depression”, “external relational control”, “relational monitoring”, “fear of relationship”, “relational satisfaction” and “relational motivation”. The relation between these variables and other factors like reaction against stressful events (Snell, Sebby and Wenta, 2002), connection styles (Mikulincer, Florian, Cowan P, Cowan C, 2002), and family characteristics (Kikuchi and Snell, 2002) were examined in different studies. Results indicated that while relational esteem, internal control, relational satisfaction and relational motivation were found positive aspect of mental health and life satisfaction, fear of relationship, relational anxiety, external control, and relational monitoring were reported to associate with lower level of life satisfaction and various psychopathologies, especially with depression and anxiety. For example, Kikuchi and Snell (2002) evaluated the relation between family characteristics and control tendencies in close relationships of university students. They found that the ones who had the belief that close relationships were out of control and by chance or fate (external relational control) were found to perceive their families less friendly and sentimental.

Based on these results, there is a good reason to believe that individual’s attachment styles might have influence on the quality of intimate relationship, which in turn exacerbate or alleviate the negative emotions as seen in
depression or anxiety symptoms. Therefore, the present study aimed to examine the mediator roles of intimate relationships between attachment styles and depression symptoms relationship.

1. Method

1.1. Participants

Participants were 190 undergraduate students from different departments of Gazi University, Ankara, Turkey. Among the participants 77.2% were males ($n = 147$) and 22.2% were females ($n = 42$), their ages varied from 17 to 25, with a mean of 20.34 (SD = 1.68). The participants’ average year in college ranged from 2 to 5 years. All participants were natives of Turkey and their native language was Turkish. This study was a part of a larger project, thus these participants were enrolled in some other studies as well.

1.2. Instruments

1.2.1. Beck Depression Inventory (BDI; Beck, Rush, Shaw, & Emery, 1979)

BDI assesses intensity of depressive symptoms. This inventory was adapted into Turkish by Hisli (1988, 1989) with reliability and validity coefficients comparable to the original values. The split half reliability of BDI was found to be between .74 and .78 for university students, and .61 for depressive patients. Test-retest reliability was reported to be .65 and .73 (Hisli, 1988, 1989).

1.2.2. The Multidimensional Relationship Questionnaire (MRQ, Snell Schicke and Arbeiter, 2002).

The Multidimensional Relationship Questionnaire was developed to measure psychological tendencies associated with intimate relationships by Snell Schicke and Arbeiter (2002). MRQ consists of 60 items which are rated on a five-point Likert-type scale (1 = absolutely not convenient for me to 5 = just convenient for me).

The scale has been adapted into Turkish by Büyükşahin (2005). The reliability and validity coefficients were found as comparable to the values of the original scale. The reliability and validity coefficients were found as comparable to the values of the original scale. The alpha coefficient was .81 for the whole scale, and 2-week test-retest reliability was .80. Different from original scale, the factor analysis revealed eight factors: focus on relationship extremely, relational satisfaction, fear of relationship/relational anxiety, relational monitoring, relational esteem, external relational control, relational assertiveness, and internal relational control. The examination of factor loadings revealed that 7 items might not be considered under any of the factors. Furthermore, test correlation values of these items were lower as well. Therefore, the authors decided to exclude these items from the scale. Consequently, the Turkish for of the scale consisted of 53 items.

1.2.3. Relationship Scales Questionnaire (RSQ, Griffin, & Bartholomew, 1994).

The RSQ contains 20 items which assess a person’s characteristics style in close relationship. The scale consists of four subscales, named as the secure, avoidant, fearful, and preoccupied attachment patterns (Collins & Read, 1990).

The RSQ was translated into Turkish, reliability, and validity studies of the scale were carried out by Sümér and Güngör (1999). The findings of these studies also showed that RSQ had satisfactory level of reliability, stability and convergent validity. In their study, Sümér and Güngör (1999) carried out a reliability analysis and found that the test-retest correlation coefficients ranged between .54 and .78.

2. Results

Descriptive information, internal consistency coefficients for, and intercorrelations between the measures of the present study were presented at Table 1.

The method recommended by Baron and Kenny (1986) was used to test this hypothesis. According to this method, a mediator is identified when four criteria are met: (a) the independent variable (subscales of RSQ) significantly relates to the dependent variable (BDI), (b) the independent variable (subscales of RSQ) significantly relates to the potential mediator (subscales of MRQ), (c) the potential mediator (subscales of MRQ) significantly
relates to the dependent variable (BDI) and (d) the relationship between the independent (subscales of RSQ) and dependent (BDI) variables is reduced or eliminated when the model controls for the potential mediator (subscales of MRQ).

Table 1. Mean Scores, Standard Deviations, Inter-Correlations, and Reliability Coefficients for the Variables

|        | RS SA | RS PO | RS AA | RS FA | MR RS | MR RM | MR RE | MR ERC | MR RA | MR IRC | MR RPO | MR FR | BDI |
|--------|-------|-------|-------|-------|-------|-------|-------|--------|-------|--------|--------|-------|-----|
| RS SA  | 12.18 | 2.32  |       |       |       |       |       |        |       |        |        |       |     |
| RS POA | -0.9  | 10.22 | 1.73  |       |       |       |       |        |       |        |        |       |     |
| RS AA  | -1.6  | -0.27 | 13.16 | 2.21  |       |       |       |        |       |        |        |       |     |
| RS FA  | -0.46 | -0.04 | 0.38  | 9.83  | 2.23  |       |       |        |       |        |        |       |     |
| MR-RS  | 0.44  | -0.09 | -0.22 | -0.33 | 29.47 | 7.72  |       |        |       |        |        |       |     |
| MR_RM  | -1.19 | 0.21  | -0.02 | 0.13  | -0.25 | 12.92 | 5.12  |        |       |        |        |       |     |
| MR_RE  | 0.48  | -0.01 | -1.16 | -0.29 | 0.63  | -0.15 | 17.32 |        |       |        |        |       |     |
| MR_ERC | -0.24 | 0.20  | 0.010 | 0.14  | -0.29 | 0.28  | -0.15 | 10.57  |        |        |        |       |     |
| MR_RA  | 0.27  | -0.11 | 0.00  | 0.15  | 0.52  | -0.21 | 0.57  | -0.15  | 13.47  |        |        |       |     |
| MR_IRC | 0.03  |       |       |       |       |       |       |        |       | 12.64  | 2.99  | 3.70  |     |
| MR_RPO | 0.13  | 0.40  | -0.18 | -0.14 | 0.12  | 0.25  | 0.36  | 0.08   | 0.31  | 34.07  | 9.32  | 7.29  |     |
| MR_FR  | -0.41 | 0.22  | 0.13  | 0.32  | -0.63 | 0.46  | -0.52 | 0.54   | -0.46 | -0.16  | -0.16 | 0.14  | 26.24|
| BDI    | -0.35 | 0.15  | 0.22  | 0.23  | -0.44 | 0.29  | -0.26 | 0.22   | 0.28  | 0.16   | 0.06  | 0.42  | 32.50|

Note. Means and standard deviations (italics) are given on diagonal. *p <.05. **p <.01

Note: RS_SA: Relationship Scales Questionnaire_Secure Attachment, RS_POA: Relationship Scales Questionnaire_Preoccupied Attachment, RS_AA: Relationship Scales Questionnaire_Avoidant Attachment; RS_FA: Relationship Scales Questionnaire_Fearful Attachment; MR-RS: The Multidimensional Relationship Questionnaire_Relational Satisfaction; MR_RM: The Multidimensional Relationship Questionnaire_Relational Monitoring; MR_RE: The Multidimensional Relationship Questionnaire_Relational Esteem; MR_ERC: The Multidimensional Relationship Questionnaire_External Relationship Control; MR_RA: The Multidimensional Relationship Questionnaire_Relational Assertiveness; MR_IRC: The Multidimensional Relationship Questionnaire_Internal Relationship Control; MR_RPO: The Multidimensional Relationship Questionnaire_Relationship Preoccupation; MR_FR: The Multidimensional Relationship Questionnaire_Fear of Relationship, BDI: Beck Depression Inventory

Examining the mediator role of psychological tendencies associated with intimate relationships between perceived attachment styles and depression, two sets of mediation analyses were carried out. As the first set of analyses, the mediator role of psychological tendencies associated with intimate relationships was examined via two hierarchical regression analyses in which depression symptoms (i.e., BDI scores) and intimate relationship orientations (i.e., subscales of MRQ scores) served as the dependent variables respectively. For the first hierarchical regression analyses, four dimensions of RSQ (i.e., secure, insecure, preoccupied, and avoidant attachment subscales) were entered in the first step and the subscales of MRQ scores were entered in the second step as a mediator variable. For the second analysis of the same set, four dimensions of RSQ were entered into the equation, and their associations with the intimate relationship dimensions were checked for mediator role of the intimate relationship.

Considering the mediator role of psychological tendencies associated with intimate relationships between four dimensions of RSQ and depression symptoms, the result of the first regression analysis revealed that four dimensions of RSQ explained 17% of the variance (Fchange [4, 179] = 9.02, p < .001), and secure (pr = -.24, β = -.26, t [174] = -3.35), preoccupied (pr = .18, β = .17, t [174] = 2.50), avoidant attachment styles (pr = .21, β = .22, t [179] = 2.89).
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had significant associations with depression symptoms. As expected secure attachment showed significant negative relationship with depression scores, while preoccupied and avoidant attachment styles showed significant positive associations with depression scores. On the second step eight subscales of MRQ entered into the equation and accounted for 14% of the variance (F change [8, 171] = 4.27, p < .001), and Relationship Satisfaction (pr = -.24, β = -.26, t [171] = -2.74) and Relationship Monitoring (pr = .16, β = .15, t [171] = 2.05) significantly predicted depression scores. After controlling for the attachment styles on this second step, secure attachment and preoccupied attachment styles lost their significance (pr = -.13, β = -.14, t (171) = -1.71, p > .05; pr = .08, β = .08, t (171) = 1.04, p > .05) though avoidant attachment remained to be significant with a very similar β value (pr = .21, β = .21, t (171) = 2.73, p < .01). Additional regression analyses indicated that secure attachment lost its significance when “Relational Satisfaction” was entered equation; however, its significance level did not change when “Relational Monitoring” was entered equation. In terms of preoccupied attachment, its significance level disappeared when “Relational Monitoring” was entered equation. The sobel test confirmed this significant decrease (z = 6.78, p < .001)

To further support the mediator role of “Relational Satisfaction” and “Relational Monitoring”, they should also have a significant association with secure and preoccupied attachment styles. Thus, to examine this association subsequent two regression analyses were conducted, in which “Relational Satisfaction” and “Relational Monitoring” dimensions were the dependent variables, and “Secure Attachment” and “Preoccupied Attachment” subscale scores were entered into the equation as predictor variables. Firstly, the predictors of Relational Satisfaction were examined. Results revealed that 21% of the variance was explained by secure and preoccupied attachment styles, (F [2, 184] = 13.63, p < .001), and only secure attachment showed significant and positive association with “Relational Satisfaction” (pr = .33, β = .35, t (184) = 4.76, p < .001). Then, the associations between attachment styles and “Relational Monitoring” were examined. Results showed that secure and preoccupied attachment styles explained 7% of the variance (F [2, 184] = 3.87, p < .01), and only preoccupied attachment (pr = .19, β = .20, t (184) = 2.65, p < .001) showed significant associations with “Relational Monitoring”.

Thus the first set of mediation analyses, together with the sobel test indicated that “Relational Satisfaction” mediates secure attachment and depressive symptoms relationship. Therefore, it is supported that the observed negative association between secure attachment and depressive symptoms maintained by relationship satisfaction, and when the variance accounted for by this attachment style was controlled, previously observed association has disappeared. The mediator role of relationship satisfaction between secure attachment and depressive symptoms is depicted in Figure 1.

The latter set of mediation analyses, together with the sobel test also indicated that preoccupied attachment style had different path from secure attachment to produce more severe depressive symptoms. Results indicated that “Relational Monitoring” mediates preoccupied attachment and depressive symptoms relationship. Therefore, it is suggested that the observed association between preoccupied attachment and depressive symptoms maintained by “Relational Monitoring”, and when the variance accounted for by this variable was controlled for, previously
observed association has disappeared. The mediator role of “Relational Monitoring” between preoccupied attachment and depression symptoms is depicted in Figure 2.

![Figure 2. Mediator Role of relational Monitor between Preoccupied Attachment and Depressive Symptoms](image)

3. Discussion

The present study aimed to examine the mediator roles of intimate relationship styles between attachment styles and depression symptoms relationship. Specifically, it was aimed to explore the relative effects of attachment styles (i.e., secure, avoidant, preoccupied, fearful) on intimate relationship dimensions to increase the depressive qualities of negative affects. Results indicated that two components of attachment styles followed different paths to aggravate/alleviate the depressive symptoms. The negative relationship between secure attachment and depressive symptom severity was mediated by relational satisfaction. Relational satisfaction refers to the extent to which people indicate that their intimate needs are currently being met. People who scored higher on these items believe that they are highly satisfied with their intimate relationships. The mediational role of relational satisfaction suggests that individuals who classify themselves as securely attached will more comfortable being close to others; they will find it relatively easy to get close to others without feeling worry about being abandoned or about someone getting too close to them, which in turn lead to experience highly satisfied intimate relationship, consequently, it may decrease the severity of depressive symptoms. Consistent with the findings of the present study, Mikulincer (1998) found that secure attachment is associated with a variety of reality-attuned affect-regulation strategies. Secure persons’ confidence in their skilled regulation of distress may allow them to open themselves to new, even threatening, information, and then to develop suitable strategies for dealing realistically with environmental demands, which may increase their satisfaction in close relationship. Parallel to with these findings, Simpson (1990) found that both men and women, the secure attachment style was associated with greater relationship interdependence, commitment, trust, and satisfaction than were the anxious or avoidant attachment styles.

The results of the present study also revealed that the positive relationship between preoccupied attachment style and depression symptoms was mediated by relational monitoring. As stated by Bartholomew and Horowitz (1991), individuals with preoccupied attachment style have negative self and positive other inner working model and a belief that other people are trustworthy and available when needed. They show a higher tendency to believe that they are not loved by significant others. These dysfunctional schemas may increase the awareness of other people's reactions to one's intimate relationships. People who endorse relational monitoring subscale items are those who are concerned about the appearance of their intimate relationships and with the impression their intimate relationships makes on others. Therefore, the results suggest that preoccupied attachment may motivate a person to attach
overimportance to others' reactions to one's intimate relationships. Because of insecure attachment schema, they may have a higher tendency to realize negative things than positive ones, which may lead to decrease in satisfaction in close relationship; consequently, this may increase depressive symptoms. Parallel to these arguments, Williams & Riskind (2004) found that higher levels of attachment insecurity were associated with increased psychological symptoms, higher levels of cognitive vulnerabilities, and greater general and relationship impairments. Consistently, Carnelley, Pietromonaco and Jaffe (1994) compared 163 mildly depressed and nondepressed college women and found that mildly depressed college women evidenced greater preoccupation and fearful avoidance in romantic relationships than did nondepressed women.

The results also indicated that there was a direct relationship between avoidant attachment style and depression symptoms. These results were found to be consistent with previous findings (e.g., Simpson, 1990). It was reported that the anxious and avoidant styles were associated with less frequent positive emotions and more frequent negative emotions in the relationship, whereas the reverse was true of the secure style.

In conclusion, the results of the present study indicated that different components of attachment followed different paths to aggravate the depression symptoms. These results suggest that the quality of emotional bond that develops between infant and the caregiver during early childhood play a significant role in defining one's close relationship satisfaction, which in turn affect the severity of negative emotion in during adulthood.

4. Conclusion and Recommendation

The findings of the present study supported the general view that attachment style has a crucial role in individuals’ life across the life span and that attachment behaviors define the formation and maintenance of close relationships (Simpson & Rholes, 1998). Therefore, preventive mental health programs should be include some training packages that aim to alert parents about the detrimental effect of insecure attachment on the future intimate relationship, which in turn, result in remarkable distress, as well as change their child raising styles. However, there are certain methodological weaknesses of the present study as well. The first one is the generalization of the results; the sample used in this study is a university sample with a limited age range. Furthermore, the sample used in this study was a non-clinical sample with a relatively small sample size. Thus, these findings may or may not be observed in a clinical sample. Considering the issue of generalization, it is important to examine the relationship between attachment styles, close relationship and depression in different age groups, education levels and in clinical depressive group

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