Insecure Attachment to God and Interpersonal Conflict

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Abstract: Research has expanded the notion of attachment to caregivers to other figures such as God, and there is now literature supporting positive effects of attachment to God with various psychosocial outcomes. The dimensions of attachment to God—anxiety and avoidance—reflect varying ways that people see God as supportive and reliable versus unsupportive and inconsistent. As a stable aspect of the individual, attachment to God results in recurring patterns of interpersonal behavior that can maintain and support self-control or disrupt it. No studies have examined the moderating effect of attachment to God on the relationship between self-control and negative social exchanges. To fill this gap, a sample of 1049 adults across the United States completed measures on attachment to God, self-control, and interpersonal outcomes. First, results showed that insecure attachment to God is associated with a hostile-dominant interpersonal style. Second, it was found that the highest level of negative social exchanges occurred in individuals low in self-control and high in attachment avoidance and anxiety. Results are discussed in terms of self-regulation, stress exposure, and situation selection. An implication of the current study is that secure attachment to God may foster less stress exposure by influencing a person’s situation selection.

Keywords: attachment to God; self-control; interpersonal outcomes

1. Introduction

Secure attachment to caregivers and romantic partners has a host of benefits for psychosocial outcomes and health (Hankin et al. 2005; Rosenstein and Horowitz 1996). Developmentally, attachment-related processes influence the capacity to self-regulate, including enhancing self-control and limiting impulsivity. According to the interpersonal perspective of personality, social, and clinical psychology, attachment is an individual difference variable that not only resides in the person but is also an individual difference variable that results in recurring patterns of social exchanges that benefit or harm the individual. More recently, the research literature has recognized that attachment can also occur with God or a higher power. Similar to its secular variants, attachment to God is also associated with a number of health-promoting outcomes (Granqvist and Kirkpatrick 2013).

As it relates to its role in promoting self-regulation, there have been quite a few studies demonstrating a significant relationship between insecure attachment and low self-control in children (Burgess et al. 2003; DeKlyen et al. 1998; Gilliom et al. 2002), and a few such studies in adults (Orehke et al. 2017; Valikhani et al. 2018). Trait self-control is associated with many outcomes, including interpersonal success, academic achievement, prosocial behavior, well-being, and longevity. Similarly, aspects of religion such as (most notably) church attendance have been associated with positive outcomes including academic achievement, volunteering, social support, and longevity (Hill et al. 2019; McCullough et al. 2000; Petrovic et al. 2021; Phillips and Kitchens 2016). Religiousness is associated with self-control, perhaps due to behavioral factors such as religious rituals that develop the self-control “muscle” (Baumeister and Alquist 2009) and cognitive factors such as sanctifying goals to promote “waiting, tolerating, and cooperating” (McCullough and Carter 2011, p. 423) to successfully monitor and change one’s behavior toward greater...
conformity with a desired end state or goal. One way that this might occur is through establishing recurring patterns of interpersonal exchanges that place one on a trajectory of interpersonal success associated with positive outcomes. Our research has shown that various components of religiousness and spirituality have relevant interpersonal correlates with known health benefits (Jordan et al. 2014).

Despite the conceptual likelihood that attachment to God influences self-regulation and specifically self-control, there have been few studies directly focused on this (McCullough and Carter 2013). As a resource that can be depleted, it is important to know what factors may play a protective role in maintaining the positive effects of self-control. Attachment to God may do this by differentially impacting the relationship between self-control and interpersonal dysfunction. In the current paper, we first examine the characteristic interpersonal style associated with attachment to God. We then examine whether the two dimensions of attachment to God, anxiety and avoidance, influence the association between trait self-control and negative social exchanges.

1.1. An Interpersonal Conceptualization of Religiousness

While there have been many conceptualizations of religiousness that are more individually focused (perhaps best represented by the quote of Whitehead (1926, p. 47): “Religion is what the individual does with his solitariness”), greater attention—or re-recognition of what has always been known—has been paid to the social aspects of religiousness. The interpersonal perspective of personality, social, and clinical psychology includes a structural model of interpersonal behavior (i.e., the Interpersonal Circumplex) that conceptualizes stable differences in a person’s interpersonal style (Pincus and Ansell 2013). Social behavior varies along the dimensions of affiliation (friendly versus hostile) and control (dominant versus submissive). Coinciding with this component is a process model of social transactions (i.e., dominant behavior pulls for submissive behavior and friendly behavior pulls for friendly behavior). The implications for social outcomes are obvious in that social behaviors on the right side of the Interpersonal Circumplex (IPC) are generally associated with salubrious outcomes, while those on the left have deleterious outcomes. This happens because transactional cycles occur over time, and to the extent that these are positive, it is likely that self-regulatory reserves are maintained.

One variable that might promote transactional cycles leading to health is attachment to God. Attachment theory is often utilized as a framework for studying emotion and self-regulation and mental health in children (Mikulincer and Shaver 2012a, 2012b). In Bowlby’s early writings, he stated that it is essential for infants to experience a warm, consistent, and satisfying relationship with a mother, or caregiver substitute, to develop good mental health (Bowlby 1951). According to Bowlby, an infant’s future mental health, social functioning, and interpersonal relationships will likely be negatively impacted by the absence of this type of care (Bowlby 1951, 1982). Paralleling the extension of childhood attachment to adult intimate relationships, attachment theorists have further broadened the scope of attachment by applying it to supernatural figures (Granqvist and Kirkpatrick 2013). Kirkpatrick (1992) pioneered this extension, and argued that God functions as an attachment figure because people seek proximity to God, people experience distress when God seems distant, and people turn to God in times of trouble. In addition, he argued that God functions as a secure base and “felt security” for people. Attachment to God has been receiving more research attention, with studies suggesting that for many people God does serve as a safe haven and a secure base (Beck 2006; Limke and Mayfield 2011). For adults lacking a significant other or friend, attachment to a spiritual figure, like God, may be particularly important. Research provides support that God or a higher power may play a unique and healthy function in terms of helping the person develop differentiated attachment-related internal working models of self and other (Kimball et al. 2013).

Kirkpatrick’s original theory has been used to inform research efforts to develop questionnaires to assess attachment to God. Beck and McDonald (2004) and Rowatt and Kirkpatrick (2002) independently developed Attachment to God questionnaires to help
Operationalize the attachment to God construct. Research by Rowatt and Kirkpatrick (2002) and their development of an Attachment to God Scale suggests that two dimensions—anxiety and avoidance—underlie attachment to God. According to Rowatt and Kirkpatrick, individuals high in attachment anxiety view God as inconsistent in meeting their needs, and individuals high in attachment avoidance are distrusting of God as an attachment figure. Rowatt and Kirkpatrick found that anxious attachment to God in particular was associated with neuroticism and negative affect. Avoidant attachment, on the other hand, had less consistent findings. Ultimately, if individuals have a secure attachment to God, they will turn to God as a safe haven when distressed and will use God as a secure base through whom they can navigate life’s difficulties (Granqvist and Kirkpatrick 2013).

Though compared to childhood attachment to caregivers there is less research on the association between attachment to God and specific mental health issues, there are several studies that show that secure attachment to God is associated with positive affect and religious well-being (Beck and McDonald 2004; Limke and Mayfield 2011; Rowatt and Kirkpatrick 2002). Miner (2009) found that attachment to God remains associated with psychological well-being after controlling for caregiver attachment. In addition, attachment to God appears to be a better predictor of well-being than other religious measures, including church attendance, God image, or prayer frequency (Bradshaw et al. 2010; Leman et al. 2018). The foregoing research has primarily focused on the role of attachment to God from a Westernized, individual perspective. While beyond the scope of the current study, a line of research is developing on the role of attachment in settings that can be more collectivistic as it relates to attachment to God or a higher power (see Sahdra and Shaver (2013) for a comparison between attachment theory and Buddhist psychology, and see Ghobary Bonab et al. (2013) for attachment to God in Islamic spirituality).

Our previous research has demonstrated that some maladaptive aspects of religiousness (e.g., a belief in a punishing God) are associated with the left side of the IPC with deleterious social correlates such as low social support. Given its conceptual similarity with the maladaptive aspects of religiousness we previously “mapped” onto the IPC, we expected that the dimensions of insecure attachment to God would also be associated with the left side of the IPC. No prediction was rendered for whether these dimensions of attachment to God would be associated with dominance or submissiveness.

1.2. Trait Self-Control and Interpersonal Outcomes

Individual differences in self-control are reflected in a person’s ability to adjust or adapt to internal or external circumstances (Tangney et al. 2004). Self-control is a general component of self-regulation, and it refers to the ability to regulate or manage one’s emotions, behaviors, and thoughts for the purpose of pursuing goals. An individual possessing a high degree of this personality construct has the ability to modulate and override his or her thoughts, emotions, and action tendencies for the purpose of behaving in a manner conducive to his or her corresponding goals, demands, laws, or standards, even when experiencing an intense urge or proclivity to carry out an opposite behavior (Baumeister et al. 2006). In essence, self-control reflects an individual’s ability to change his or her inner response if it is not helpful to overall wellbeing and avoid carrying out behaviors that are potentially or actually harmful.

Individuals possessing high levels of dispositional self-control exhibit discipline, reliability, and hard work. They are thought to possess more adaptive functioning, particularly in the form of academic achievement, self-esteem, interpersonal skills, satisfying relationships, secure attachment, and overall positive emotions (Uzun et al. 2020). In particular, high scores of dispositional self-control have been associated with higher grade-point averages and self-esteem, more secure attachment, more favorable emotional responses, and less binge eating and alcohol abuse. Additionally, low scores of dispositional self-control are thought to contribute to personal and interpersonal problems, and even depression and anxiety (de Ridder et al. 2012; May et al. 2017; Stavrova et al. 2020).
As others have noted, there is value in better understanding the intrapersonal outcomes associated with trait self-control (Burkley et al. 2011). However, self-control is associated with adaptive functioning with others (Boman et al. 2012; Finkel et al. 2016; McDermott 2018; Vohs et al. 2011); therefore, considering self-control from an interpersonal perspective can make useful contributions to the literature. For example, situation selection may be one correlate of self-control that is interpersonally based. In other words, birds of a feather flock together; high self-control pulls for a social environment that leads to better, more adaptive friendships (Boman 2017). Exposure to negative social exchanges is associated with distress and poor health (Kenny et al. 2013; Wickrama et al. 2010). Limiting one’s exposure to these events through situation selection can set up transactional cycles over time that facilitate emotional equanimity, interpersonal stability, and fewer encounters with adverse social situations.

1.3. The Present Study

As the foregoing suggests, self-control is associated with many positive outcomes, but it is a limited resource (Baumeister and Alquist 2009). Though it has recently been seen as a potentially important variable in terms of self-regulation (McCullough and Carter 2013), attachment to God has not been examined as a potential moderator of the relationship between self-control and adverse interpersonal outcomes. The ability to monitor oneself so as to meet social- and self-standards has been associated with parental attachment (Nie et al. 2016) as well as attachment to romantic partners (Slotter et al. 2020). Attachment to God may be a protective factor and aid a person in self-regulation, such that more secure attachment to God enhances the healthy effect of self-control in limiting one’s exposure to negative social exchanges. The goal of the current study is to examine whether the relationship between self-control and aversive social experiences is separately moderated by the dimensions of attachment to God.

2. Method

2.1. Participants and Procedures

A total of 1049 participants from the United States completed this study, and the data of 997 of these participants were used for analysis after adjusting for straight-line responses. A panel aggregator, Qualtrics, was used to collect the online sample that came from actively managed market research panels. Qualtrics provides high-quality research samples by checking every IP address, using deduplication technology, and using sophisticated digital fingerprinting for bot mitigation purposes. To enroll in a survey, potential respondents are sent an email invitation inviting them to complete a survey for research purposes and informing them about the length of time it takes to complete the survey and incentives for doing so. Incentives may include cash, airline miles, gift cards, redeemable points, sweepstake entry, and vouchers.

Qualtrics creates a panel base that is proportioned to the general population as well as the requirements of the specific survey. Screening criteria can also be used based on the particular samples that are desired. For the current study, only individuals who self-reported belief in a higher power and were at least 18 years of age met the screening criteria to complete the survey. Participant ages ranged between 18 and 82 years (M = 43; SD = 16.5). This population was 51% female, 49% male; 59.9% were non-Hispanic white, 17.7% were Hispanic, 12.1% were non-Hispanic black, 5.4% were Asian, and 3.1% were American Indian/Alaskan Native. Regional breakdown included 21.33% Midwest, 18.03% Northeast, 37.27% South, and 23.38% West. The religious affiliations of the participants are shown in Table 1. The time length to complete the online survey was 20 min or less. Data quality was assessed and screened by short time completion, straight line responses, and incoherent responses. Missing data were completed by calculating the means of the participants’ scores on each subscale of the individual questionnaires.
Table 1. Descriptive statistics of religion.

| Religion                  | Frequency | Percent |
|---------------------------|-----------|---------|
| Atheist                   | 4         | 0.4     |
| Buddhist                  | 18        | 1.8     |
| Hindu                     | 8         | 0.8     |
| Jehovah’s Witness         | 8         | 0.8     |
| Jewish                    | 26        | 2.6     |
| LDS                       | 10        | 1.0     |
| Muslim                    | 50        | 5.0     |
| New age                   | 4         | 0.4     |
| Lutheran                  | 25        | 2.5     |
| Roman Catholic            | 219       | 22.0    |
| Episcopalian              | 9         | 0.9     |
| Methodist                 | 28        | 2.8     |
| Presbyterian              | 19        | 1.9     |
| Christian                 | 395       | 39.6    |
| Baptist                   | 75        | 7.5     |
| Pentecostal               | 28        | 2.8     |
| Adventist                 | 3         | 0.3     |
| Taoist                    | 1         | 0.1     |
| Unitarian                 | 2         | 0.2     |
| Other or none of the above| 65        | 6.5     |

The current study was approved by the Indiana State University institutional review board. Deciding to take the online survey was considered consent to participate in this research, and Qualtrics employed a double opt-in registration process to ensure that participants had made a conscious decision to participate in online surveys. Qualtrics uses several methodologies to recruit respondents. For example, participants may be recruited via email, e-newsletter campaigns, traditional banner placements, and social media. Multiple sources of participants are used to reduce bias that could result from using only one or a few recruiting sources. No identifying information was collected.

2.2. Measures

The Attachment to God Scale (AGS) (Rowatt and Kirkpatrick 2002) is a 9-item measure that assesses individual differences along the dimensions of attachment anxiety (e.g., God’s reactions to me seem to be inconsistent) and attachment avoidance (e.g., God seems impersonal to me) in relation to God using a 7-point scale. The AGS has 6 items assessing attachment avoidance and 3 items assessing attachment to anxiety. Higher scores for the items assessing avoidance indicate higher avoidant attachment to God and higher scores for the items assessing anxiety indicate higher anxious attachment to God. Good reliability (attachment anxiety: \( \alpha = 0.73 \), attachment avoidance: \( \alpha = 0.91 \)) and validity of the AGS have been demonstrated in past studies (Fergus and Rowatt 2014).

The Brief Self-Control Scale (BSCS) is a 13-item self-report questionnaire designed to measure the construct of self-control. The creation of the BSCS resulted from condensing the Total Self-Control Scale. Tangney and colleagues (2004) performed 2 studies to establish that the BSCS remained an adequate measure of self-control after its reduction from the Total Self-Control Scale. The BSCS highly correlated with the Total Self-Control Scale in study 1 (0.93) and study 2 (0.92). The BSCS established good internal consistency and retest reliability. Additionally, the BSCS was found to measure the same domains and content of self-control as the Total Self-Control Scale (Tangney et al. 2004). A recent psychometric study demonstrated further good properties of the BSCS, including support for a unidimensional structure (Manapat et al. 2021).

The International Personality Item Pool—Interpersonal Circumplex (IPIP-IPC), a 32-item measure, was used as a brief assessment of the dimensions of the IPC (Markey and Markey 2009). Participants rate themselves with regard to the accuracy of various descriptions (e.g., “Let others finish what they are saying” and “Snap at people”) using a
5-point Likert scale. IPIP octants were calculated via the summation of the 4 distinct items loading on each octant; these octants were standardized, and then the 2 broad dimensions of social behavior—control and affiliation—were calculated from circumplex weighting of the IPIP octants (Wiggins and Broughton 1991). The IPIP-IPC was used to determine the “interpersonal style” associated with the attachment to God dimensions (i.e., anxiety and avoidance). The IPIP-IPC maintains the good psychometric properties and circular structure of longer measures such as the Interpersonal Adjective Scale (Markey and Markey 2009). In the present study, the control dimension ($\alpha = 0.82$) and affiliation dimension ($\alpha = 0.80$) had adequate internal consistency.

The Test of Negative Social Exchanges (TENSE), an 18-item measure, was used to assess exposure to aversive social experiences such as insensitivity, hostility, rejection, and ridicule. It has good internal consistency and test–retest reliability (Jordan et al. 2015; Ruehlman and Karoly 1991). In the current study, participants were asked how often the people in their lives engaged in particular social exchanges over the previous month on a 5-point Likert scale.

### 3. Results

Correlations, means, standard deviations, and internal consistencies are presented in Table 2. The avoidance dimension of attachment to God was significantly correlated with the anxious dimension ($r = 0.45$, $p < 0.001$), self-control ($r = -0.32$, $p < 0.001$), and negative social exchanges ($r = 0.23$, $p < 0.001$). The anxious dimension of attachment to God was significantly correlated with self-control ($r = -0.31$, $p < 0.001$) and negative social exchanges ($r = 0.35$, $p < 0.001$). Self-control was negatively correlated with negative social exchanges ($r = -0.39$, $p < 0.001$).

|                        | AGS Avoidance | AGS Anxiety | BSCS  | TENSE |
|------------------------|---------------|-------------|-------|-------|
| AGS Avoidance          | 0.45 *        |             |       |       |
| AGS Anxiety            | -0.32 *       | -0.31 *     |       |       |
| BSCS                   |               |             | 0.35 *| -0.39 *|
| TENSE                  |               |             |       |       |

Table 2. Means, standard deviations, Cronbach’s alphas, and correlations for the Attachment to God scale, Brief Self-Control Scale, and Test of Negative Social Exchanges scale.

To determine the interpersonal style associated with attachment to God, each dimension (i.e., anxiety and avoidance) score was regressed on the control and affiliation interpersonal style scores from the IPIP-IPC. The multiple R indicates the “interpersonality” of the construct, and the regression coefficients provide the specific location of the scale within the IPC (Gurtman 1991). Results for the regressions of each dimension of attachment to God on the IPIP-IPC dimensions of affiliation and control are presented in Table 3. Both dimensions of attachment to God had a significant association with the cold/hostile pole of the IPC, and to a lesser extent (though still significant), the dominant pole of the IPC. Taken together, both avoidance and anxiety—as it relates to attachment to God—are marked by a hostile-dominant interpersonal style.
3. Both dimensions of attachment to God had a significant association with the cold/hostile pole of the IPC, and to a lesser extent (though still significant), the dominant pole of the IPC. 

Multiple regression of dimensions of attachment to God on affiliation and control measures of interpersonal style (IPIP-IPC).

|                      | R   | F(2, 953) | β Affiliation | β Control |
|----------------------|-----|-----------|---------------|-----------|
| AGS avoidance        | 0.40| 90.56 *   | −0.37 *       | 0.14 *    |
| AGS anxiety          | 0.29| 44.78 *   | −0.24 *       | 0.16 *    |

Note. AGS = Attachment to God scale. * p < 0.001

For the moderation analyses, the PROCESS macro developed by Hayes (2018) was used to test for interactions. For the following analyses, the independent variable and moderator variable were mean centered. The overall model of self-control, avoidance, and their interaction predicting negative social exchanges was significant (R = 0.41, F(3, 951) = 64.07, p < 0.001). Self-control significantly predicted negative social exchanges (β = −0.37, t = −11.51, p < 0.001). Avoidance significantly predicted negative social exchanges (β = 0.11, t = 3.52, p < 0.001). The interaction between self-control and avoidance was also significant (β = −0.08, t = −2.72, p < 0.01). A simple slope analysis between self-control and negative social exchanges was conducted at low (−1 SD below the mean), moderate (mean), and high (+1 SD above the mean). At 1 standard deviation below the mean of avoidant attachment to God, the relationship between self-control and negative social exchanges was significant (β = −0.37, t = −11.51, p < 0.001). At 1 standard deviation above the mean of avoidant attachment, the relationship between self-control and negative social exchanges was significant (β = −0.45, t = −9.40, p < 0.001). Figure 1 plots the simple slopes for the interaction.

Figure 1. The relationship between self-control and negative social exchanges moderated by avoidant attachment to God.

The overall model of self-control, anxiety, and their interaction predicting negative social exchanges was significant (R = 0.47, F(3, 951) = 90.93, p < 0.001). Self-control was significantly associated with negative social exchanges (β = −0.34, t = −10.99, p < 0.001). Anxiety significantly predicted negative social exchanges (β = 0.24, t = 8.01, p < 0.001). The interaction between self-control and anxiety was also significant (β = −0.14, t = −4.93, p < 0.001). A simple slope analysis between self-control and negative social exchanges was conducted at low (−1 SD below the mean), moderate (mean), and high (+1 SD above the mean). At 1 standard deviation below the mean of anxious attachment to God, the relationship between self-control and negative social exchanges was significant (β = −0.20,
At the mean value, the relationship between self-control and negative social exchanges was significant ($\beta = -0.34, t = -10.99, p < 0.001$). At 1 standard deviation above the mean of anxious attachment, the relationship between self-control and negative social exchanges was significant ($\beta = -0.47, t = -10.55, p < 0.001$). Figure 2 plots the simple slopes for the interaction.

**Figure 2.** The relationship between self-control and negative social exchanges moderated by anxious attachment to God.

### 4. Discussion

The current study determined the interpersonal style associated with the dimensions of attachment to God (i.e., anxiety and avoidance) and then examined their moderating effect on the relationship between self-control and negative social exchanges. First, it was hypothesized that both dimensions of attachment to God would be associated with the unfriendliness dimension of the IPC. Second, it was hypothesized that the relationship between self-control and negative social exchanges would vary depending upon the anxiety and avoidance dimensions of attachment to God. The results of the current study supported these hypotheses.

Our study found that the anxiety and avoidance dimensions of attachment to God were associated with unfriendliness, and to a lesser degree, interpersonal dominance. This is known as a hostile-dominant interpersonal style, and based on the principle of complementarity (Pincus and Ansell 2013), this style will pull for, or elicit, hostile and submissive responses from others. As repeated interpersonal transactions happen over time, social exchanges are likely to develop that qualitatively differ from interpersonal transactions marked by reciprocated friendliness. The findings related to the first hypothesis are consistent with our previous research (Jordan et al. 2014).

Our study also found that self-control is associated with fewer negative social exchanges, but the strength of this association varies depending upon the anxiety and avoidance dimensions of attachment to God. For the avoidance dimension of attachment to God, the most negative social exchanges occurred in individuals with low self-control and high avoidance. A similar finding was also found for the anxiety dimension of attachment to God. Put differently, at low levels of self-control, more and more negative social exchanges were reported by participants, as they had higher levels of attachment-related avoidance and anxiety.

As it relates to self-control and its association with interpersonal outcomes, the moderating effect of the dimensions of attachment to God is consistent with a resource depletion model. If as the current findings suggest, the anxiety and avoidance dimensions of attach-
ment to God are associated with a hostile-dominant interpersonal style, then the resulting transactional cycles will be marked by interpersonal distress, which has been found to be associated with a depletion of self-control. Low levels of attachment-related avoidance and anxiety toward God seem to play a protective role in terms of less exposure to negative social exchanges, especially for individuals who rate themselves as low in trait levels of self-control. The implication of the current findings is that insecure attachment to God may be a relevant factor to consider in religious individuals in therapy settings where matters related to self-regulation and interpersonal outcomes are frequently discussed.

Another implication has to do with stress regulation (Williams et al. 2009). Attachment to God may influence stress regulation at the level of stress exposure, reactivity, recovery, and/or restoration. McCullough and Carter (2011) aptly describe how “simply avoiding” certain situations may be one way that religion leads to self-monitoring that renders one’s interpersonal environment less turbulent and mired in conflict. In other words, limiting one’s level of stress exposure through situation selection is an important component of preserving one’s capacity to implement and maintain self-control.

The current study is not without its weaknesses. First and foremost, this is a cross-sectional study and the temporal sequence of the variables included in this study cannot be ascertained. While attachment to one’s caregiver is clearly an early occurring process, attachment to God occurs later and it is an unresolved question as to whether religiousness leads to self-control or vice versa (for a longitudinal example of personality variables associated with later religiousness, see McCullough et al. 2003). Second, as a non-experimental study, cause cannot be determined, which is a very important consideration when examining a resource depletion model of self-control and its effect on interpersonal outcomes. Finally, the sample is derived from a predominantly Westernized, individualistic culture that may not be generalizable to other cultures (see Sahdra and Shaver (2013) for attachment in Buddhist psychology, and see Ghobary Bonab et al. (2013) for attachment to God in Islamic spirituality).

Nevertheless, the current study has several strengths. First, the study included a large, national sample, which may have led to more reliable findings. Second, the study only included individuals who had a belief in God or a higher power. There has been criticism about past studies within the psychology of religion in terms of their samples and the lack of clarity regarding whether individuals low in religiousness, for example, were atheists, agnostic, or something else (Sloan and Bagiella 2002). Third, to our knowledge, no other research has specifically examined the relationship between trait self-control and attachment to God. While there have been studies that are clearly associated with attachment-related processes and behaviors associated with self-control (Exline et al. 2016), none have addressed the avoidance and anxiety dimensions of attachment to God. As such, the current findings uniquely contribute to the research literature. Finally, the current findings extend previous research on the interpersonal style of components of religiousness (Jordan et al. 2014).

In conclusion, the current study replicates past research demonstrating a relationship between self-control and interpersonal outcomes. It offers a new finding on the role that attachment to God plays in the relationship between trait levels of self-control and negative social exchanges. The interpersonal perspective of personality, social, and clinical psychology suggests that attachment to God is an individual difference variable that results in recurring patterns of social exchanges that benefit or harm the individual. Future research can build upon the current study’s findings by assessing other relevant variables (e.g., intrinsic/extrinsic religiousness, devoutness) and including other components of the methodological framework of the interpersonal perspective (e.g., interpersonal values) to comprehensively examine the effects of attachment to God on self-regulation.

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