MUTUAL INFLUENCES IN ROMANTIC ATTACHMENT, RELIGIOUS

COPING, AND MARITAL ADJUSTMENT

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This study examined associations among romantic attachment anxiety and avoidance, positive and negative religious coping, and marital adjustment in a community sample of 81 heterosexual couples. Both spouses completed the Experiences in Close Relationships Scale (ECR), a brief measure of religious coping (Brief RCOPE), the Dyadic Adjustment Scale (DAS), and a demographic questionnaire as part of a larger study. Multilevel modeling (MLM) for the actor-partner interdependence model (APIM) was used. Attachment avoidance was inversely related to positive religious coping. In contrast, attachment anxiety was directly related to negative religious coping.   Positive religious coping buffered the relationship between attachment avoidance and marital adjustment. In contrast, attachment anxiety was detrimental to marital adjustment regardless of positive religious coping, and positive religious coping was related to higher marital adjustment only in the context of low attachment anxiety. Surprisingly, the spouse's attachment anxiety was inversely related to the respondent's marital adjustment only when the respondent reported low levels of negative religious coping, whereas in the context of high negative religious coping, the partner's attachment anxiety was related to higher marital adjustment. Results support using attachment theory to conceptualize religious coping and the consideration of both attachment and religious coping constructs in counseling.

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Introduction and Literature Review

The detrimental effects of attachment insecurity on marital adjustment are well established in the literature (Mikulincer & Shaver, 2007). Although links have been found between religiosity and marital adjustment (Mahoney, Pargament, Tarakeshwar, & Swank, 2008) and between religious coping and personal adjustment (Pargament et al., 1998), religious coping has never been tested as a moderator of the effects of attachment on marital adjustment. Research suggests that individuals may use God to compensate for insecure human attachment (Reinert, 2005), but other findings indicate correspondence between human attachment and relationship to God (Kirkpatrick, 2005). Grounded in Kirkpatrick's and Shaver's (1992) compensation hypothesis and Sullivan's (2001) compensation model, this study examined associations among romantic attachment processes, religious coping, and marital adjustment.

Attachment, Coping, and Relational Functioning

Bowlby (1969/1982) proposed that the function of attachment is protection by a stronger other. Attachment behaviors for gaining proximity to the caregiver (e.g., reaching) are triggered by perceived threat. Once comforted, the individual can explore independently. Interactions with caregivers are stored in internal working models (IWMs) of self and other, which are self-reinforcing and make up a consistent attachment style. Research tends to support the continuity of attachment style throughout the lifespan (Fraley, 2002). Individuals

elicit interactions and attend selectively to information that confirms their expectations, but

corrective experiences with new attachment figures can alter IWMs (Bowlby, 1988). Adults may

use friends, therapists, and clergy for attachment functions (Ainsworth, 1991), but the romantic

pair bond is the prototype adult attachment relationship (Bowlby, 1969/82). Adult romantic

attachments, in contrast to parent-child relationships, involve mutual caregiving and sexuality

(Zeifman & Hazan, 2008).

Current research suggests that two dimensions underlie adult attachment self-report

measures (e.g., Simpson, Rholes, & Nelligan, 1992). *Attachment anxiety* represents the model

of the self, with high levels reflecting more negative self-concepts. Individuals with high

attachment anxiety worry about their own worth, strongly desire closeness, and fear rejection

or abandonment. *Attachment avoidance* represents the model of the other, with high levels

indicating negative other models and dislike for deep disclosure and dependence on others

(Mikulincer & Shaver, 2007). Low anxiety and avoidance are characteristic of attachment

security, which is associated with more adaptive coping and relational functioning (Mikulincer

& Shaver). High attachment anxiety and avoidance are risk factors for marital dysfunction,

ineffective coping, and psychological distress (Onishi, Gjerde, & Block, 2001; Riggs et al., 2007).

Securely attached individuals have the most coping efficacy and perceived coping

resources (Buelow, Lyddon, & Johnson, 2002). Their early experiences of being comforted

create procedural knowledge about how to manage distress and reinforce help-seeking as a

viable strategy (Mikulincer & Shaver, 2007). Their secure-base script includes awareness and

communication of distress, positive reappraisals, emotional and instrumental support-seeking,

and problem solving. Under stressful circumstances, secure individuals tend to use problem

engagement coping and social support (Larose, Boivin, & Doyle, 2001; Schottenbauer, 2006). Punitive or rejecting caregiving promotes attachment avoidance and its associated deactivating strategies, which include minimizing the importance of threats, avoiding intimacy, denying weakness or distress, and dismissing partners' bids for closeness. In contrast, inconsistent caregiving promotes the hyperactivating stratagies characteristic of attachment anxiety, including clinging and controlling behavior to keep the partner close. Anxiously attached individuals tend to exaggerate threat, distress, their own inability to cope, and perceived caregiver unavailability. Consequently, they use more emotion-focused and passive coping (Larose, et al.; Schottenbauer). Those with high attachment avoidance view their coping resources as adequate and events as non-threatening unless undeniably stressful, so they tend to avoid emotional and interpersonal engagement (Larose, et al.; Mikulincer & Shaver; Schottenbauer). Insecure attachment also negatively biases appraisals of caregivers' responsiveness (Collins & Feeney, 2004).

A large body of research connects attachment security and positive romantic relationship adjustment (e.g., Banse, 2004). Attachment predicts several variables that could explain this link, including perceived equity, emotional resilience when disappointed by a partner, perceptions of conflicts and support, conflict resolution behaviors, and forgiveness (Campbell et al., 2005; Feeney, 2004; Grau & Doll, 2003; Kachadourian, Fincham, & Davila, 2004; Marchand, 2004). From an attachment perspective, relationship satisfaction depends on both partners' ability to meet the other's security needs. Attachment insecurity interferes with caregiving for a partner, with attachment avoidance promoting unavailability and attachment anxiety promoting intrusiveness (Feeney, 2005). Most of the 30 studies reviewed by Mikulincer

and Shaver (2007) showed that partners of secure individuals were more satisfied than were partners of insecure individuals, and 4 of 5 supported the path leading from one partner's insecurity to the other's marital dissatisfaction rather than vice versa.

Attachment and Religiosity/Spirituality

Attachment theory may be useful to conceptualize why many individuals seek comfort and help from God via prayer and other religious practices (Kirkpatrick & Shaver, 1992). Abrahamic and Buddhist religious texts depict humans' relationship to the sacred with characteristics of an attachment relationship, i.e., proximity-seeking, a safe haven, and a secure base (Kirkpatrick, 2005; Mikulincer & Shaver, 2007). Kirkpatrick and Shaver (1992) proposed two hypotheses regarding attachment and religiosity. First, the correspondence hypothesis suggests that individuals project their working models of human relationships onto God such that differences in religiosity parallel differences in attachment style. According to this hypothesis, secure individuals feel comfortable seeking closeness to God, individuals with high attachment avoidance keep God at a distance, and individuals with high attachment anxiety feel ambivalent and highly emotional in relation to God. Second, Kirkpatrick and Shaver's compensation hypothesis predicts that individuals with insecure human attachments direct their unmet attachment needs to God, as the ideal other.

In support of correspondence, secure human attachment predicts higher religious commitment, secure attachment to God, and positive God image (Kirkpatrick, 1998; Kirkpatrick & Shaver, 1992; McDonald, Beck, Allison, & Norsworthy, 2005; Reinert, 2005). Attachment security supports the use of God or religion to regulate attachment distress (Birgegard &

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Granvist, 2004). In contrast, avoidant romantic attachment is associated with agnosticism, and anxious attachment is associated with more highly emotional religious behavior (Kirkpatrick, 2005). In support of the compensation model, single adults are more likely than those in a relationship to be religiously active, report a personal relationship with God, and use religiosity to regulate affect (Granqvist & Hagekull, 2000). Insecurity predicts increased religiosity over time, particularly after a loss (Granqvist & Hagekull, 2003). Reinert (2005) found that seminarians' cultivation of attachment to God moderated the effects of insecure attachment to parents on self-esteem. Among newlyweds, religious commitment buffered the link between attachment avoidance and marital dysfunction (Lopez, Riggs, Pollard & Hook, 2011).

Hall, Fujikawa, Halcrow, Hill, and Delaney (2009) proposed the implicit IWM correspondence and explicit religious compensation models. They argued that implicit procedural knowledge for how to be with others is learned in human relationships and transferred onto relationships with God. This would explain findings of correspondence between human attachment and experienced relationships with God. In contrast, findings of discrepancies between human attachments and religiosity exist due to intentional engagement in religious behavior, which may affect implicit IWM's only over time.

Granqvist has focused on childhood attachment history and religiosity and found few associations with romantic attachment, perhaps due to failure to account for differences in relationship status. However, Granqvist and Hagekull (2001) found that romantic attachment explained unique variance in adolescents' religious change and that preoccupied romantic attachment (i.e., high attachment anxiety and low attachment avoidance) was related to compensation. If adults who have been married for several years have transferred their primary

attachment to their spouse, their attachment to God may be more closely tied to their romantic

attachment quality.

Religious Coping

Hathaway and Pargament (1991) conceptualized religious coping as involving appraisals,

cognitive and behavioral coping activities, as well as psychosocial resources and constraints.

Events may be appraised as punishment, reward, or opportunity. Research shows that religious

coping mediates associations between global religiosity and adjustment (Pargament, 1997). It

moderates links between stressors and outcomes, predicting better mental, physical, and

spiritual well-being (Pargament, 1997), and adds variance to the prediction of outcomes beyond

that of nonreligious coping measures (Pargament et al., 1998; Schottenbauer et al., 2006). Only

a few studies have specifically investigated links between religious coping and marital

satisfaction (e.g., Tremblay, Sabourin, Lessard, & Normandin, 2002), finding positive

correlations overall.

Pargament et al. (1988) dichotomized religious coping strategies into positive and

negative categories, based on their associated outcomes. Positive religious coping includes

seeking spiritual connection, forgiveness, collaborating with God, benevolent religious

reappraisal, religious purification, and religious focus. Harmful or unhelpful religious coping

includes passive religious deferral, pleading, interpersonal religious discontent, spiritual

discontent, negative religious appraisals, and doubting God. While positive religious coping

predicts better mental, physical, and spiritual health outcomes, negative religious coping is

associated with more psychological distress (Ano & Vasconcelles, 2005; Harrison, Koenig, Hays, Eme-Akwari, & Pargament, 2001).

Granqvist (2005) noted the conceptual overlap between attachment and coping and the benefits of using attachment theory to explain individual differences in coping. His 2005 study was the first to specifically link religious coping to human attachment. Perceived insecure attachment history was related to involving God in coping, which supports the compensation hypothesis. Religious coping mediated the link between insecure attachment history and endorsement of a compensation prototype (i.e., conversion) as opposed to a correspondence prototype (i.e. stable religiosity). Granqvist did not distinguish between attachment anxiety and avoidance or between positive and negative religious coping. Other researchers reported that secure attachment qualities predicted more positive religious coping, whereas avoidant attachment qualities predicted more negative religious coping and poorer affective resolution following a stressful event (Schottenbauer et al., 2006). Furthermore, negative religious coping mediated the link between ambivalent (i.e., anxious) attachment qualities and worse affective resolution. Avoidant attachment to God has been found to predict more negative religious coping and less positive religious coping, whereas attachment anxiety has been found linked to higher levels of both positive and negative religious coping (Davis, Hook, & Worthington, 2008). Cooper, Bruce, Harman, and Boccaccini (2009) found that individuals with a positive IWM of God used more religious coping. Among those with negative models of God, those with positive self models (i.e., dismissing attachment, low attachment anxiety) rarely pleaded with God, and those with negative self models (i.e., fearful attachment, high attachment anxiety) reported more anger and doubt toward God.

Religiosity and Marital Adjustment

Some aspects of religiosity have been shown to benefit marital functioning (Mahoney, Pargament, Tarakeshwar, & Swank, 2008). However, the combination of different aspects of religiosity (e.g., religious affiliation, beliefs, and church attendance) may misrepresent the effect of any individual facet of religiosity. When religiosity is broadly assessed, some studies show a positive correlation with marital functioning (Lopez et al., 2011; Sullivan, 2001), while others show no relationship or a negative relationship (Koehne, 2000; Vaughan, 2001). Longitudinal studies have reported mixed findings on the link between religiosity and marital satisfaction (Mahoney, 2010).

Lopez et al. (2011) found that respondents' own religious commitment was unrelated to their marital adjustment, but their partner's religious commitment was significantly related to higher actor marital adjustment. Sullivan (2001) theorized three models for how religiosity may influence marital functioning: a direct model, an indirect model (mediated by other variables such as attitudes toward divorce), and a compensation model (whereby religiosity moderates the relationship between marital vulnerabilities and marital satisfaction). Sullivan found that religiosity positively affected marital satisfaction only among couples with less neurotic husbands, whereas it decreased satisfaction among couples with more neurotic husbands.

The Current Study

To address problems in the religiosity and marriage literature due to unreliable, single-item or global measures of religiosity (Mahoney et al., 2008) and extend the findings of Lopez et al. (2011), this study used a valid measure of religious coping, an attachment-relevant aspect of

religiosity. This is the first study to specifically examine religious coping's potential moderation of the effects of attachment vulnerabilities on marital satisfaction. The current study also extended the attachment and religiosity literature by investigating how married adults' religious coping may depend on their romantic attachment quality. The use of a community sample of married couples with at least one child aged 8-11 diminished confounds related to normative developmental changes in religiosity and attachment across family life cycle transitions (Feeney, 2003; Sullivan, 2001) and allowed for variation in strength and type of religious affiliation. Dyadic data analysis techniques accounted for the interdependence of data from both spouses and allowed for exploration of sex, partner, and interaction effects. Major hypotheses, based closely upon Lopez et al.'s findings, included (a) romantic attachment processes would predict marital adjustment and both positive and negative religious coping strategies, (b) positive religious coping strategies would buffer the negative effects of attachment avoidance on marital adjustment, and (c) negative religious coping strategies would exacerbate the negative effects of attachment anxiety on marital adjustment.

Method

Participants

This study was part of a larger project examining attachment and family functioning. Heterosexual married couples (*N* = 86) with at least one child 8 to 11 years of age were recruited from schools, university campuses, churches, community groups, businesses, health care provider offices, and nonprofit organizations in the North Texas area via flyers and web announcements. Incomplete data for five couples yielded an *N* = 81 couples (162 individuals)

for this study. Seventy-two of the couples were in the first marriage for both spouses, and in each of the nine other couples, both spouses had been previously divorced.

Appendix D displays the sample demographics. The mean age for husbands was 38.51 years (*SD* = 5.59; range: 26-51), and the mean age for wives was 36.58 (*SD* = 5.17; range: 26-50). The majority of participants (78.4%) identified themselves as Caucasian/White/European American, 8.6% as Hispanic/Latino/Mexican American, 7.4% as African American, 1.9% as Asian, and 1.9% as Bi-/Multi-racial. This was a highly educated sample, with 57% reporting a bachelor's or graduate degree and another 30% reporting some college credit or a two-year or technical degree. Over half of all spouses worked full-time, 17.9% worked part-time, while 21.6% were unemployed, and 4.3% were students.

Only 79% of participants responded to background questions about religion. The most common religious affiliation was Baptist (21%), with 11% reporting other Protestant affiliations, 11% identifying as "Spiritual but not religious" or having "No religious affiliation," 7.4% as Catholic, 3.7% as Mormon, 1.2% as Hindu, 0.6% as Atheist, and 23.5% reporting "Other religious affiliations." Forty-four percent of participants described their families of origin as "fairly" or "very religious," while 27% described them as "a little" or "somewhat" religious, and 8% described them as "not at all" religious. With regard to their current families of procreation, 52% described them as "fairly" or "very religious," whereas 19% described them as "a little" or "somewhat" religious, and 6% described them as "not at all" religious.

Measures

The background information questionnaire was developed to collect demographic data,

e.g., age, ethnicity, gender, family income, relationship status, religious affiliation, and family religiosity (see Appendix D).

The Brief RCOPE (Pargament, Smith, Koenig, & Perez, 1998) is a brief measure of positive and negative religious/spiritual coping methods, modified from the original 100-item RCOPE (Pargament, Koenig, & Perez, 2000). Participants indicate on a 4-point Likert scale how much they use each of 14 strategies in coping with a negative event. Factor analysis of the Brief RCOPE yielded two factors: (a) the positive religious coping subscale (7 items) assesses spiritual connection, seeking spiritual support, religious forgiveness, collaborative religious coping, benevolent religious reappraisal, religious purification, and religious focus, and (b) the negative religious coping subscale (7 items) assesses spiritual discontent, punishing God reappraisal, interpersonal religious discontent, demonic reappraisal, and reappraisal of God's power. Research has established criterion and discriminant validity as well as moderate to high internal consistency for each scale (Pargament, Smith, et al.). In the present study, the alphas were .99 for both the positive and the negative scales.

The Experiences in Close Relationships Scale (ECR: Brennan, et al., 1998) is a 36-item self-report assessment of adult romantic attachment. The ECR contains two scales of 18 Likert items each, representing attachment avoidance and attachment anxiety. The ECR has shown high construct, concurrent, predictive, and discriminant validity (Crowell, Fraley, & Shaver, 1999; Brennan, et al.). The ECR scales also have also good internal consistency reliability (.91+) and test-retest reliability (.90+) (Brennan, et al.). The alphas in the present sample were .90 for avoidance and .89 for anxiety.

The Dyadic Adjustment Scale (DAS; Spanier, 1976) is a 32-item self-report measure of marital quality. The DAS yields a Total Dyadic Adjustment score and four subscales. Spanier reported significant relationships between the DAS and other criteria of dyadic satisfaction as well as good test-retest (.96) and internal consistency reliability (.90). Only the Total Dyadic Adjustment scale (α = .80) was used in the present study.

Procedures

This study was approved by the University of North Texas Institutional Review Board. Volunteer families (i.e., the couple and all children living in the home) came to the Family Attachment Lab on the University of North Texas campus for data collection. A research assistant (RA) described the study's purpose and procedures to the whole family, answered questions, and obtained both spouses' written consent. After the whole family participated in 3-4 family interaction tasks, the spouses were taken to separate rooms where trained RAs administered an interview, followed by a packet of paper-pencil questionnaires, including the three instruments used in this study. Once all questionnaires were completed, each family received a $30-40 money order and a packet of coupons and tickets for restaurants and recreational activities.

Undergraduate RAs double entered data into SPSS, and Graduate RAs compared and examined for them missingness. No variables were missing more than 2% of data on the ECR or Brief RCOPE, so case mean replacement was employed for missing values for those two measures. The DAS Total Adjustment Scale was missing 6.5%, including two participants for whom the entire instrument was missing. However, Little's MCAR test for the DAS was non-

significant indicating that data were missing completely at random, so the Expectation-Maximization algorithm generated imputed DAS values. Five univariate outliers were pulled in to 3 *SD* from the mean. All variables met assumptions of normality (skew < 1) and homoscedasticity, except for Negative Religious Coping, which was transformed using the natural log to correct for a mild positive skew. To allow for dyadic analyses, data were organized in pairwise structure, such that each row contained the respondents' scores, as well as their partners' scores. All predictor variables were centered on the grand sample mean (Aiken & West, 1991).

Traditional statistics that assume independence are unable to accurately estimate statistical significance when used with married couple data, because spouses inevitably influence one another (Cook & Kenny, 2005). The actor-partner interdependence model (APIM; Cook & Kenny, 2005; Kashy & Kenny, 2000; Kenny, Kashy, & Cook, 2006) may be used effectively with non-independent, dyadic data. Multilevel modeling (MLM) APIM techniques used in this study assume one level of data (each spouse's responses) is nested within a second level (the couple) and can account for error variance both between and within couples. APIM facilitates consideration of *actor effects* (e.g., the effect of the respondents' attachment anxiety on their own marital adjustment), *partner effects* (e.g., the effect of their spouse's attachment anxiety on the respondent's marital adjustment), and *interaction effects* both within and between actor and partner variables (e.g., the interaction of the spouse's attachment avoidance and the respondent's religious coping on the respondent's marital adjustment). The actor-partner interdependence model (APIM) for distinguishable dyads was used because the members of heterosexual couples are distinguishable by sex.

Results

Table 1 contains the correlations within each sex and within dyads and the means and standard deviations of all variables for each sex and the total sample. No pairs of variables had correlations above .90. The measure of nonindependence for distinguishable dyads—the Pearson product-moment correlation of the two spouses' DAS Total scores—was significant ($r =$ .58, $p < .001$), indicating that the data were nonindependent. There were no sex differences in dyadic adjustment or positive religious coping, but women reported significantly more negative religious coping, higher attachment anxiety, and lower attachment avoidance than men. No differences between White and non-White participants emerged for any study variables. Participants with a prior history of divorce had lower current marital adjustment compared to participants in their first marriage but were not significantly different on other study variables. Because of this difference, analyses that included marital adjustment controlled for prior divorce status. Four multilevel models for distinguishable dyadic data using the SPSS Mixed Models procedure were conducted to analyze the data. Only direct and significant interaction effects were included in the final models. Values in the tables are unstandardized regression coefficients.

The first two models tested hypothesized associations between attachment and religious coping. In each analysis, sex was the within-dyad distinguishing variable, while actor attachment anxiety, actor attachment avoidance, partner attachment anxiety, and partner attachment avoidance were the independent variables (IVs). Although interaction terms were included initially, all interactions were nonsignificant, so trimmed models were run without the interactions.

The first MLM used positive religious coping as the dependent variable (see Table 2). Contrary to the hypothesis, attachment anxiety was unrelated to positive religious coping. However, actor attachment avoidance was significantly and negatively related to positive religious coping. No partner variables were significant. The pseudo R^2 calculated according to Kenny et al.'s (2006) method indicated that this model accounted for 4.65% of the variance in positive religious coping.

In the second MLM, negative religious coping was the dependent variable (see Table 2). Female sex was associated with more negative religious coping. In addition, actor and partner attachment anxiety were directly related to negative religious coping, as expected. Although the predicted association between actor attachment avoidance and actor negative religious coping did not emerge, partner attachment avoidance was significantly inversely related to actor negative religious coping.

Because of the significant finding for sex in the initial model, a two-intercept model was run to compare the effects of the attachment variables between the two sexes. The direct relationship between actor attachment anxiety and negative religious coping was significant among both men (*Estimate* = .005, *p* = .002) and women (*Estimate* = .003, *p* = .039). However, partner attachment avoidance was significantly and inversely related to negative religious coping among men only (*Estimate* = -.004, *p* = .036). In other words, men whose wives are higher in attachment avoidance reported lower levels of negative religious coping. This link was not significant among women, although there was a trend in the same direction as for men. In the two-intercept model, partner attachment anxiety was no longer significantly related to negative religious coping, but it closely approached significance among men only (*Estimate* =

.003, p = .053). That is, men with wives who reported high attachment anxiety were slightly more likely to report higher negative religious coping, whereas women's negative religious coping was not significantly affected by their husband's attachment anxiety. The pseudo R^2 for the two-intercept model was .05 for wives and .17 for husbands.

The third and fourth MLMs tested the hypothesized moderating role of religious coping on associations between the attachment predictors and the outcome of marital adjustment. In Model 3, actor positive religious coping was the moderator, whereas actor negative religious coping was the moderator in Model 4 (See Table 3). Like in the previous MLMs, sex was the within-dyad distinguishing variable, and the four actor/partner attachment variables were the IVs. All interactions were included initially, but only those with a p value < .06 were retained in the trimmed models, which are reported below. The one exception to the traditional .05 critical p-value was that the interaction between actor attachment anxiety and positive religious coping so closely approached significance (p = .057) in the full model 3 that it was retained based on the expectation that it would be significant when the other non-significant interactions were removed.

In the third MLM, actor positive religious coping interacted significantly with both actor attachment avoidance and actor attachment anxiety. As shown in Figure 1, actor positive religious coping attenuated the inverse relationship between actor attachment avoidance and actor marital adjustment. However, as shown in Figure 2, although positive religious coping was associated with better marital adjustment in the context of low attachment anxiety, when attachment anxiety was high, positive religious coping did not appear to have a differential effect on marital adjustment. The pseudo R^2 was .39.

In the fourth MLM, with actor negative religious coping as the moderator, only one significant interaction-- the one between partner attachment anxiety and actor negative religious coping--was retained in the trimmed model. Although there was a significant interaction effect, Figure 3 shows that the influence of negative religious coping was not in the predicted direction. Higher levels of negative religious coping were related to lower levels of marital satisfaction only among respondents with partners who reported low attachment anxiety, whereas for those with partners with high attachment anxiety, negative religious coping was associated with higher marital satisfaction. Stated differently, among individuals with low negative religious coping, marital adjustment was inversely related to the partner's level of attachment anxiety. In contrast, among those with high negative religious coping, partner attachment anxiety was directly related to marital adjustment. The pseudo R^2 for this model was .36.

Discussion

The current study investigated the correspondence between romantic attachment processes and positive and negative religious coping strategies, as well as the moderating effect of positive and negative religious coping on the associations between insecure attachment processes and marital functioning. Current results show an inverse relationship between romantic attachment avoidance and positive religious coping, consistent with the correspondence hypothesis (Kirkpatrick & Shaver, 1992) and other research pointing to the preference for self-reliance among dismissing-avoidant individuals (Mikulincer & Shaver, 2007) and their tendency toward agnosticism (Kirkpatrick, 2005). The nonsignificant relationship

between attachment avoidance and negative religious coping is an exception to this pattern and in contrast to Schottenbauer et al.'s (2006) findings of a direct relationship between avoidant attachment qualities and negative religious coping. This could be due to the restricted variance of negative religious coping in this sample, but may also indicate that avoidant individuals do not use negative religious coping in a consistent way. Avoidant individuals with a negative model of the other as unresponsive appear to have difficulty experiencing God as a responsive attachment figure, or at least, do not report using God in this way. However, it seems that individuals with high attachment avoidance do not necessarily engage in more negative religious coping. They may instead cope by denying dependency on God and using nonreligious forms of coping.

Attachment anxiety was unrelated to positive religious coping but directly related to negative religious coping. The latter finding may be explained by the negative model of the self (i.e., viewing oneself as deserving of punishment) and the general tendency toward negatively biased perceptions of support among individuals with high attachment anxiety (Campbell, Simpson, Boldry & Kashy, 2005). Bowbly (1973) asserted that anxiously attached individuals attend to data that confirm the abandonment they expect, and this seems to apply with divine as well as human attachment figures. The finding is also consistent with prior findings relating highly anxious romantic attachment to themes of compensation (Granqvist & Hagekull, 2001) and with Hall, Fujikawa, Halcrow, Hill, and Delaney (2009)'s Implicit IWM Correspondence and Explicit Religious Compensation models. Individuals with a negative self model often feel unable to cope alone (Mikulincer & Shaver, 2007), but when seeking out God and their religious community, seem to expect and experience abandonment or punishment.

Hart, Limke, and Budd (2010) speculated that romantic attachment anxiety might predispose adults to cling to closed-minded and rigid religiosity, which could hinder relating to the divine and the faith community in a trusting way. Given their feelings of incompetence combined with fear of abandonment by others, it may be difficult for anxiously attached individuals to engage in positive religious coping, which includes a willingness to seek support from both God and the faith community. Indeed, the inconsistent relationship between attachment anxiety and positive religious coping parallels inconsistencies in prior research on attachment anxiety and support seeking (Rholes, Simpson, Cambell, & Grich, 2001; Vogel & Wei, 2005).

These findings may be contrasted with those of Davis, Hook, and Worthington (2008), who reported that, among Christians, avoidant attachment *to God* was related to higher negative religious coping and lower positive religious coping, whereas attachment anxiety in relation to God was associated with higher levels of both positive and negative religious coping. Current results also offer an interesting comparison with findings among newlywed, childless couples (Lopez, et al., 2011) that higher religious *commitment* (a broader construct assessing the integration of religion in daily life) was negatively associated with a romantic attachment avoidance but unrelated to romantic attachment anxiety. Taken together, these findings seem to convey that attachment avoidance most strongly predicts the lack of a secure, positive relationship to God, whereas attachment anxiety predicts more inconsistency in one's relationship to God.

Although positive religious coping was unrelated to partner attachment strategies, men were most likely to use negative religious coping when their wives had lower attachment

avoidance and higher attachment anxiety. Perhaps because societal gender socialization cultivates both religiosity and general dependence more in females than males, women's negative religious coping was independent from their husbands' attachment processes. Wives with high attachment anxiety and low attachment avoidance may be sought by men who feel rejected by God or under spiritual attack (those high in negative religious coping), because these women prefer very close relationships, which may calm the men's fears. In this sample, participants with high negative religious coping tended to have more attachment anxiety (i.e., negative self model and fear of abandonment), which may manifest itself among men both in the preference for more emotionally expressive and enmeshed romantic relationships and a tendency to feel abandoned, unloved, or punished by God. These men may also seek help from God and their faith community to compensate for their wives' inadequate or intrusive caregiving but experience discontent in these faith-based relationships because of their negative self model.

Female sex was associated with higher levels of negative (but not positive) religious coping. In addition, the previously mentioned links between attachment variables and negative religious coping were significant only among the husbands. That is, whereas men are most likely to use negative religious coping when they have higher attachment anxiety, and partners with lower attachment avoidance, women's negative religious coping is not significantly predicted by their actor or partner attachment variables. These findings add to the complex literature on sex and gender differences in religiosity (Simpson, Cloud, Newman, & Fuqua, 2008).

As predicted, actor positive religious coping buffered the negative effects of actor attachment avoidance on marital adjustment, such that attachment avoidance is less

detrimental to marital functioning when the avoidant person uses more positive religious

coping strategies. Positive religious coping may reflect a compensatory secure attachment to

God, which has been linked to tolerance of differences with others (Beck, 2006) and could

promote resilience during marital conflicts. Positive religious coping strategies such as

benevolent reappraisal of negative events and finding meaning in trials may help avoidantly

attached individuals remain satisfied with their marriage over time. On the other hand, positive

religious coping made little difference to marital adjustment when attachment anxiety was

high, but showed the expected relationship with better marital adjustment when attachment

anxiety was low. In other words, high attachment anxiety appears to remove the benefit of

positive religious coping on marital adjustment.

Positive religious coping did not interact significantly with partner attachment variables,

but actor negative religious coping interacted with partner attachment anxiety. Specifically,

spouses who reported high levels of negative religious coping reported higher marital

satisfaction the higher their spouse's level of attachment anxiety, whereas among those who

reported low negative religious coping, their marital adjustment decreased with increasing

partner attachment anxiety. This finding was surprising and contrary to the hypothesis based

on prior findings that greater religious commitment, an admittedly broader construct,

exacerbated the negative effects of attachment anxiety on marital adjustment (Lopez et al.,

2011). Instead, current findings indicate that c highlighting a need for tentativeness with regard

to assumptions about the effects of religious constructs. This finding is particularly interesting

given the link found in the present sample between husbands' negative religious coping and

their wives' attachment anxiety. It appears that partner attachment anxiety is more detrimental

to marital adjustment when negative religious coping is low, whereas higher negative religious coping may distract individuals from their partner's attachment anxiety or limit its influence in some other way. For example, perhaps religious discontent opens the door to blaming God rather than spouse for problems, thereby maintaining the spouses' closeness and satisfying the partner with high attachment anxiety, and thus improving dyadic interactions. Alternatively, it may be that the partner's attachment anxiety, manifested in a strong desire for closeness, compensates for the effects of feeling of abandoned by God on the other partner's well-being, resulting in improved marital functioning.

Current results demonstrating that the link between attachment avoidance and marital dysfunction is diminished in the context of positive religious coping support Sullivan's compensation model and suggest that religiosity can decrease the impact of marital vulnerabilities on marital adjustment. Positive religious coping may loosen dismissing individuals' negative other models and allow them to be more forgiving, optimistic, and altruistic during marital conflicts. That positive religious coping more clearly buffered attachment avoidance than attachment anxiety is consistent with the results of a prior study showing a similar effect for religious commitment (Lopez et al., 2011).

Strengths, Limitations, and Future Research Recommendations

The use of attachment theory as an overarching theoretical framework for conceptualizing the individual's relationships both to God and spouse is a strength of this study. Additionally, the recruitment of couples with children and the inclusion of both spouses allowed for consideration of partner effects and comparison with unmarried and childless couple samples. However, the generalizability of these findings is limited to similar populations.

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Given that the effects of religious coping are strongest among those for whom religion is a salient part of identity (Pargament, 1997), results might differ in samples with different levels and more diverse expressions of religiosity.

This study is limited by the cross-sectional, self-report nature of the data. Longitudinal research could be used to discern the direction of the relationships between romantic attachment variables and religious coping. While theoretically they are both rooted in the prototype IWMs developed based on interactions with early caregivers, the timing of the first romantic attachment compared to the development of attachment to God may vary. The current study assessed only adult romantic attachment, but future research could include parent-child attachment. Observational measures of marital interactions could address concerns about social desirability, potentially biased reporting of marital adjustment, and common method variance.

This study used a theoretically-relevant and psycho-metrically sound religiosity measure, the Brief RCOPE. The separation of positive and negative religious coping expands the literature linking religiosity and couple adjustment. The generalizability of the results is limited to this specific construct of religious coping. Future research should also explicitly assess additional specific religiosity constructs. This study assessed religious coping in general; however, individuals may be more likely to call upon God when stressors are seen as out of human control (Kirkpatrick, 2005). Given that avoidant defenses collapse under pressure (Mikulincer & Shaver, 2007), the type or severity of stressor could interact with attachment processes to predict coping.

Summary and Clinical Implications

Results support the usefulness of attachment theory for conceptualizing one's

relationship to God and point to religious coping as a potential resource that could receive

attention in relationship counseling. This study provides some support for both the use of God

as a compensatory attachment figure and the correspondence of internal working models of

attachment to spouses and God. Findings suggest that individuals tend to relate to God by

coping in similar ways as predicted by their romantic attachment strategies. Positive religious

coping strategies (e.g., seeking God's comfort, reappraisal of negative events, and meaning-

making) may help individuals maintain more positive marital quality despite avoidant

attachment processes, so these strategies may be conceptualized as resources to be harnessed

in therapeutic work. However, the benefits of positive religious coping on marital adjustment

are limited in the context of attachment anxiety, suggesting that promoting attachment

security in the couple relationship may be a preferable first intervention. Thus, both

attachment to partner and God merit exploration in individual and couple counseling.

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Table 1

Correlations between Husbands and Wives for All Variables

	Attachment Avoidance	Attachment Anxiety	Positive RCOPE	Negative RCOPE	Dyadic Adjustment
Attachment Avoidance	**.206**	.449**	-.174	.059	-.548**
Attachment Anxiety	.441**	**.027**	-.051	.222*	-.437**
PositiveRCOPE	-.243*	-.038	**.491****	.119	.109
Negative RCOPE	.113	.319*	.143	**.056**	-.043
Dyadic Adjustment	-.516**	-.379**	.358**	-.135	**.587****
Means (SD) Total	42.35 (19.29)	52.10 (18.69)	20.05 (6.47)	9.11 (2.71)	44.33 (6.80)
Husbands	45.91 (20.60)	49.07 (18.13)	19.35 (6.79)	8.74 (2.83)	44.21 (6.80)
Wives	38.78 (17.29)	55.13 (18.85)	20.74 (6.08)	9.47 (2.54)	44.46 (6.85)

Note. Correlations for husbands appear below the diagonal; correlations for wives appear above the diagonal. Bolded correlations along the diagonal are between dyad members. *p < .05, **p < .01, ***p < .001.

Table 2

Final Models Predicting Positive and Negative Religious Coping

	Estimates of Fixed Effects (*SE*) Predicting	
	Positive Religious Coping	Negative Religious Coping
Sex	-.52 (.39)	-.049 (.021)*
Actor Attachment Avoidance	-.08 (.03)**	-.0003 (.001)
Partner Attachment Avoidance	-.01 (.03)	-.003 (.001)**
Actor Attachment Anxiety	.02 (.03)	.004 (.001)**
Partner Attachment Anxiety	.05 (.03)	.002 (.001)*

* p < .05, ** p < .01, *** p < .001

Table 3

Moderation Models Predicting Marital Adjustment

	Estimates of Fixed Effects (*SE*) Predicting	
	Positive Religious Coping	Negative Religious Coping
Sex	.36 (.25)	.05 (.03)
Previously Divorced Status	-2.45 (.13)	.06 (.86)
Actor Attachment Avoidance	-.12 (.00)**	-2.13 (.20)
Partner Attachment Avoidance	-.05 (.06)	-.14 (.00)**
Actor Attachment Anxiety	-.07 (.01)**	-.04 (.15)
Partner Attachment Anxiety	-.05 (.04)*	-.08 (.00)**
Actor Pos/Neg Religious Coping	.21 (.01)**	-.04 (.14)
Partner Pos/Neg Religious Coping	-.08 (.20)	.28 (.86)
Actor Attach. Avoidance * Actor Pos/Neg Religious Coping	.01 (.00)*	.28 (.86)
Actor Attach. Anxiety * Actor Pos/Neg Religious Coping	-.01 (.00)*	.20 (.02)*

* *p* < .05, ** *p* < .01, *** *p* < .001

Figure 1. Moderation effect of actor positive religious coping on the relationship between actor attachment avoidance and marital adjustment.
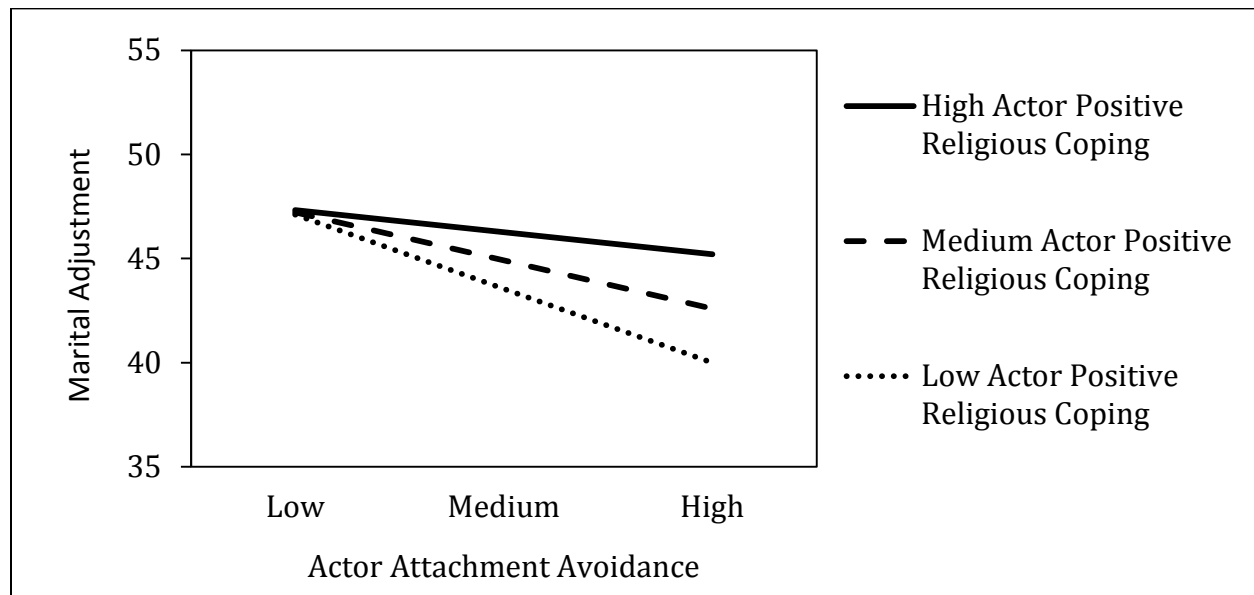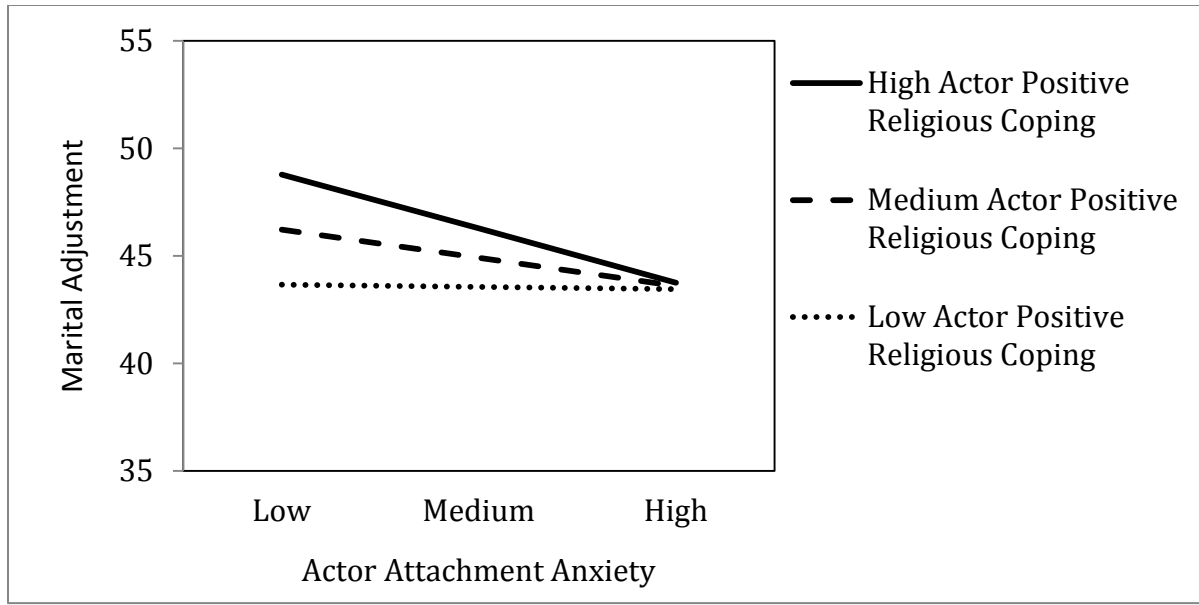
Figure 2. Moderation effect of actor positive religious coping on the relationship between actor attachment anxiety and marital adjustment.
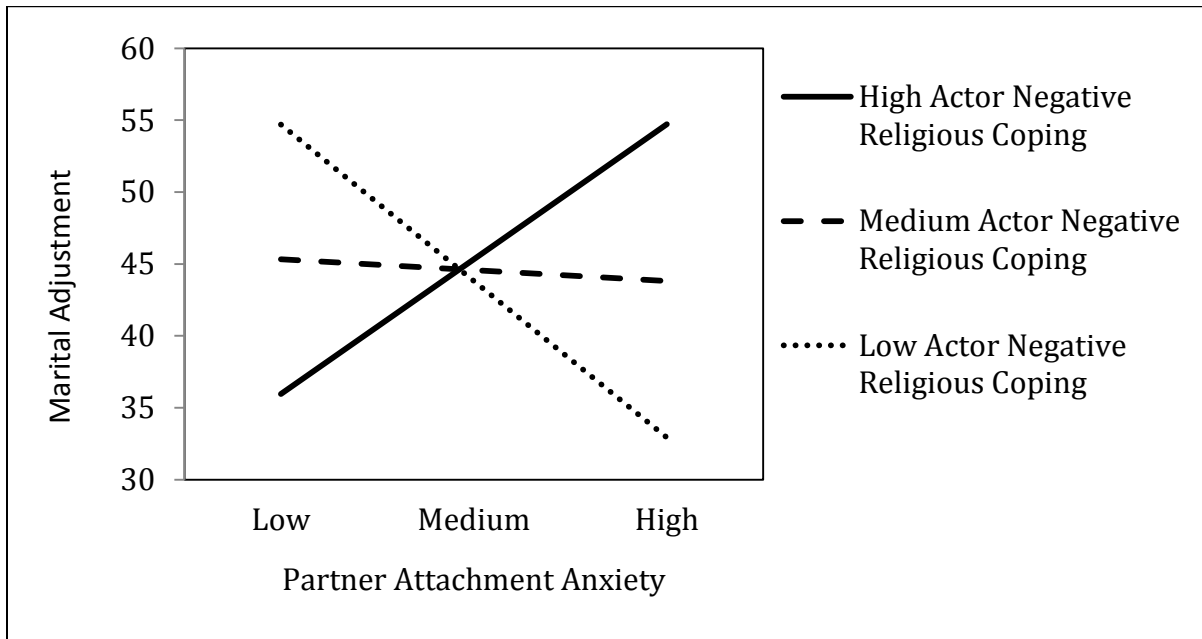

Figure 3. Moderator effects of actor negative religious coping on the relationship between partner attachment anxiety and marital adjustment.

APPENDIX A

EXTENDED LITERATURE REVIEW

Attachment theory is useful for conceptualizing individuals' relationships to their

parents, spouse, and to God. According to Bowlby (1969/1982), attachment bonds evolved for

the protection and nurturance of infants by a stronger and wiser other. Infants' first strategy

when threatened is to seek proximity to their caregiver as a safe haven. When this caregiver is

responsive, they feel safe enough to explore the world, using the attachment figure as a secure

base. However, if the caregiver is inconsistent in responding, the attachment system remains

activated, resulting in increased anxiety and exaggerated expressions of need to get the

caregiver's attention. Conversely, if the caregiver is consistently rejecting, the infant may

deactivate the attachment system, denying his or her needs. Relational experiences are stored

in mental representations of the self and other along with procedural knowledge for managing

emotions and threats, which lead to biased appraisals of danger and the viability of seeking

support (Bowlby).

The literature on attachment and religiosity is largely separate from the literature on

attachment and general coping strategies (Granqvist, 2005). Just as individual differences in

attachment predict differences in nonreligious coping strategies (see Mikulincer & Shaver,

2007, for a review), they are expected to also predict differences in religious coping strategies.

This hypothesis is supported by previous findings linking attachment and other religiosity

constructs (e.g., Granqvist & Kirkpatrick, 2004). Scholars have noted that people relate to God

in many ways that suggest an attachment relationship, and research suggests some

correspondence between one's attachment history with humans and one's relationship to God

(Beck & McDonald, 2004; Granqvist, 2005; Kirkpatrick & Shaver, 1992; Kirkpatrick, 2005). Some

individuals may use God to compensate for the lack of a secure human relationship (Cassiba et

al., 2008; Granqvist & Hagekull, 2003; Reinert, 2005). Using God as a coping resource may buffer the marital vulnerabilities of individuals with insecure romantic attachments, but this remains to be studied empirically.

Research thus far indicates that religious coping may have positive and negative effects on a range of outcomes (Pargament et al., 1998), but its effects on marital satisfaction remain to be established. Despite their conceptual overlap, the attachment and religious coping literatures have rarely been integrated. Attachment theory may supplement religious coping research well because it can developmentally explain individual differences in coping strategies (Granqvist, 2005).

The purpose of the proposed study is to examine the associations among romantic attachment processes (anxiety and avoidance), positive and negative religious coping strategies, and marital adjustment and to investigate whether religious coping variables may moderate the expected association between attachment vulnerabilities and marital dysfunction. This chapter will review the literature on continuity and discontinuity in attachment, adult attachment, romantic attachment and marital functioning, attachment and religiosity/spirituality, religious coping, and the established links among religiosity, coping, and marital adjustment.   The final section will present the rationale and general description of the proposed study.

A Brief History of Attachment Theory and Research

John Bowlby, the father of attachment theory, was trained as a psychoanalyst. Accordingly, his theory acknowledges the unconscious, the primacy of early experiences with

caregivers, defense mechanisms, and mental representations of self and other. What differentiates attachment theory is its acknowledgement that working models may be altered by interpersonal experiences well into adulthood, as well as its replacement of autonomy with healthy interdependence as the ideal (Mikulincer & Shaver, 2007).

Bowlby (1969/1982) proposed that the main function of an attachment bond is protection and nurturance by someone stronger and more capable. Bowlby described normative aspects of the attachment behavioral system, including species-specific behaviors for gaining proximity to the caregiver during times of stress (e.g., crying, reaching and clinging). These attachment behaviors are universal in infancy but as the individual develops, they are adapted to their context. The attachment system is triggered by environmental signals of threat. When its goal of comfort or "felt security" (Sroufe & Waters, 1977) is attained and the threat subsides, the attachment system deactivates and the exploration system takes over, allowing the individual to engage in activities such as obtaining food, reproducing, and acquiring skills. The ability to engage in such exploration when not in distressing conditions is adaptive for species survival.

The attachment system is distinct from but related to the caregiving system, which guides the caregiver's response to infant attachment behavior. Bowlby (1973) and Ainsworth, Blehar, Waters, and Wall (1978) considered parental sensitivity, availability, and responsiveness to the infant as the essential foundation of secure attachment. Security-promoting parental behaviors specifically noted by Ainsworth et al. included immediate and contingent responding to the infant's crying, timing of feeding, sensitivity to the infant's needs and signals,

psychological accessibility when the infant seeks comfort or support, cooperation, and acceptance of the infant's needs and behavior.

Early interactions with caregivers form the basis for individual differences in internal working models (IWMs) of the self and other and for the learning of strategies tailored to maintain proximity to the particular attachment figure (Bowlby, 1973). Mikulincer and Shaver (2007) explained that the innate primary strategy for handling threats is to seek proximity to a stronger other, but if this fails, the infant must employ a secondary strategy to manage the threat. One option is the hyperactivating strategy, which might include louder protests and crying. Mikulincer and Shaver explained that this strategy commonly develops when the caregiver has been inconsistently available, essentially rewarding the child's proximity seeking on a variable reinforcement schedule. Furthermore, hyperactivating infants often also develop hypervigilance to threat which inhibits exploration. On the other hand, if the caregiver has consistently rejected or punished the child's proximity seeking behavior, the child develops a tendency to employ the deactivating strategy, which includes excessive self-reliance and denial of vulnerability. The history of repeated interactions with caregivers is stored in internal working models (IWMs), which are cognitive-affective structures that allow for efficient prediction of the most successful strategy (Mikulincer & Shaver). IWMs include episodic memories, beliefs about the self and other, and declarative and procedural knowledge about emotions and relationships (Collins & Read, 1994). These models are self-reinforcing and contribute to consistent patterns that make up an attachment style (Bowlby).

Measures of Attachment

Ainsworth (1967) identified three attachment styles in infancy that are associated with parenting behavior. In the Strange Situation lab procedure, children classified as secure were distressed upon separation from their mothers but could be soothed easily upon her return and resume exploring the playroom. Their mothers were sensitive and responsive in the home setting. Anxious-ambivalent children, whose mothers were inconsistent at home, would be very upset upon separation and demonstrate ambivalence upon her return, such that they would be both angry and clingy and could not calm down to resume playing. Finally, avoidant children would not show distress upon separation, continuing to explore in the mother's absence, and seemed not to notice her return. These children were consistently rejected by their mothers at home. Later, Main and Solomon (1990) identified a fourth infant attachment category, called disorganized, characterized by the lack of a consistent strategy and either a mix of behaviors associated with both secure and insecure attachment or odd behaviors such as walking backward toward the mother. This style appears to result from parenting that is frightening due to a parent's unresolved trauma or loss.

Early adult attachment measures asked participants to choose which of three or four descriptions best described them. Hazan and Shaver's (1987) Adult Attachment Style Questionnaire (AASQ) had three categories, which paralleled the original three Strange Situation patterns: secure, avoidant, and anxious-ambivalent. Bartholomew and Horowitz's (1991) Relationship Questionnaire (RQ) proposed a four category model (secure, dismissing, preoccupied, and fearful) and incorporated Bowlby's notion of the IWMs, suggesting that evaluations of self and other combine to create attachment styles. Secure and dismissing styles

share a common positive IWM of the self, whereas the IWM of the other is positive for secure adults and negative for dismissing adults. Preoccupied and fearful adults both have negative self models, but while preoccupied adults have positive other models, fearful adults have negative other models.

Early dimensional measures included Likert ratings for each prototype paragraph on the AASQ or RQ, as well as the Adult Attachment Scale (Collins & Read, 1990), Relationship Scale Questionnaire (RSQ; Griffin & Bartholomew, 1994), Adult Attachment Scale (de Jong, 1995), and Measure of Attachment Qualities (Carver, 1997a). Current research suggests that two dimensions underlie adult attachment self-report measures (e.g., Bartholomew & Horowitz, 1991; Simpson, Rholes, & Nelligan, 1992), both of which are represented on the Experiences in Close Relationships instrument (Brennan, Clark, & Shaver, 1998) used in the proposed study. The first dimension, *attachment anxiety,* represents the internal working model of the self. Adults with low attachment anxiety have a positive self-concept, whereas adults with high attachment anxiety have negative self-concepts. Individuals with high attachment anxiety worry about their own self-worth, strongly desire closeness to another person, and fear rejection or abandonment. The second dimension, *attachment avoidance,* represents the internal working model of the other. Adults with low attachment avoidance have positive other models and expect others to be available and responsive, whereas adults with high attachment avoidance have negative other models and tend to dislike depending on anyone. Individuals with high attachment avoidance are uncomfortable with closeness, compulsively self-reliant, and avoid disclosing vulnerable emotions and aspects of themselves (Mikulincer & Shaver, 2007). Low anxiety and avoidance are characteristic of attachment security, which is associated

with more adaptive coping and higher relational functioning (see Mikulincer & Shaver, 2007, for

a review). In contrast, high attachment anxiety and avoidance are both risk factors for marital

dysfunction.

Separate bodies of literature exist for adult attachment as measured via a number of

self-report instruments and as measured by the Adult Attachment Interview (AAI; George,

Kaplan, & Main, 1996). The AAI assesses the coherence of adults' discourse about attachment

relationships and categorizes them according to their current state of mind with respect to

attachment rather than according to attachment style or dimensions. As self-reported

attachment is most relevant to the proposed study, the research on the AAI will not be

reviewed extensively. In the following literature review, all studies used self-report measures

of attachment style or dimensions, with very few exceptions for which the use of the AAI will be

explicitly noted.

Continuity and Discontinuity of Attachment

Bowlby (1973) proposed that attachment patterns stem from actual experiences

involving primary caregivers during early childhood, and that these patterns are fairly stable yet

modifiable throughout the lifespan. Building on cognitive psychology, Bowlby asserted that

individuals seek and especially attend to information that confirms their expectations and tend

to overlook or dismiss disconfirming evidence. They also behave in ways that elicit the behavior

they are expecting from others and seek out partners who behave in familiar ways, which

further reinforces their internal models (Bowlby, 1973). Nonetheless, Hazan and Shaver (1987)

hypothesized that "the continuity between childhood and adult experiences decreases as one

gets further into adulthood" based on the potential accumulation of different attachment experiences with a number of romantic partners, which offer opportunities for the revision of IWMs (p. 522).

Although individuals tend to assimilate information into their existing self and other schemas if possible, these schemas are reality-based, so with the accumulation of different experiences or possibly one experience that sharply diverges from expectations, individuals will accommodate their schemas to fit the new information (Mikulincer & Shaver, 2007). Later attachment theorists and longitudinal research data suggest that at a given time, attachment behavior is influenced by both current internal working models, which are subject to change in response to new experience, and the prototype models developed in early childhood, which remain unchanged (Fraley, 2002). Prototype internal working models were formed prior to the development of language, and thus unconsciously influence behavior and reflex-like reactions (Mikulincer & Shaver). Furthermore, prototype-discrepant experiences during childhood, adolescence, or adulthood can influence the degree of continuity of attachment style.

Waters (1978) found that 96% of infants could be classified into the same attachment category based on Strange Situation assessments at 12 and 18 months of age. Fraley (2002)'s meta-analytic findings suggest moderate stability of attachment security versus insecurity during childhood, using various measures described in Hesse (1999) and Solomon and George (1999). He reported a mean correlation of .27 among studies comparing Strange Situation assessments during infancy and Adult Attachment Interviews (AAIs) administered at age 19-20.

Discontinuity of attachment during childhood has been related to changes in infant-mother interactions which are affected by changes in family and caregiving circumstances

(Thompson, Lamb, & Estes, 1982). Attachment-relevant events such as maltreatment, parental divorce, or the loss or serious illness of a parent that occur during childhood or adolescence can lead to a secure infant becoming insecurely attached in young adulthood (Compton & Follette, 2002; Messman-Moore & Long, 2000; Riggs & Jacobvitz, 2002). However, a secondary supportive figure in the child's life often serves as a buffer to maintain security of attachment (Mikulincer & Shaver). The research as a whole suggests that the continuity of attachment is a dynamic process from infancy through adulthood based on an early prototypical mental model of relationships interacting with additional accumulated attachment-relevant experiences (Mikulincer & Shaver).

From early adulthood forward, attachment variables are even more stable but still subject to revision based on attachment-relevant events (e.g., loss of a romantic partner), albeit less easily over time (Mikulincer & Shaver, 2007). Fraley's (2002) meta-analysis found that the stability of attachment security-insecurity across adulthood using various measures described by Hesse (1999) and Solomon & George (1999) was higher (.54) than that across childhood (.39). The test-retest reliability of continuous self-report measures of adult attachment processes averaged .56, and the concordance of attachment category ranged 44-90%, averaging 70%, even after 25 years. In a number of longitudinal studies, ranging from one to fifty-two weeks, roughly 30% of each sample reported changes in attachment styles (Baldwin & Fehr, 1995; Davila, Burge, & Hammen, 1997; Kirkpatrick & Hazan, 1994). Although some change may be due to measurement error, this still leaves room for changes toward insecurity based on experiences of rejection, criticism, or disapproval from an attachment figure or alternatively

in the direction of security based on supportive, sensitive and available adult relationships (Mikulincer & Shaver).

In their 6-year longitudinal-sequential study of participants ranging from adolescence through older adulthood, Zhang and Labouvie-Vief (2004) found substantial stability but greater discontinuity in responses to Bartholomew and Horowitz's (1991) RQ. Test-retest correlations ranged .40-.49 between Time 1 and Time 2 (two years later) and .24-.45 between Time 1 and Time 3 (four years later). Attachment representations at Time 1 predicted less than 30% of the variance in later assessments, leaving 70% or more unaccounted for. Over time, the rates of secure and dismissing attachments increased while preoccupied attachments declined. Some research suggests that security tends to increase across the transitions to marriage (Crowell, Treboux, & Waters, 2002) and motherhood (Simpson, Rholes, Campbell, & Wilson, 2003).

Empirical findings of discontinuity have been inconsistent. Possible explanations suggested by researchers include moment-to-moment changes in activation of different parts of a hierarchy of working models (Baldwin & Fehr, 1995; Baldwin, Keelan, Fehr, Enns, & Koh-Rangarajoo, 1996), differences in subjective appraisals of so-called attachment-related stressors, changes in circumstances, or disorganization of attachment models (Davila et al., 1997; Davila & Cobb, 2003). Bowlby (1988) asserted that corrective experiences may occur with subsequent attachment figures, such as a romantic partner, therapist, or diety, which could alter IWMs.

Adults may rely on friends, romantic partners, teachers, and clergy for attachment functions (Ainsworth, 1991; Weiss, 1982); however, the romantic pair bond is the prototype attachment relationship for adulthood (Bowlby, 1969/82). While still partially unconscious,

attachment processes become more conscious in adulthood than childhood in that the person

actively thinks about and decides whether or not to seek support and from whom (Mikulincer &

Shaver, 2007). Nevertheless, Bartholomew and Horowitz's (1991) finding that adults' self-

reported attachment to peers was correlated with their self-reported attachment to family

members, supports the general tendency toward continuity of attachment style across

attachment figures.

Adult Attachment

Adult attachment behaviors are essentially bids for closeness and can include

communicating a desire to maintain or obtain proximity, displays of negative emotion in order

to be comforted, physical and psychological approach behaviors, and direct requests for help

(Mikulincer & Shaver, 2007). Adult attachment security, then, depends on the attachment

figure's sensitive responsiveness to those bids for closeness. When a positive response is not

received, the individual often increases the intensity of the attachment behavior (e.g., crying

louder, pleading) and if still no comfort is offered, the individual will defensively withdraw from

their partner.

In a naturalistic observation study, Fraley and Shaver (1998) found that couples waiting

at an airport were more likely to engage in physical contact with one another if they were

about to separate than if they were not. Fraley and Shaver interpreted these results as

evidence for the idea that threats of separation provoke proximity-seeking behavior within

adult couples. Furthermore, the presence of a relationship partner during a stressful event has

been shown to soothe and alleviate distress in adults (Coan, Schaefer, & Davidson, 2006; Edens,

Larkin, & Abel, 1992). The subjective appraisal of one's partner as supportive during stressful events is related to both lower levels of distress and decreased likelihood of developing somatic or emotional problems subsequent to the stressor (for a review and meta-analysis see Cohen, Gottlieb, & Underwood; Finch, Okun, Pool & Ruehlman, 1999). In addition, independent observer ratings of supportive partner behavior while one partner discusses a personal problem were related to how much better the support-seeking partner felt after the conversation and to overall relationship quality (Collins & Feeney, 2000). Participants' perceptions of the interaction were related to their attachment strategies.

Attachment security is associated with positive adjustment, whereas the combination of negative models of self and other (high anxiety and high avoidance) is associated with the poorest relational functioning and mental health (e.g., Onishi, Gjerde, & Block, 2001; Riggs et al., 2007). Ambivalent (i.e., preoccupied) attachment has been associated with experiencing high levels of distress, anxiety, hostility, and anger (Cooper, Shaver, & Collins, 1998). Some research has shown that avoidant individuals report less distress, anxiety, and depression than secure individuals (Solomon, Ginzberg, Mikulincer, Neria, & Ohry, 1998). However, evidence that links attachment avoidance to higher levels of hostility, avoidance, depression, anxiety, and obsessive-compulsive symptoms has also been found (Riggs, Abdullah, Pollard, Rodgers, & Madison, 2010; Solomon et al.). Avoidantly attached individuals' defensive denial of distress tends to collapse under pressure (Berant et al., 2001;). Mikulincer and Florian (1995) found the distress levels of avoidantly attached adults were intermediary between those of secure and anxiously attached adults.

Adult Attachment and Strategies for Regulating Distress

Shaver et al. (1987) argued that the attachment system is an emotion-regulation system. They explained that when expressing emotions would block the attainment of a goal (e.g., felt security), humans invoke regulatory efforts. The attachment system is activated by stress or threat, and the primary strategy of proximity seeking serves to obtain felt security, which allows the person to return to other activities and begins a "broaden and build" cycle that promotes personal growth and self-actualization (Mikulincer & Shaver, 2007). If this strategy is perceived as unlikely to obtain the felt security sought, the individual automatically and often unconsciously chooses other strategies, which have implications for their emotional and interpersonal functioning. Secure people's successes obtaining support reinforces help-seeking as a viable emotional regulation strategy in times of stress (Mikulincer & Shaver). In contrast, insecure individuals' histories lead them to make biased appraisals of threat and availability and to mistrust proximity seeking; as a result, they instead employ hyperactivating or deactivating strategies or a combination of the two (Mikulincer & Shaver; Ein-Dor, Mikunlincer & Shaver, 2011).

Mikulincer, Shaver, and Pereg, (2003) identified two types of psychological pain related to caregiver unavailability, each with its own associated strategy. On the one hand, feelings of vulnerability and helplessness to handle threats alone lead some individuals to work harder (i.e., hyperactivate the attachment system) to obtain attention and help from the caregiver. This is encouraged when the caregiver is unpredictable or intrusive, interferes with autonomous coping and self-regulation, and communicates that one is incompetent, or when the individual is traumatized while separated from the attachment figure. On the other hand,

feelings of failure and experiences of being punished by the caregiver for prior proximity-seeking behaviors lead other individuals to think that continued support seeking would be futile or even dangerous, so they opt to deactivate the attachment system. This is encouraged when caregivers are consistently inattentive, rejecting, violent, or abusive, threaten to or actually punish attachment behaviors, or communicate that self-reliance and inhibition of showing vulnerability are warranted.

Hyperactivating strategies are characteristic of attachment anxiety and include excessive dependence and demands for attention, a strong desire for enmeshment, clinging, and controlling behavior to keep the partner close (Mikulincer & Shaver, 2007). Anxiously attached individuals also tend to exaggerate threat, distress, their own inability to cope, and what they perceive as caregiver unavailability (Mikulincer & Shaver). They may also internalize blame for caregiver unavailability, which exacerbates their negative self-concept (Mikulincer & Shaver).

Deactivating strategies include denying or minimizing threats and the need for caregiving, avoiding negative emotions that might trigger attachment needs, avoiding close relationships that require intimacy, denying personal weaknesses or relational tensions, dismissing a partner's distress or desire for closeness, and suppressing of self-doubt and fears of separation and loss (Mikulincer & Shaver, 2007). Consequently, avoidantly attached individuals often defensively inflate their own self-concept, avoid commitments, and disconnect sexuality from emotional commitment (Mikulincer & Shaver).

Individuals with the fearful attachment style employ a haphazard combination of hyperactivating and deactivating strategies, with what looks like a confusing, chaotic blend of

abortive approach and withdrawal behaviors or possibly paralyzed inaction (Mikulincer &

Shaver, 2007). Unlike those with the dismissing-avoidant style, fearful individuals withdraw out

of acknowledged fear and distress, but still desire closeness, and wish they did not feel this way

(Mikulincer & Shaver). This latter attachment style may be the result of abuse and other

attachment-traumas or otherwise highly unpredictable caregiving as is the case sometimes

when a parent abuses drugs or struggles with unresolved grief (Mikulincer & Shaver).

Individuals with the fearful attachment style are often unassertive, and they tend to have the

poorest romantic relationship functioning and mental health (Mikulincer & Shaver).

Mikulincer and Shaver (2004) acknowledged that, in addition to observably seeking

physical proximity to attachment figures, adults rely on internal representations of prior or

imagined caregivers and may seek solace in security-based self-representations (i.e., mental

models of themselves in relation to responsive others and introjections of these caregivers)

based on historical interactions. The ability to self-sooth is rooted in early experiences of being

comforted by a caregiver, which contribute to feelings of calm and coping self-efficacy

(Mikulincer & Shaver, 1994; 2007). Creath et al. (1998) found that among married people, those

who are securely attached reported the most independent behavior. Thus, secure individuals,

because of their richer history of security-enhancing attachment interactions, are more prone

to call upon self-care strategies and feel genuinely comforted by them (Mikulincer & Shaver,

2007).

Adult Attachment and Coping

Secure attachment creates a body of procedural knowledge about how to manage

distress in a healthy, flexible way (Mikulincer & Shaver, 2007). This secure-base script includes

awareness and communication of distress, positive reappraisals, emotional and instrumental

support-seeking, and practical problem solving (Marques, 2006; Mikulincer & Shaver, 2004;

Waters, Rodriguez, & Ridgeway, 1998). Security facilitates attending to constructive

alternatives, as well as tolerating ambiguity in challenging situations, and adjusting strategies

and plans flexibly without excessive self-criticism or doubt (Mikulincer & Shaver, 2007; Scharf,

Mayseless, & Kivenson-Baron, 2004). Secure individuals' positive beliefs about themselves and

the world allow them to attribute unpleasant events to temporary, situational, controllable

causes (Mikulincer & Shaver, 2007). Positive event-related appraisals predict more acceptance

and reframing and less avoidance, denial, venting, support seeking, and religious coping (Major,

Richards, Cooper, Cozzarelli, & Zubek, 1998). Whereas secure individuals tend to appraise

events as less threatening and themselves as competent to cope, anxiously attached individuals

view events as very threatening and themselves as incompetent, and avoidantly attached

individuals tend to view their coping resources as adequate and the event as threatening only if

it is undeniably stressful (Mikulincer & Shaver, 2007). According to Ein-Dor, Mikulincer, and

Shaver (2011), unique coping scripts are associated with attachment anxiety (the sentinel

schema characterized by warning others of danger) and attachment avoidance (escaping

danger quickly without helping or depending on others).

Research has found that securely attached individuals have the most coping efficacy and

perceived coping resources (Fraley & Waller, 1998; Buelow, Lyddon, & Johnson, 2002; Wei,

Heppner, & Mallinckrodt, 2003), the fewest negative thoughts about stressful events

(Mikulincer & Florian, 1998), and the most positive affective resolutions following a stressor

(Mikulincer, 1998). Consistent with their working models of self, ambivalent individuals tend to appraise themselves as less capable of coping, whereas secure and avoidant individuals do not differ from one another in their appraisals of their ability to cope (Mikulincer & Florian, 1995). The self-coherence of secure individuals provides a source of resilience that calms individuals in times of stress and assists in the repair of self-esteem after inevitable relational disappointments (Mikulincer & Shaver, 2007). In addition, Wei et al. (2003) found that perceived coping mediated the link between romantic attachment insecurity and psychological distress.

A longitudinal study revealed that, compared to their own baselines, individuals coped more constructively and reported higher well-being at time points when they also reported higher attachment security (Zhang & Labouvie-Vief, 2004), whereas moments of insecurity were characterized by more defensive coping. The authors found that increases in attachment security over time were related to decreases in distancing coping and increases in flexible and constructive coping strategies. Zhang and Labouvie-Vief speculated that coping style may mediate the effects of life events on attachment security, such that effective coping strategies help the secure individual maintain positive working models despite attachment injuries or losses.

Secure individuals tend to employ problem engagement coping and social support, whereas ambivalent individuals use more emotion-focused and passive coping, and avoidant individuals choose strategies that avoid emotional and interpersonal engagement (Collins & Feeney, 2000; Fraley & Shaver, 1998; Larose, Boivin, & Doyle, 2001; Schottenbauer, 2006). Insecure individuals often try to escape or distance themselves from problems, and, in

particular, preoccupied individuals often use wishful thinking (Marques, 2006). Preoccupied

individuals' combination of wishes for support and doubts about its availability appear to have

led to inconsistent results relating attachment anxiety and support seeking (Rholes, Simpson,

Cambell, & Grich, 2001; Vogel & Wei, 2005), which may relate to their tendency to seek support

more indirectly, such as through nonverbal signs of distress (Collins & Feeney; Fraley & Shaver).

Dismissing adults' denial of emotional reactions to potential partner unavailability and their

denial of real threats hinder their coping capacity (Mikulincer & Shaver, 2007). Research has

shown avoidantly attached individuals to be ineffective at support-seeking (Collins & Feeney,

2000). Active, problem-focused coping, social support, humor, reframing, and acceptance are

coping strategies that predict better adjustment, whereas avoidance, denial, venting, and

disengagement are all related to poor adjustment (Major et al., 1998).

Attachment style includes a cognitive bias that affects adults' appraisals of not only

threat but also the availability of caregivers, with anxious people hypervigilant and more likely

to notice or imagine caregiver unresponsiveness (because no caregiver is perfectly available)

and avoidant people often missing signs of true caregiver availability. Indeed, in laboratory

situations where partner support was ambiguous, secure individuals were more likely than

insecure individuals to report that support was available and helpful (Collins & Feeney, 2004).

Research suggests that avoidant people are displeased with their partner's help because it goes

against their desire for self-reliance, whereas anxious people, although they like and even over-

value relying on their partner, are prone to dissatisfaction based on their perception that the

help was not more perfectly attuned or immediate enough (Campbell, Simpson, Boldry &

Kashy, 2005). In contrast, secure people are able to overlook inevitable lapses in responsivity

and still generally expect goodwill from others and view themselves as lovable and strong.

Romantic Attachment and Marital Functioning

A secure attachment style is a resource for lifespan resilience, sustaining emotional well-

being, and making the individual more willing to take the risk to invest in deep, lasting, and

satisfying interpersonal relationships (see Mikulincer & Shaver, 2007, for a review). Security-

based interpersonal behaviors that cultivate close, healthy relationships include trust, open

disclosures of needs and vulnerabilities, and benevolent reappraisals of a partner's

disappointing behavior (Bonano, 2004; Cohn et al., 1992; Le Poire et al., 1997; Mikulincer, 1998;

Mikulincer & Shaver). Reviewing the literature, Mikulincer and Shaver concluded that

avoidantly attached individuals' romantic relationships tend to be characterized by more game-

playing and practicality and less romance and altruistic love, whereas anxiously attached adults

tend to favor intense, possessive, and dependent kinds of love. Attachment security promotes

optimal functioning during all stages of romantic relationships from flirting and dating to the

maintenance of satisfying long-term relationships (Mikulincer & Shaver). A large body of

research connects attachment security and positive romantic relationship adjustment, including

positive beliefs about romantic relationships, higher marital satisfaction, lower levels of hostility

in the relationship, and higher levels of intimacy, commitment and emotional involvement in

the relationship (e.g., Banse, 2004; Berant, Mikulincer, & Florian, 2003; Brennan & Shaver,

1995; Collins & Read; Kobak & Hazan, 1991; Fuller & Fincham, 1995; Mikulincer, Florian, Cowan,

& Cowan, 2002; Moller, Hwang, & Wickberg, 2006; Morrison, Urquiza, & Goodlin-Jones, 1997; Pielage, Luteijn, & Arrindell, 2005).

Coping style is one proposed mediator between attachment style and relationship satisfaction (Lussier, Sabourin, & Turgeon, 1997). From an attachment perspective, relationship satisfaction essentially depends on the partners' ability to meet one another's needs for proximity, a safe haven, and a secure base. Among mothers of infants with heart problems, attachment anxiety directly predicted low marital satisfaction, whereas the impact of attachment avoidance on low marital satisfaction was mediated by both appraisals of motherhood as threatening and reliance on emotion-focused coping (Berant, Mikulincer, & Florian, 2003). Other possible intermediary variables include conflict resolution behaviors (Marchand, 2004), emotional control (Feeney, 1999), negative affectivity (Davila, Bradbury & Fincham, 1998), psychological distress, and perceptions of social support (Myers & Landsberger, 2002). Specifically, a positive IWM of the self has a direct effect on relationship satisfaction and an indirect effect, mediated by adaptive attributions for negative partner behavior (Sumer & Cozzarelli, 2004).

Attachment insecurity has frequently been associated with difficulties committing to a romantic partner (see Mikulincer & Shaver, 2007, for a review) and the investment-cost balance in the relationship. More specifically, anxiously attached adults tend to want a committed relationship more than secure and avoidant adults. Unfortunately, they tend to commit earlier than adults with other attachment styles, often without knowing their partner well, and end up in disappointing and frustrating relationships, characterized by high cost. In contrast, avoidant adults typically demonstrate the lowest levels of investment in committed relationships

(Pistole, Clark, & Tubbs, 1995). In addition, high levels of attachment anxiety and avoidance during late adolescence have been shown to reduce the likelihood that individuals will use a romantic partner as a safe haven and secure base (Feeney, 2004; Feeney & Hohaus, 2001; Mayseless, 2004).

Pietromonaco and Carnelly (1994) found some evidence that avoidantly attached adults prefer anxious partners who confirm their self models as strong and other models as weak. Swann, Hixon and De La Ronde (1992) found that individuals with negative self models tend to select partners who also have negative self models. Pollard, Riggs, Dodd, Hubbard and Stewart (2009) found that the attachment process of the partner one selects are related to one's attachment relationships with both parents, regardless of gender. Despite the aforementioned findings, most studies have shown that all individuals, regardless of their own attachment style, are more attracted to and prefer to date secure partners (see Mikulincer & Shaver for a review). Pietromonaco and Carnelly and the majority of studies reviewed by Mikulincer and Shaver found that people in general are least romantically attracted to avoidantly attached individuals. Creath et al. (1998) partially replicated these results, finding that secure-secure was the most common pairing among married couples, but that avoidant-secure was the second most common. Research has consistently shown that secure-secure and secure-insecure pairings are more common than insecure-insecure pairings (Brennan & Shaver, 1995; Kirkpatrick & Davis, 1994), and that insecure-insecure couples, though their relationships may outlast secure-secure relationships, have the highest levels of conflict and poorest couple functioning (Cohn, Silver, Cowan, Cowan, & Pearson, 1992).

Attachment, Disclosure, and Interdependence

Secure adults' ability to express empathy may encourage their partners to feel safe disclosing without fear of rejection, and their balance of reciprocal self-disclosure and responsiveness to the other person sets the ideal stage for intimate bonds to develop (Mikulincer & Shaver, 2007). In contrast, anxiously attached people tend to disclose too much too soon, typically motivated by a desire to merge with the other in order to reduce their own anxiety, and this self-preoccupation can interfere with their responsivity to their partners. A longitudinal study found that the link between romantic attachment anxiety and loneliness and subsequent depression was mediated by low social self-efficacy, whereas the link between romantic attachment avoidance and loneliness and subsequent depression was mediated by low self-disclosure (Wei, Russell, & Zakalik, 2005).

Secure adults are able to see autonomy and interdependence as coexisting in balance such that they can move along this continuum flexibly without fear (Mikulincer & Shaver, 2007). On the other hand, closeness is aversive to avoidantly attached adults, who desire interpersonal dominance and control. In contrast, anxiously attached adults often misinterpret their partners' desires for autonomy or privacy as rejection. They behave in a clingy, excessively dependent manner and express exaggerated fears of being rejected or left. Although designed to obtain proximity, because they worked in the past at least sometimes, these strategies often push others away, which ironically is what the person with high attachment anxiety most fears. Pursuer-distancer cycles are helpful in conceptualizing romantic attachment relationships in distress (Bartholomew & Allison, 2006; Feeney, 2003). Tucker and Anders (1998) suggested that once anxiously attached individuals learn that their partners withdraw when they seek

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intimacy, they may begin suppressing clingy behaviors in the service of maintaining proximity.

Secure individuals, however, are best attuned to the degree of closeness their partners want

and best handle momentary violations in either direction of personal boundaries (Mikulincer &

Shaver).

Responses to Positive and Negative Partner Interactions

Attachment style predicts emotional reactions and behavior in specific situations

common in relationships (Mikulincer & Shaver, 2007). In addition to buffering the intrapersonal

effects of stress, attachment security also seems to protect relationship quality during stressful

life transitions (Mikulincer & Shaver). Women who are in relationships with men who are

comfortable with closeness tend to respond with less jealous feelings and behaviors when in

jealousy-provoking situations (Collins & Read, 1990). Attachment security facilitates empathy,

benign attributions, and forgiveness when wronged by a partner and guilt and reparation when

one has failed one's partner (Kachadourian, Fincham, & Davila, 2004; Mikulincer, Shaver, &

Slav, 2006). Attachment insecurities are associated with fewer constructive responses to a

partner's transgressions (e.g., active attempts to resolve conflicts and benevolent attributions

of a partner's hurtful actions as temporary) and more use of "exit" (e.g., hurting back or leaving

the partner) and "neglect" (e.g., ignoring the partner and the problem) responses (see

Mikulincer & Shaver for a review). Furthermore, attachment insecurities interfere with

receptivity to repair attempts by a partner seeking forgiveness.

In addition, secure individuals are the most likely to feel happy both when they behave

positively toward their partner and when their partner behaves positively toward them (see

Mikulincer & Shaver, 2007, for a review). Avoidantly attached individuals tend toward

suppressed hostility and revenge when wronged and resentment when they hurt their partner.

They often feel indifferent to and ungrateful for their partners' positive relational behaviors and

proud of their own. In contrast, anxiously attached individuals feel despair and ambivalence, in

addition to hostility, when wronged, shame and despair when they are the transgressor, and an

ambivalent combination of happiness and anxiety when they or their partners behavior

positively (Mikulincer & Shaver).

Hyperactivating strategies have a negative impact on relationship satisfaction via

increasingly negative perceptions of the other's responsivity. Mikulincer and Shaver (2007)

reviewed diary studies that have shown that anxiously attached spouses experience more rapid

fluctuations in their marital satisfaction based on their day-to-day experience of their partner as

approving or rejecting. In one study, perceptions of spouse behaviors moderated the link

between attachment insecurity and low marital satisfaction (Feeney, 2002). In another study,

Feeney (2004b) found that after being hurt in some way by a romantic partner, individuals with

high attachment anxiety were most likely to report long-term damage to their self-esteem,

which was mediated by higher levels of distress and more negative self-perceptions. Partners

with high attachment avoidance reported more negative effects of the hurtful event on the

relationship, and this was mediated by lower perceptions of partner remorse and more

destructive reactions to the partner that prolonged the conflict. Thus, hurtful relational events

exacerbate negative IWMs, increasing the likelihood of negative expectations about the partner

and the relationship in the future (Johnson, 2003). Davila et al.'s (1999) longitudinal study

found that insecure attachment strategies and marital dissatisfaction mutually influenced one another over time, perpetuating an ever-worsening cycle of insecurity and dissatisfaction.

Secure individuals' positive IWMs allow them to cope constructively with their partners' violations of their trust (Mikulincer, 1998) and to negotiate with their partner during conflicts in a collaborative, open and nonthreatening manner. Their coping skills and optimism help them maintain an affectionate climate in the dyad while couple dynamics are flexibly adjusted to resolve problems (Heinonen, Raikkonen, Keltikangas-Jarvinen, & Strandberg, 2004; Mikulincer & Shaver, 2007; Shorey, Snyder, Yang, & Lewin, 2003). In contrast, anxiously attached individuals' catastrophizing during conflicts can interfere with effective conflict resolution such that they either try to dominate the other to meet their needs or submit passively to avoid rejection (Mikulincer & Shaver).

After disagreements, anxiously attached adults tend to report more negative views of their partner and their relationship's future, more reassurance-seeking, and stronger declines in love, commitment, and relationship satisfaction than adults with other attachment styles (Campbell et al., 2005; Gallo & Smith, 2001; Shaver, Schachner, & Mikulincer, 2005; Simpson, Rholes, & Phillips, 1996). They are also more likely to perceive their partner as less invested than they would like (Grau & Doll, 2003). However, anxiously attached individuals are often so uncomfortable with autonomy that they prefer being in unhappy relationships to being single, and indeed attachment anxiety is more prevalent among chronically unsatisfied married people than among happily married or divorced people (Davila & Bradbury, 2001). In contrast, avoidantly attached individuals tend to downplay the importance of conflicts, minimize their partner's complaints, and avoid issues. When they do discuss them, adults with high

attachment avoidance are likely to try to dominate their partner because of their need for

control and their defensive confidence that they are right (Mikulincer & Shaver, 2007).

Avoidantly attached individuals are also the most likely to leave their partner (Mikulincer &

Shaver).

Reciprocity, Caregiving, and Sex in Romantic Attachment Relationships

An individual's attachment behaviors in the context of a romantic relationship depend

not only on that individual's attachment style but also on the partner's behaviors (Carnelly,

Pietromonaco, & Jaffe, 1996). Data have also shown that the romantic relationship has the

potential to either increase or decrease each member's felt security (Feeney, 2003). Feelings of

trust, commitment and intimacy contribute to the seeking of support from a romantic partner

(Doherty & Feeney, 2004; Feeney, 2004a; Fraley & Davis, 1997). Much research supports the

link between observed and perceived partner responsiveness and a person's support-seeking

and disclosure of private information and feelings (e.g., Collins & Feeney, 2000; Gore, Cross, &

Morris, 2006; Larose et al., 2001; Gottman, 1994). Not only do insecure individuals tend to

choose less supportive partners based on their negative IWMs, but they also behaviorally evoke

suboptimal support, via their own withdrawal or criticism of their partner, which promotes the

partner's withdrawal and strengthens their negative beliefs (Rholes et al., 2001).

Recent research has examined not only the effect of a person's attachment style on

their own marital satisfaction, but also partner effects (the effect of one spouse's attachment

style on the other spouse's marital satisfaction), couple-type effects (the effects of certain

pairings of attachment styles on both spouses' satisfaction), and interaction affects (when the

relationship between one spouse's attachment style and his or her own relationship satisfaction is moderated by the other spouse's attachment style).

Most of the 30 studies reviewed by Mikulincer and Shaver (2007) showed that partners of secure individuals were more satisfied with their relationships than were partners of insecure individuals, and 4 of 5 longitudinal studies supported the path going from one partner's insecurity to the other's dissatisfaction rather than the other way around.

The literature as a whole suggests that anxious-avoidant and anxious-anxious pairings are the most susceptible to poor relationship adjustment (Cohn et al., 1992; Mikulincer & Shaver, 2007). The former pairing tends to suffer from pursuer-distancer cycles, in which each person frustrates the other's needs for closeness on the one hand and autonomy on the other. Anxious-anxious couples may exhibit a pursue-pursue interaction pattern or mutual attack and retreat (Bartholomew & Allison, 2006; Feeney, 2003). Each anxious person feels chronically rejected and behaves in self-focused and controlling ways, competing for attention and unable to meet the other's needs. Attachment insecurity also places individuals at risk for shorter romantic relationship duration and divorce (Crowell et al., 2001; Mikulincer & Shaver).

In adulthood, romantic attachment bonds are reciprocal, with each partner providing protection and security at different times (Hazan & Zeifman, 1999). In addition to the attachment system, the caregiving system and sexuality come into play in romantic relationships (Zeifman & Hazan, 2008). Attachment style affects one's caregiving system, i.e., one's sensitivity and tendency to maintain proximity to a partner when the partner is distressed. Attachment insecurity interferes with the ability to provide a secure base for a

partner, with attachment avoidance promoting unavailability and attachment anxiety promoting intrusiveness that inhibits partner exploration (Feeney, 2005).

When a partner seeks help, adults with high attachment avoidance are the least likely to make physical contact with the distressed partner and tend to use domineering and controlling approaches to caregiving that communicate that the partner is not very capable of coping alone (see Mikulincer & Shaver, 2007, for a review). Avoidant caregivers tend to help only to either get something or keep partners from complaining, often perceiving partners as too dependent (Collins, Guichard, et al., 2006; Feeney, 2005; Rholes, Simpson, & Orina, 1999; Simpson, Rholes, & Nelligan, 1992). Feeney and Collins (2001) found that the relationship between attachment avoidance and poor caregiving was mediated by uncertainty about how to be supportive, low prosocial orientation, and low commitment and intimacy. On the other hand, the link between attachment anxiety and caregiving difficulties was mediated by excessive self-focus and mistrust (Feeney & Collins, 2001).

Attachment has implications for sexual relations in romantic relationships. Secure attachment promotes cognitive openness, trust in the benevolent intentions of the other, as well as confidence in oneself, so that secure individuals are most relaxed and able to enjoy sex (Mikulincer & Shaver, 2007). Creath et al. (1998) found that securely attached spouses reported having more sex than insecure spouses. Secure individuals are most likely to choose a long-term, committed sexual partner over casual sexual encounters (Mikulincer & Shaver).

Avoidantly attached adults' discomfort with emotional intimacy and limited sensitivity to the other can cause problems in their sex lives (Mikulincer & Shaver, 2007). They tend toward either abstinence or uncommitted sexual activity that is more about meeting their own

needs than the other's (Mikulincer & Shaver). In committed relationships, attachment

avoidance is associated with avoidance of sex (Brassard, Shaver, & Lussier, 2007) and more

frequent masturbation. Anxiously attached individuals can also be insensitive to their partner's

sexual needs, but for them it is more about their preoccupation with their own needs and fears

of rejection (Mikulincer & Shaver). Attachment anxiety is related to ambivalence about sex:

sexual activity is viewed positively in that it is an obvious route to closeness, but also feared

because of self-doubt (Mikulincer & Shaver). Attachment anxiety puts individuals at risk for the

use or acceptance of coercive, intrusive, and unsafe sex because of fear of the partner's

disapproval (Mikulincer & Shaver). Anxiously attached individuals tend toward continuing to

have sex with exes or getting back together, often using sex to re-initiate a relationship

(Kirkpatrick & Hazan, 1994; Davis, Shaver, & Vernon, 2003).

Attachment and Religiosity/Spirituality

Attachment security promotes the development of an integrated religious, spiritual, or

philosophical orientation to life, which helps individuals with meaning making and

transcendence above the limits of biology and isolation to embrace values such as forgiveness

and generosity (Mikulincer & Shaver, 2007). According to Mikulincer and Shaver, secure

individuals' empathy and comfort with closeness should facilitate their adherence to the moral

imperatives of caring and compassion for others common among most world religions.

Mikulincer and Shaver speculated that participating in loving actions, which is often a part of

involvement in a religious community, may even bolster security by enhancing perceptions of

oneself as loving and lovable, fostering further compassion and altruism.

About 61% of Americans report that religion is "very important" to them (Newport, 2004). Attachment theory may be useful to conceptualize why many individuals seek comfort, reassurance, and help from God via prayer and other religious practices (Kirkpatrick & Shaver, 1992). In the Abrahamic traditions, religious texts and songs depict humans' relationship to God as having characteristics of an attachment relationship (Granqvist, 2005; Granqvist, Mikulincer, & Shaver, 2010; Kirkpatrick, 2005): proximity-seeking ("Nearer My God to Thee", a Protestant hymn), a safe haven ("Though I walk through the valley of the shadow of death, I will fear no evil for Thou are with me"; Psalm 23:4), and a secure base ("On the day I called you, you answered me and made me bold with strength in soul"; Psalm 138:3). Although research on attachment and Eastern religions is sparse, Mikulincer and Shaver (2007) noted that a popular Buddhist prayer exhorts followers to "take refuge [i.e., safe haven] in the Buddha [a mentally represented spiritual guide], the Dharma [scriptures of his teachings], and the Sangha [community]" (p.248).

Kirkpatrick and Shaver (1992) proposed two hypotheses regarding attachment and religiosity. First, the correspondence hypothesis suggests that individuals project their working models of human relationships onto God such that differences in religiosity parallel differences in attachment style. Because of their positive self and other models, secure individuals feel comfortable seeking closeness to God and open to spiritual growth, and they are confident in God's availability. In contrast, insecure individuals have difficulty conceiving of God as always available and responsive and tend to view God as punitive, distant, or rejecting. According to this hypothesis, avoidant individuals would keep God and religious communities at a distance, whereas individuals with high attachment anxiety would experience ambivalence and high

emotionality in their relationships with God. Second, Kirkpatrick and Shaver's compensation hypothesis predicts that individuals with insecure attachments in childhood or adulthood may direct their unmet attachment needs to God, who may be viewed as the ideal "stronger and wiser" other. God would then serve as a surrogate attachment figure, and the individuals' secure relationship with God could alter the person's internal working models and buffer negative outcomes associated with insecure parent-child attachment.

Evidence Supporting the Correspondence Hypothesis

Evidence is emerging to support both the correspondence and compensation hypotheses. Kirkpatrick and Shaver (1992) developed a categorical self-report measure of attachment to God, based on Hazan and Shaver's (1987) instrument. They found that individuals with insecure attachments to other people were more likely to report an insecure attachment to God. Reinert (2005) found that Catholic seminarians' attachments to their parents were related to their attachment to God. This link has been replicated with various other measures of attachment to God, in predominantly Christian (Beck & McDonald, 2004; McDonald, Beck, Allison, & Norsworthy, 2005; Rowatt & Kirkpatrick, 2002) and Jewish samples (Gurwitz, 2004, as cited in Mikulincer & Shaver, 2007). Secure attachment to God is furthermore associated with less anxiety and loneliness, better physical health, higher satisfaction with life (Kirkpartrick & Shaver; Kirkpatrick, Shillito, & Kellas, 1999), as well as the tolerance of ambiguity required to explore issues of faith with less distress and tolerate religious differences with others (Beck, 2006).

Security in human attachments is directly related to higher scores on several measures

of religiosity beyond attachment to God, including religious commitment, faith maturity,

intrinsic religious orientation, belief in a personal God, positive God image and reporting having

a personal relationship with God (Beck & McDonald, 2004; Byrd & Boe, 2001; Granqvist, 1998;

Granqvist & Hagekull 1999, 2000; Kirkpatrick, 1998; Kirkpatrick & Shaver, 1990, 1992;

McDonald, Beck, Allison, & Norsworthy, 2005; TenElshof & Furrow, 2000). Children aged 5 to 7

from both religious and non-religious homes who were securely attached to their parents

perceived God as physically closer to a child character in a story involving an attachment threat

than did insecure children (Granqvist, Ljungdahl, & Dickie, 2007). Religious beliefs and

behaviors are related to adult attachment in cross-sectional studies (Kirkpatrick, 1998;

Kirkpatrick & Shaver, 1992) and religious change can be predicted from retrospective reports of

childhood attachment experience (Kirkpatrick 1997; 1999, Granqvist & Hagekull, 1999).

Attachment security supports the effective use of God or religion for regulation of

attachment distress. Three studies by Birgegard and Granvist (2004) found that after subliminal

exposure to a separation prime, participants with secure self-reported parent-child attachment

history reported more efforts to seek closeness to God than did participants with self-reported

insecure histories. Similarly, Gurwitz (2004, as cited in Mikulincer & Shaver), using a lexical

decision task with Jewish believers, found that the more secure they were, the more they

mentally activated God concepts when exposed subliminally to threat-related words, and the

more positive their affect was when subliminally exposed to religious images. After

subliminally presenting them with the word "God", he found that secure individuals

demonstrated faster reaction times to positive trait terms such as "caring", and insecure

individuals reacted more quickly to negative terms such as "distant". This suggests that

attachment security facilitates cognitive access to positive mental representations of God.

Indeed, secure individuals are most likely to report viewing God as loving, caring, and approving

(Kirkpatrick, 1998b).

Cassiba, Granqvist, Costantini, and Gatto (2008) found more secure-autonomous AAI

states of mind in Catholic priests, nuns, and monks (assumed to have a primary attachment to

God, being both single and religious), compared to a sample of lay Catholics and the general

population. They found that unresolved-disorganized states were underrepresented in both

groups of Catholics, replicating Granqvist, Ivarsson, Broberg, and Hagekull's (2007) findings.

The unresolved classification is based on the incoherence of discourse about attachment

memories related to trauma or loss (George et al., 1996).

Avoidant adult romantic attachment is associated with agnostic beliefs, and anxious

attachment is associated with more emotional religious behavior, such as speaking in tongues

(Kirkpatrick, 2005). Hart, Limke, and Budd (2010) found that, among undergraduates at a

religious university, romantic attachment anxiety (but not avoidance) was related to lower

stages of faith development. Thus, they concluded that in order to spiritually grow, individuals

appear to need to see themselves as loveable and not fear abandonment. They speculated that

lack of a secure base in a romantic relationship may predispose adults to cling to the rigid,

literal dogmatism, closed-minded condemnation, and fear of questioning that characterize low

levels of faith development.

Other findings suggest that insecure individuals may turn to God to compensate for the lack or loss of a secure attachment with other people (Granqvist & Hagekull, 1999, 2001; Granqvist & Kirkpatrick, 2004). Single adults, compared to those currently in a romantic relationship, tend to be more religiously active, report a more personal relationship with God, and use religiosity in regulating affect (Granqvist & Hagekull, 2000). Beliefs about having a relationship with God predict lower levels of loneliness beyond the prediction accounted for by interpersonal social support (Kirkpatrick, Shillito, & Kellas, 1999).

God may be an especially good surrogate attachment figure, because many religious individuals view God as omnipotent and immediately available (Kirkpartrick, 1994). Most religious belief systems view God's love as either unconditional or accessible via "particular courses of action that allow an 'unworthy person' to earn God's love and forgiveness" (Granqvist, Mikulincer, & Shaver, 2010, p. 49), setting in motion an "earned security" process (Granqvist et al., p. 54). Granqvist et al. speculated that individuals who feel unworthy of other people's love may turn to God because of God's unique characteristics and that experiences of God's love and forgiveness may alter negative IWMs.

Reinert's (2005) longitudinal study of Catholic seminarians found that cultivating attachment to God over time (via daily collective religious practices, regular prayer, and spiritual direction with a priest) moderated the effects of insecure attachment to parents on low self-esteem. He noted that this finding empirically supported Kirkpatrick's (1998) conjecture that "for a person with low self-esteem…, religious beliefs—unlike most (human) relationships—may offer specific solutions in the way of detailed instructions about how to

become a person worthy of love, respect, and care" (p.969). Among newlyweds, religious

commitment buffered the association between spouses' attachment avoidance and their

marital adjustment but exacerbated the marital risks associated with attachment anxiety

(Lopez, Riggs, Pollard & Hook, 2011).

Furthering support for compensation, Granqvist and Hagekull (2003) reported that

insecure attachments in childhood and adulthood both predicted increased religious

commitment for those who had experienced a separation or loss of a significant other. In a

longitudinal study, Kirkpatrick (1997) found that insecure women were more likely than secure

women to report having developed a new relationship with God, being "born again", and

speaking in tongues during the 4-year interim between assessments. Kirkpatrick (1998) later

replicated the association between insecurity and increased religiosity over a shorter (4 month)

interval among both sexes. In the latter study, negative self models and positive other models

(i.e., preoccupied attachment) predicted positive changes in religiosity over time. However,

Hart et al.'s (2010) research suggests that negative IWMs are related to less well-developed

spirituality.

Some evidence suggests that individuals who use God as a surrogate attachment figure

are likely to transfer aspects of their human relational experiences onto their perceived

relationship with God over time (Beck & McDonald, 2004; McDonald et al., 2005). Thus,

although insecurely attached individuals may try to cope by becoming more religious, their

religiosity may be characterized by unhealthy rigidity or negative models of their relationship

with God. Among low-income African-American women, negative religious coping (e.g.,

attributing a negative event as abandonment by God) was related to a history of child

maltreatment and intimate partner violence (Bradley, Schwartz, & Kaslow, 2005).

Given that both secure and insecure individuals can be highly religious/spiritual,

Granqvist (1998) proposed that the correspondence hypothesis may best explain the

experiences of secure individuals, while the compensation hypothesis may be more applicable

to insecure individuals. Secure people's spirituality may be an expression of the exploration

system, whereas insecure people's spirituality may instead represent a defensive reaction to

attachment frustrations (Mikulincer & Shaver, 2007). The link between attachment security

and religiosity appears to be moderated by parental religiosity, in that secure adults are more

religious if their parents were also religious, whereas insecure adults are more religious when

their parents were not very religious (Granqvist, 1998, 2002; Granqvist & Hagekull, 1999;

Kirkpatrick & Shaver, 1990). Granqvist and Hagekull (2001) found that attachment insecurity

was related to emotionally-based religiosity (e.g., seeking closeness with God for the purpose of

emotion regulation during a time of distress, highly emotional religious experiences), which

they explained via emotional compensation. In contrast, they found that attachment security

was related to socialization-based religiosity (e.g., adopting one's parents' religiosity). Religious

change, especially when sudden and emotionally turbulent, was related to attachment

insecurity, and ambivalent attachment to mother was specifically related to themes of

compensation (i.e., religion filling a supportive role during a time of personal crisis or

interpersonal difficulties).

Granqvist and Hagekull's (2001) findings led Granqvist (2005) to propose the two-level

correspondence hypothesis, in which the religiosity of secure individuals is explained via social

learning of parental religiosity in addition to the projection of positive IWM's onto God. In a 15-month longitudinal study of adolescents, Granqvist and Hagekull (2003) found that the religiosity of individuals with a secure romantic attachment style increased during the time between assessments if they had formed a new romantic relationship during that interval (suggesting a religiosity that is connected with an interpersonal relationship). In contrast, insecure adolescents' religiosity decreased if they had formed a new romantic relationship but increased if they had gone through a painful breakup, suggesting a compensatory function for their religiosity. The authors noted that although avoidant individuals tend to deactivate attachment behaviors when stressed, they do not appear to do this when the attachment figure is God.

Granqvist and Kirkpatrick's (2004) meta-analysis on childhood attachment and religious conversions (11 studies, N = 1465) found support with small to medium effect sizes for their two hypotheses. First, based on the compensation hypothesis, they expected that sudden religious conversions were associated with insecure attachments. Second, based on the two-level correspondence hypothesis, they expected that gradual religious changes were associated with a secure attachment history. Consistent with a combination of the emotional compensation and two-level correspondence hypotheses, Granqvist, Ivarsson, Broberg, and Hagekull (2007) found that AAI reports of parental loving were associated with socialization-based religiosity, loving God images, and gradual religious change at relatively young ages in the context of close relationships. In contrast, AAI reports of parental rejection and role reversal were negatively related to socialization-based religiosity. Maternal rejection was related to

sudden religious change in a context of turmoil, and maternal role reversal was related to a distant God image.

In an effort to provide an alternative explanation for the many contradictory findings in the area of attachment and religiosity, Hall, Fujikawa, Halcrow, Hill, and Delaney (2009) recently proposed the Implicit IWM Correspondence and Explicit Religious Compensation models. They argue that implicit (i.e., unconscious) procedural knowledge for "how to be with" God and others are learned in human relationships and transferred onto relationships with God. This would explain findings of correspondence between human attachment and experienced relationships with God. In contrast, findings of discrepancies between human attachments and religiosity exist not because of emotional compensation, but due to willful, intentional engagement in religious behavior, which may affect implicit IWM's only indirectly via the relational context over time.

The proposed study builds upon these studies in several ways. Granqvist's work has focused on links between childhood attachment history and religiosity. He has found few associations with romantic attachment, perhaps due to failure to account for contextual differences in relationship status and quality. However, Granqvist did find that romantic attachment explained unique variance (above parental attachment) in predicting adolescents' religious change and that preoccupied romantic attachment was related to themes of compensation (Granqvist & Hagekull, 2001). Although attachment to God is arguably more similar to parent-child attachment, its link to romantic attachment should still theoretically be the same insofar as they are both rooted in superordinate models of self and other formed in interactions with early childhood caregivers (Kirkpatrick, 2005). Not only do Christians relate to

God as a Father, but they also use the metaphor of the marital union to conceptualize the union

between Christ and the church (Packer, 1995). Given that most adults who have been married

for several years have transferred their primary attachment to their spouse, the extent that

married adults use God as an attachment figure may depend on their romantic attachment

quality. The little research that has been done in this area (Beck & McDonald, 2004) has

supported theoretical links between romantic attachment anxiety and attachment to God.

With one exception (Lopez et al., 2011), researchers in this area have not explicitly limited their

sample to married adults, nor have they examined religiosity in relation to the interaction of

both spouses' romantic attachment styles. In addition, the present study measures religious

coping, a specific, attachment-relevant construct using a psychometrically-sound instrument.

Religious Coping

Coping in general refers to how individuals make sense of and manage personal or

situational demands in their lives (Lazarus & Folkman, 1984). Hathaway and Pargament (1991)

conceptualized the role of religion in coping as a dynamic process involving interactions among

situations, appraisals, cognitive and behavioral coping activities, functions, psychosocial

resources and constraints, and outcomes in the psychological, social and physical domains.

Believing that God will protect and sustain a person may help that person view an event as less

threatening. Religious appraisals of stressful events range from viewing them as God's

punishment or reward or as an opportunity for spiritual growth. Believing that one is called to a

special purpose by God may also help individuals tolerate the tediousness of daily hassles.

Religious coping has repeatedly been shown to mediate associations between more global

religiosity and adjustment (Pargament, 1997).

Hathaway and Pargament's (1991) work demonstrates that religiosity is much more

complex than Freud's (1961) original conceptualization of it as neurotic wish fulfillment.

Hathaway and Pargament reviewed the literature showing religion's buffering effect on the link

between stress and outcomes ranging from depression to mortality and noted the value of

religion for prevention efforts, cognitive stress inoculation, competency building, and the

provision of informational, social, and material resources. Coping may function for a variety of

specific ends including self-esteem promotion, a sense of hope, power or control, meaning-

making, personal growth, restraining undesirable impulses, and seeking comfort and intimacy.

Kirkpatrick (2005) argued that the attachment system is less easily activated in

adulthood than in childhood, given the development of self-reliance and more mature coping

strategies. Threatening events that provoke sufficient distress to activate the system are the

same situations for which individuals most often seek recourse from God, especially when

romantic partners and other sources of support are inadequate. Research on Christian couples

also suggests that adults often use God or religion to cope with negative marital events (Moore,

2006).

Initially, studies investigating religious coping used overly simplistic, unidimensional

measures such as frequency of church attendance or prayer, or at best, a religious coping

subscale of a broader coping measure such as the COPE (Carver, 1997b), which miss the

complexities of religious coping and have led to inconsistent results (Hathaway & Pargament,

1991; Pargament, Koenig & Perez, 2000). Pargament and colleagues (1988) found empirical

support for three distinct religious coping styles: collaborative (i.e., actively working together with God to solve problems), deferring (i.e., passively leaving all responsibility to God), and self-directing (i.e., relying on one's own coping efforts and viewing God as uninvolved). Pargament et al. (1988) asserted that a collaborative approach signifies an internal commitment to religion, deferring reflects an externalized religiosity that fills in during situations the individual cannot handle, and self-directing involves personal agency and less traditional religiosity. They found that the most effective religious coping stance was that which views God as loving and providential and also encourages active, realistic problem-solving on the individual's part. In general, attributions of events as punishment from God and passive deference to God in problem-solving are both associated with negative outcomes (Hathaway & Pargament). However, for events that are uncontrollable, a deferring stance may be more beneficial. Research has shown that attributing a situation to a loving or mysterious God's will is associated with more positive outcomes than is viewing it as punishment from an angry God (see Hathaway & Pargament for a review).

Positive and Negative Religious Coping

More recently, Pargament and colleagues (1998) theoretically and empirically categorized religious coping strategies into positive and negative categories, based in part on the typical outcomes associated with each (e.g., Aflakseir & Coleman, 2009; Bush et al., 1999; Kahn & Watson, 2006; Pargament, 1997; Pargament et al., 1998, 2000; see Ano & Vasconcelles, 2005 for a meta-analysis). Positive religious coping methods include seeking spiritual connection and support, forgiveness, collaborating with God in coping, benevolent religious

reappraisal, marking religious boundaries, religious helping, religious direction/conversion, religious purification, and religious focus. Harmful or unhelpful aspects of religious coping include passive religious deferral, pleading for direct intervention, interpersonal religious discontent, spiritual discontent (e.g., questioning God's love), negative reappraisals of the situation as God's punishment or the devil's work, and doubting God's power. Carone and Barone (2001) argued that, on the positive side, religious beliefs provide order and understanding in otherwise unpredictable situations, promote forgiveness, and offer an omnipresent attachment figure. On the negative side, religion can promote an excessively external locus of control. Religious individuals may use heuristics to form rapid judgments, rather than gathering information, and these judgments may be retained via ingroup and confirmatory biases against disconfirming evidence.

A growing body of literature has shown that religious/spiritual coping with a variety of negative life events (e.g., illness, victimization, war, bereavement) has implications for physical and mental health outcomes as well as spiritual ones (Belavich & Pargament, 2002; Pargament, 1997; Pargament, et al., 1998). Importantly, religious coping measures add unique variance to the prediction of outcomes beyond that of nonreligious coping measures (Pargament et al., 1998; Schottenbauer et al., 2006). Positive religious coping is associated with lower levels of psychosomatic symptomology, higher stress-related growth, better religious outcomes, and greater psychological and existential well-being (Pargament, et al., 2001; Pieper, 2004).

On the other hand, negative religious coping is associated with worsening of symptoms or less improvement over time among medical and psychological patients (see Harrison, Koenig, Hays, Eme-Akwari, & Pargament, 2001 for a review). Religious discontentment and

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religious pleading were specifically associated with more depression, anxiety, somatization, and hostility among incarcerated women (Lonczak, Clifasefi, Marlatt, Blume, & Donovan, 2006). In addition, negative spiritual coping strategies mediated between caregiver stress and depression among African American women who care for relatives' children (Smith, 2003). Among low-income African American women with trauma histories, negative religious coping contributed unique variance in PTSD symptom severity beyond that of self-esteem and social support (Bradley et al., 2005). The PTSD symptom severity of military veterans was related to higher reported use of both positive and negative religious coping strategies (Witvliet, Phipps, Feldman, & Beckham, 2004). This could be due to the disorganizing effects of trauma and loss on their working models. Among U.S. Muslims, positive religious coping with interpersonal stressors following the 9/11 attacks was directly related to posttraumatic growth, and negative religious coping was associated with depression (Abu-Raiya et al., 2010). Effects remained strong after controlling for nonreligious coping.

Religious coping is associated with well-being (positive affect, depressive affect, and religious satisfaction) for clergy, elders, and lay church members (Pargament et al., 2001). Its effects appear strongest among those for whom religion is a salient part of identity and more compelling solution to problems (Pargament, 1997). Both forms of religious coping were more commonly used by clergy than ordinary church members, and both had stronger effects on the well-being of clergy than members. Positive religious coping strategies were more often used than negative religious coping strategies. Among lay church members, positive religious coping was significantly related to positive affect and religious satisfaction; negative religious coping

was significantly related to depressive affect and significantly inversely related to positive affect.

Mahoney and colleagues (2001) reviewed research on parents' use of religion to cope with having a child with a disability or cancer. They found anecdotal reports of increased hope, strength, and peace as well as evidence linking religious coping to better parental health, lower parental stress and depression, higher family cohesion, and more extrafamilial support. However, they pointed out the limits of generalizibility because of the uncontrollability of such stressors as well as an over-reliance on global religiosity measures as a proxy for actual use of religious coping methods. In contrast to these findings, Hastings and colleagues (2005) found that a scale measuring religious coping and denial was negatively related to mental health among parents of children with autism.

Pargament (1997) argued that for Christians and others whose God is personified, the patterns they establish for relating to early caregivers influence not only their perceptions of God but also the ways they appraise and cope with stress. According to Pargament et al. (2000) half of the 14 items on the Brief RCOPE tap religious coping strategies that serve the function of gaining comfort and closeness to God. Four are on the positive scale, and three are on the negative scale. Other strategies assessed by the measure serve the function of making meaning in trials, letting go of anger, and gaining control through a problem-solving partnership with God. Birgegard and Granqvist's (2004) experimental study found that attachment security was related to increased religious attachment behaviors when participants were subliminally primed with separation cues, whereas these behaviors decreased among the insecurely attached participants. Thus, attachment theory seems a highly appropriate way to

conceptualize the use of religious coping and its connection to romantic attachment and couple functioning. Only a few studies have specifically investigated links between religious coping and marital satisfaction (Astacio, 2000; Tremblay, Sabourin, Lessard, & Normandin, 2002), finding positive correlations overall.

Attachment and Religious Coping

Recently, Granqvist (2005) noted the conceptual overlap between attachment theory and coping theory and the remarkable lack of literature integrating them explicitly. He explained that attachment theory is implicated in questions about how individuals manage distressing situations using a stronger and wiser other, and coping research similarly involves the study of strategies people use to manage demands that are stressful to them. He noted the benefits of supplementing coping theory with attachment theory because of its ability to explain the developmental foundations of individual differences in coping. He argued that attachment theory may explain why some individuals turn to God to deal with stressful events more than others.

While a small literature on attachment and religiosity has evolved in the past 15 years, Granqvist's (2005) study was the first to specifically examine religious coping in relation to the human attachment system. He used dimensional assessments of attachment prototypes and a measure of perceived experiences with insensitive parenting (aggregating experiences with mother and father). He found that perceived insecure attachment history was related to involving God in coping (i.e., more collaborative and deferring religious coping and less self-directing coping), which supports the emotional compensation hypothesis. However, this

association was moderated by parental religiousness. Insecurity was especially linked to compensatory coping (i.e., deferring to or collaborating with God) and security linked to self-directing coping (i.e., not involving God) among individuals whose parents were low in religious activity. Individuals who were securely attached to non-religious parents did not involve God in coping, appearing to have been socialized into non-religiosity. In the context of high parental religiosity, attachment was unrelated to religious coping.

Granqvist (2005) asked participants to rate the extent to which they agreed with each of two prototype paragraphs tapping correspondence (i.e. stable, socialized religiosity) and compensation (i.e., religiosity that diverges from that of one's parents, changed in conjunction with life events, and is characterized by a God one can turn to in difficult times but who is also sometimes perceived as distant or controlling). He found that religious coping mediated the link between insecure attachment history and endorsement of the compensation prototype. He did not distinguish between the influences of attachment anxiety and attachment avoidance, nor did he distinguish between positive and negative religious coping strategies. These distinctions will be explored in the proposed study and related to romantic rather than parent-child attachment.

The quality of attachment to God could help explain why some individuals choose different religious coping strategies (Belavich & Pargament, 2002). Cooper, Bruce, Harman, and Boccaccini (2009) found that individuals with a positive IWM of God (i.e., secure or preoccupied attachment to God on a measure based on the Experiences in Close Relationships scale) were more likely to use Christian activities and ideas in coping. Dismissing individuals rarely pleaded

with God and tended to rely on good works, consistent with their self-reliant approach in general. Those with fearful attachment most often reported anger and doubt toward God.

Furthermore, Davis, Hook, and Worthington (2008) found that avoidant attachment to God was related to higher levels of negative religious coping and lower levels of positive religious coping, whereas attachment anxiety in one's relationship with God was associated with reporting higher levels of both positive and negative religious coping. In addition, they found that anxious and avoidant attachment to God negatively predicted forgiveness, but this link was fully mediated by religious coping and the extent to which participants' viewed the offense as a desecration (i.e., the defilement or destruction of something considered sacred). Positive religious coping was positively related to forgiveness, and negative religious coping was inversely related to forgiveness. Religious coping added unique variance in the prediction of forgiveness above what was accounted for by attachment to God. Davis and colleagues hypothesized that insecure attachment to God predisposes individuals to spiritual struggle, which isolates them from using both God and others for support when they are dealing with stressful events. In particular, people who are anxiously attached to God may experience high volatility in their relationship with God.

Using structural equation modeling, Schottenbauer and colleagues (2006) found that general and religious coping strategies mediated the relationship between adult attachment qualities (measured by the dimensional Measure of Attachment Qualities, Carver, 1997a) and affective resolution following a stressful event identified by the participants (i.e., current feelings with respect to the event). They also found that religious coping (assessed with the RCOPE; Pargament et al., 2000) predicted unique variance beyond that predicted by coping in

general (assessed by the BriefCOPE; Carver, 1997b). Their sample was fairly religious and made up of predominantly (85%) Christians; over two thirds were women, and about half were married. They found that negative religious coping predicted less positive affective resolution and that positive religious coping was unrelated to affect resolution. In addition, they found that secure attachment qualities predicted more positive religious coping. Avoidant attachment qualities were significantly related to more negative religious coping and poorer affective resolution and approached a significant relationship with less positive religious coping. Ambivalent attachment qualities (i.e., desire for merger and anxiety about abandonment) were related to negative religious coping methods and avoidant (nonreligious) coping, and these links were both mediated by negative appraisals of the event. Furthermore, ambivalent attachment qualities were associated with worse affective resolution, as mediated by negative religious coping strategies and avoidant (nonreligious) coping.

Thus, it seems that each attachment quality has its own unique profile of appraisals, religious and general coping, and affective resolution following a stressful event. Schottenbauer et al.'s (2006) results contradict Granqvist and Hagekull's (2003) findings that attachment insecurity is related to increased religiosity during interpersonally stressful moments and reduced religiosity during new romantic relationships. Schottenbauer et al. also found support for a link between romantic attachment and religious coping. The current study may shed light on these inconsistencies by investigating to what extent married adults' use of religious coping may depend on the current quality of their marital relationship. It will also be the first to examine romantic attachment as measured by the Experiences in Close Relationships Scale (Brennan, et al., 1998) in conjunction with positive and negative religious

coping as measured by the Brief RCOPE (Pargament, Smith, Koenig, & Perez, 1998) and the first

to examine religious coping's potential buffering of the effect of attachment vulnerabilities on

marital adjustment. The findings of the proposed study will offer an interesting comparison

with those of an earlier study with newlywed, childless couples (Haseley, 2007; Haseley, Riggs,

& Pollard, 2007), which found that higher religious *commitment* (a broader construct assessing

the extent to which one's religiosity is integrated in daily life) was negatively associated with a

person's romantic attachment avoidance but unrelated to their romantic attachment anxiety.

Religiosity, Coping, and Marital Adjustment

Most research suggests modest benefits of some aspects of religiosity on marital

functioning (e.g., Ahmadi & Hossein-abadi, 2009; Hünler, & Gençöz, 2005; for a meta-analytic

review, see Mahoney, Pargament, Tarakeshwar, & Swank, 2008). Mahoney et al. reported a

mean correlation of .15 for the relationship between personal religiosity and marital

satisfaction, indicating a small positive effect size overall. However, given the complex nature of

religiosity, the combination of different aspects of religiosity (e.g., religious affiliation,

denomination, homogamy, beliefs about the Bible, and frequency of church attendance) may

over- or under-represent the effect of any individual facet of religiosity. When religiosity is

broadly assessed, some studies show a positive correlation (Lopez et al., 2011; Snow &

Compton, 1996; Sullivan, 2001), while other studies show no relationship or a negative

relationship (Koehne, 2000; Vaughan, 2001). Using multilevel modeling and the Actor-Partner

Interdependence Model (APIM; Cook & Kenny, 2005), Lopez et al. found that actor religious

commitment was unrelated to actor marital adjustment, but partner religious commitment was significantly related to higher actor marital adjustment.

Longitudinal studies have reported mixed findings on the relationship between religiosity and marital satisfaction (Mahoney, 2010). For example, Sullivan (2001) found no evidence for a direct relationship between religiosity and marital satisfaction in a sample of first-time newlywed young adults, followed up at 1-, 3.5-, and 5-year intervals. In another longitudinal study, which followed a couples yearly for ten years beginning premaritally, the religiosity of wives (a single self-report Likert item) predicted marital satisfaction, but the religiosity of husbands did not (Clements, Stanley, & Markman, 2004).

Religion can provide constructive conflict-resolution strategies (Mahoney & Tarakeshwar, 2005), including pulling God in as a neutral arbitrator who has compassion for each spouse and expects each to take responsibility for his or her part. Mahoney and Tarakeshwar have also investigated the negative effects of counterproductive religious constructs on marital functioning. Highly religious individuals may experience spiritual failure and spiritual guilt whenever they are not as perfectly accepting and generous with their spouse as they believe they ought to be. They may be at risk for guilt when they hurt their spouse and greater feelings of loss and/or desecration when the marital commitment is threatened or dissolved, as in the cases of infidelity and divorce. One spouse may "demonize" the other, i.e., view the other as operating under a demon's control, which may be quite frightening. Finally, in contrast to the aforementioned theistic mediation, "theistic triangulation" can occur, in which one spouse tries to bring in God on his or her side of an argument, forming a coalition against the other spouse. Another form of theistic triangulation may take place when a spouse

seeks closeness with God as a way to avoid conflict with the other spouse (Mahoney &

Tarakeshwar).

Sex differences have been observed in the few studies explicitly linking religious coping

and marital satisfaction. Astacio (2000) found a small but significant positive overall association

between religious coping strategies and marital satisfaction in a Hispanic sample. However,

husbands who frequently attended church tended to be less satisfied with their marriages.

Astacio further found that emotional religious coping was negatively related to marital

satisfaction, whereas collaborative religious problem-solving was positively related to marital

satisfaction in both spouses. Trembley, Sabourin, Lessard, and Normandin (2002) also found

that higher religious coping was associated with higher marital satisfaction. However, among

women, who tended toward negative religious coping strategies (e.g., asking God "why", angry

or distant feelings), marital satisfaction was lower when the women more often used religious

coping strategies.

More broadly, the effectiveness of each spouse's individual coping strategies and the

degree of congruence or complementarity between them may relate to marital adjustment by

buffering the negative effects of stress on the marriage, which include reduced time together,

communication difficulties, and physical and mental health problems (Bodenmann, 2005).

Indeed, although chronic stress predicts steep declines in marital satisfaction, some evidence

suggests that, when couples have adequate coping resources, difficult events actually draw

them closer to one another (Bodenmann; Karney, Story, & Bradbury, 2005). Bodenmann's

review of dyadic coping and marital functioning highlighted that, given the interdependence of

spouses' goals and concerns, one spouse's stress level influences the other, their coping efforts

interact, and each may select coping strategies specifically in response to the other. Research

on the topic is scant, but some evidence has been found that the correspondence and

complementarity of coping strategies more broadly between spouses has implications for their

marital adjustment (Badr, 2004). Couples were most well adjusted when the spouses

demonstrated congruent levels of active engagement coping (interacting with one's spouse to

solve a problem) and complementary levels of protective buffering (trying to manage one's

partner's responses) and avoidance coping (denying the stressor). Bodenmann's meta-analysis

revealed an overall effect size of $d = 1.3$ for the relationship between dyadic coping and marital

functioning.

Theoretical and Methodological Issues

The study of the effects of religiosity on marriage can also be improved by the

application of a strong theoretical framework. Sullivan (2001) theorized three models for how

religiosity may influence marital functioning: a direct model, an indirect model (whereby

religiosity's influence on marital satisfaction is mediated by other variables such as attitudes

toward divorce), and a compensation model (whereby religiosity moderates the relationship

between marital vulnerabilities and marital satisfaction). The compensation model, consistent

with Kirkpatrick's and Shaver's (1992) compensation hypothesis with regard to God serving a

surrogate attachment function, will be tested in the current study. Sullivan's findings indicated

that religiosity positively affected marital satisfaction only among couples with less neurotic

husbands, whereas it actually decreased satisfaction among couples with more neurotic

husbands. In the latter case, religiosity did not compensate for neuroticism, but instead

interacted to exacerbate the risk of marital dissatisfaction. These findings suggest that

religiosity's impact on marital functioning may depend on characteristics of the individuals and

their relationship and highlight the need for research investigating other factors, with which

religiosity may interact in both positive and negative ways. This study will contribute to the

understanding of such interactions specifically with romantic attachment variables.

The relationship between religiosity and marital adjustment may be clarified by

methodological improvements, including more psychometrically sound measurement of more

specific religious constructs. Mahoney and colleagues' (1999; 2003) work has shown that the

sanctification of marriage (i.e., beliefs that God is manifested in marriage and the perceived

sacred qualities of marriage) along with joint religious activities are related to higher marital

adjustment, more perceived benefits of marriage, less marital conflict, more collaboration, and

less aggression and stalemating. Unfortunately, most researchers have used brief single-item

measures of religiosity (Mahoney et al., 2008), which are unreliable and may mask true

associations. To address these problems, the proposed study uses an established measure of

religious coping, which was also preferable because it assess a more attachment-relevant

aspect of religiosity. Furthermore, its language is general enough so as not to limit its

applicability for non-Christians, which was important for its present use in a general community

sample.

The literature on religion and marriage has often been limited by heterogeneous

subsamples (e.g., couples married for different lengths of time, couples with and without

children, first and second marriages), which obscure findings because religiosity may affect

marital satisfaction differently in different stages or types of marriages (Sullivan, 2001). The

current study addresses this issue by limiting its sample to married couples with children in the late elementary school age. The findings of the present study will offer an interesting comparison with those of a similar study conducted earlier with newlywed, childless couples (Lopez et al., 2011), which found that high levels of religious commitment buffered the effect of individual and spouse attachment avoidance on marital adjustment but exacerbated the risks associated with attachment anxiety.

In their review, Mahoney et al. (2008) noted that most studies on this topic measure only one spouse's religiosity, not the correspondence of the two spouses' religiosity, or homogamy. A strength of the current study is that it will investigate relationships between each spouse's marital adjustment and not only their own religious coping strategies (both positive and negative strategies, assessed dimensionally) but also their partner's. Some evidence links congruence in religiosity between spouses and higher marital satisfaction (Chinitz, 2001; Kohn, 2001; Haseley, Riggs, & Pollard, 2007; Williams and Lawler, 2001). Davis et al. (2008) hypothesized that appraisals of spiritual similarity would promote empathy and forgiveness in marriage.

The Proposed Study

Drawing on recent work conceptualizing God as a surrogate attachment figure and Sullivan's (2001) compensation model of religiosity and marital adjustment, the proposed study will explore the interrelations among adult romantic attachment, religious coping, and marital adjustment. The negative appraisals and maladaptive coping styles of insecure adults can compromise marital adjustment; however, moderate effect sizes leave room for other

explanatory variables. Inconsistencies in the literature linking religiosity and marital satisfaction suggest that religiosity has been oversimplified by global measures and that it can either positively or negatively relate to marital satisfaction. To address these limitations, the current study will utilize a psychometrically strong instrument separately assessing positive and negative religious coping. This measure taps an aspect of religiosity that is relevant to attachment theory. This will be the first study to specifically explore the effects of one's partner's religious coping and the first to specifically examine religious coping's potential buffering or exacerbation of the effects of attachment vulnerabilities on marital satisfaction.

Evidence has been found both for the correspondence of working models of human relationships and relationships to God as well as for the use of God to compensate for attachment vulnerabilities. Research linking attachment to religious coping is in its infancy, has more often used attachment to God or parents rather than romantic attachment processes, and has never used the ECR. The current study may shed light on inconsistencies in the literature by investigating to what extent adults' use of religious coping may depend on the quality of their concurrent romantic attachment relationship.

The generalizability of prior findings has been limited by the characteristics of the given samples. The current archival sample was drawn from a wide range of sources in the community, allowing for representation of a broader range of religious orientations (including 13.8% nonreligious) than studies on religiosity that have often been limited by their reliance on Christian, church-going samples or people interested in studies of religiosity. In the current sample, only 53.5% self-identified as any of several Christian denominations, and only 70.3% reported that religion was currently "fairly" or "very" important. Many existing studies of

coping limit their scope to a specific, highly stressful situation such as illness, although religion is also used to cope with minor daily hassles (Hathaway & Pargament, 1991). The current study will assess religious coping with stressors in general.

The proposed study is strengthened by using an archival sample in which all couples were married at least one child within the age range of 8-10. Focusing the sample in this way eliminates confounds related to normative developmental changes in religiosity and attachment that have been noted across couple formation (Trinke & Bartholomew, 1997) and the transition to parenthood (Akister & Reibstein, 2004; Feeney, 2003; McCullough et al., 2005; Mikulincer & Florian, 1999a/b). The study will also be strengthened by the use of sophisticated data analysis techniques that account for the interdependence of data from both spouses and allow for exploration of partner and interaction effects.

Major hypotheses include (a) romantic attachment processes will predict marital adjustment and both positive and negative religious coping strategies, and (b) religious coping will moderate the effects of attachment on marital adjustment, such that positive religious coping strategies will buffer the negative effects of attachment avoidance on marital adjustment, and (c) negative religious coping strategies will exacerbate the negative effects of attachment anxiety on marital adjustment. Sex, partner effects, and their interactions will also be examined.

APPENDIX B

BACKGROUND INFORMATION QUESTIONNAIRE

Part I: Demographic Information

___1. Age:_____   6. Length of current marriage?_____

___2. Sex: a. Male   b. Female   7. How many children?_____

___3. Ethnicity   8. How many previous marriages?_____

     a. African-American   9. How many children from past relationship? _
     b. Native American
     c. Asian/Pacific Islander   10. Please list all persons living in your home at
     d. White/European American   the present time, their age & relationship to
        you:
     e. Hispanic/Latino/Mexican American   _____
     f. Bi-racial or Multi-racial   _____
        (Specify:_____)   _____
     g. Other (Specify:_____)   _____

___4. Educational Achievement: ___11. Family Income Level

     a. Below high school   a. Below $15,000
     b. High school degree   b. $15,000-$30,000
     c. Some college   c. $30,000-$45,000
     d. Technical/2-year degree   d. $45,000-$60,000
     e. Bachelor's degree   e. $60,000-$75,000
     f. Graduate degree   f. over $75,000

___5. Occupational Status:

    a. Employed full time   b. Employed part time   c. Student   d. Unemployed

Part II: Family Background

___12. Number of siblings:_____   Ages:_____

___13. Were you adopted?   A. Yes   B. No

___14. Did your parents divorce?   A. Yes, before I was 18   B. Yes, after I was 18   C. No

___15. If your parents divorced, did your mother remarry?   A. Yes   B. No

     If yes, how many times?_____   If yes, how old were you?_____

___16. If your parents divorced, did your father remarry?   A. Yes   B. No

     If yes, how many times?_____   If yes, how old were you?_____

___17. Did you experience the death of a close family member (e.g. parent, sibling, grandparent) before the age of 18?

                        A. Yes   B. No

    If yes, please circle the relevant relationship of the deceased family member to you.

   a. Mother   c. Stepmother   e. Brother   g. Grandmother
   b. Father   d. Stepfather   f. Sister   h. Grandfather

___18. Which of the following best describes your religious orientation?

   a. Pentecostal   e. Methodist   i. Judaism   m. Spiritual, but not religious

   b. Episcopal   f. Mormon   j. Hindu   n. Atheist

   c. Presbyterian   g. Baptist   k. Islam   o. No religious affiliation

   d. Lutheran   h. Catholic   l. Buddhist   p. Other: _____

___19. How religious was your family?   Not at all   a little   somewhat   fairly   very

     (While you were growing up)   1...............2...............3 ....4 5

___20. How religious is the family of   Not at all   a little   somewhat   fairly   very

    which you are a parent currently?   1...............2 ....3 ....4 5

___21. Have you ever sought counseling services? A. Yes   B. No

If yes, please circle all relevant services and indicate duration in **MONTHS.** Using the following

scale, indicate how helpful you found these experiences in the far right column below.

Not at all helpful   Somewhat helpful   Very helpful

_____

1   2   3   4   5

<u>Months</u>   <u>Helpful</u>?

a. Individual Therapy   A. Yes   B. No   _____   _____
b. Premarital Therapy   A. Yes   B. No   _____   _____
c. Couple Therapy   A. Yes   B. No   _____   _____
d. Family Therapy   A. Yes   B. No   _____   _____
e. Group Therapy   A. Yes   B. No   _____   _____
f. Career Counseling   A. Yes   B. No   _____   _____
g. AA/NA/etc   A. Yes   B. No   _____   _____

For questions 22-32: Please indicate by checking Yes or No whether you or any of your family
members (including aunts, uncles, grandparents) have experienced the concerns/problems
listed below.
If you check Yes, please indicate who it refers to using the corresponding letter in the following
list (You may indicate more than one person):

a. Mother   e. Brother   i. Uncle
b. Father   f. Sister   j. Aunt
c. Stepmother   g. Grandmother   k. Cousin
d. Stepfather   h. Grandfather   l. Yourself

Yes   No   Who:
___   ___22. alcoholism or alcohol abuse_____
___   ___23. abused drugs (other than alcohol)   _____
___   ___24. fatal or attempted suicide_____
___   ___25. criminal charges_____
___   ___26. was sexually abused_____
___   ___27. was physically abused_____
___   ___28. abused someone sexually_____
___   ___29. abused someone physically_____
___   ___30. took medicine prescribed for emotional problems_____
___   ___31. hospitalization due to emotional problems_____
___   ___32. diagnosed mental disorder (see #33)

33. If you checked "Yes" for #32, mental disorder, please choose the category or categories that describe to the best of your knowledge the specific mental disorder(s) and who it refers to. (You may indicate more than one person if applicable)

Yes   No   Who:

___   ___a. depression _____

___   ___b. bipolar (manic-depressive) disorde   r _____

___   ___c. anxiety _____

___   ___d. post-traumatic stress disorder_____

___   ___e. obsessive-compulsive disorder_____

___   ___f. attention-deficit hyperactivity disorder (ADD)_____

___   ___g. eating disorder (anorexia, bulimia)_____

___   ___h. schizophrenia _____

___   ___i. other disorder (specify:_____) _____

Part III: Family Status **[Answer 34-35 if 8-12 y.o. child lives apart from one or more biological**

parent(s)]

34. Length of marriage to 8-12 y.o. child's biological parent in years: _____

35. How old was your 8-12 y.o. child when you separated/divorced his/her biological parent?

_____

36. Were you in your first marriage when your 8-12 y.o. child was born?   Yes   No

37. How old was your 8-12 y.o. child when you remarried? _____

38. If your 8-12 y.o. child does not live with both biological parents, how often does your child

see the other biological parent?

_____ Almost every day
_____ At least once a week
_____ At least once a month
_____ About once every 6 months
_____ About once a year
_____ About once every few years
_____ Never

APPENDIX C

INITIAL DATA ANALYSIS

Data were then screened for univariate outliers by examining standardized values. There was one low outlier on the DAS, one high outlier for ECR Avoidance, one high outlier for ECR Anxiety, no outliers for the positive RCOPE, and two outliers for the negative RCOPE. These outliers tended to fit the general curve of the data and had Z scores just above 3. A check of their demographics verified that the participants were part of the intended sample. The researcher decided to pull the outlier scores in to 3 standard deviations from the mean.

To test the assumption of normality, each variable's histogram, skewness and kurtosis were examined. The DAS Total and ECR Attachment Anxiety variables were normally distributed. Attachment Avoidance and Negative Religious Coping each had a mild positive skew. Positive Religious Coping was mildly negatively skewed. There were no kurtosis problems. Based on graphical examination, all variables met the assumption of homoscedasticity except Negative Religious Coping. Attachment Avoidance and Positive Religious Coping were left untransformed given the small magnitude of the skew (< 1.00). A natural log transformation applied to the Negative Religious Coping scale brought its skewness into acceptable range. Finally, all predictor variables were centered around the grand mean.

APPENDIX D

DEMOGRAPHIC TABLE

	Total Adults	Husbands	Wives
	(N = 162)	(N = 81)	(N = 81)
Age			
Mean	37.54	38.52	36.58
SD	5.36	5.40	5.17
Ethnicity			
White/European-American	127 (78.4%)	64 (81.0%)	63 (76.8%)
Asian/Pacific Islander	3 (1.9%)	1 (1.3%)	2 (2.4%)
African American	12 (7.4%)	6 (7.6%)	6 (7.3%)
Hispanic/Mexican American	14 (8.6%)	7 (8.9%)	7 (8.5%)
Native American	1 (.6%)	1 (1.3%)	0 (0%)
Bi-/Multi-racial	3 (1.9%)	0 (0%)	3 (3.7%)
Missing	2 (1.2%)	1 (1.2%)	1 (1.2%)
Education			
High School Degree	18 (11.1%)	8 (10.1%)	10 (12.2%)
Some College	30 (18.5%)	17 (21.5%)	13 (15.9%)
2 Year/Technical Degree	20 (12.3%)	12 (15.2%)	8 (9.8%)
Bachelor's Degree	61 (37.7%)	25 (31.6%)	36 (43.9%)
Graduate Degree	32 (19.8%)	17 (21.5%)	15 (18.3%)
Missing	0 (0%)	0 (0%)	0 (0%)
Family Income			
Below $15,000	6 (3.7%)	3 (3.8%)	3 (3.7%)
$15,000-30,000	12 (7.4%)	6 (7.6%)	6 (7.3%)
$30,000-45,000	21 (13.0%)	9 (11.4%)	12 (14.6%)
$45,000-60,000	29 (17.9%)	14 (17.7%)	15 (18.3%)
$60,000-75,000	29 (17.9%)	12 (15.2%)	17 (20.0%)

Over $75,000	58 (35.8%)	31 (39.2%)	27 (32.9%)
Missing	7 (4.3%)	5 (6.4%)	2 (2.4%)
Religious Orientation			
Catholic	12 (7.4%)	6 (7.6%)	6 (7.3%)
Episcopal	4 (2.5%)	3 (3.8%)	1 (1.2%)
Lutheran	1 (.6%)	0 (0%)	1 (1.2%)
Presbyterian	4 (2.5%)	2 (2.5%)	2 (2.4%)
Methodist	5 (3.1%)	2 (2.5%)	3 (3.7%)
Pentecostal	4 (2.5%)	2 (2.5%)	2 (2.4%)
Baptist	34 (21.0%)	19 (24.1%)	15 (18.3%)
Mormon	6 (3.7%)	3 (3.8%)	3 (3.7%)
Hindu	2 (1.2%)	1 (1.3%)	1 (1.2%)
Spiritual but not religious	9 (5.6%)	3 (3.8%)	6 (7.3%)
No religious affiliation	9 (5.6%)	4 (5.1%)	5 (6.1%)
Other	38 (23.5%)	17 (21.5%)	21 (25.6%)
Missing	33 (20.4%)	17 (20.3%)	16 (19.5%)
Current family religiousness			
Not at all	10 (6.2%)	4 (5.1%)	6 (7.3%)
A little	17 (10.5)	10 (12.7%)	7 (8.5%)
Somewhat	14 (8.6%)	8 (10.1%)	6 (7.3%)
Fairly	36 (22.2%)	17 (21.5%)	19 (23.2%)
Very	52 (32.1%)	24 (30.4%)	28 (34.1%)
Missing	32 (19.8%)	16 (20.3%)	16 (19.5%)

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