



THE RELATIONSHIP BETWEEN ATTACHMENT STYLES AND MENTAL HEALTH OF THE STUDENTS OF PARDIS OF SHAHID MODARRES-SANANDAJ, IRAN, 2017

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Abstract:

The present paper investigates and compares the relationship of attachment styles with mental health of the students of Pardis of Shahid Modarres, Sanandaj. The study is aimed at testing the main hypothesis that there is a relationship between attachment styles and mental health. Based on reviewing the available theoretical foundations relevant to the research variables as well as the related studies, to answer the research questions, 100 students were randomly selected from the statistical population of the students in Pardis of Shahid Modarres, Sanandaj (to control the quality of the effect of culture on these variables, the students were selected from all strata). To collect the data, Collins, NL and Read's attachment styles and Goldberg's mental health questionnaires were employed. The statistical data was analyzed by descriptive statistical methods. The results show that there is a direct relationship between attachment styles and mental health and the dependence subscale has the highest correlation coefficient.

Keywords: attachment, correlation, closeness, dependence, anxiety

1. Introduction

Human is a complex and multidimensional being and his survival is guaranteed and lasted as the result of a relative balance among these dimensions. Numerous factors directly and indirectly influence the establishment of this balance. Some may have more prominent and significant roles than the others. However, what is important is that this

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balance establishment usually leads to a behavior development, life satisfaction and happiness, enhancing life quality which is named mental health by some scholars (Babaei, 2001).

Attachment is recognized as a deep emotional relationship with certain individuals in our lives, the interaction with whom creates a sense of pleasure and delight. Moreover, we are relaxed in stressful conditions believing in their presence. Bowlby defines attachment as “*a stable mental relationship between two individuals*”, and people at any age pass the happiest time of their lives when they are sure that they have someone with them (Bowlby, 1973).

Kolb (1998) believes that mental health is related to learning styles. Thereby, the exploration of individuals’ leaning styles helps us to understand which learning style is employed by them in solving and learning a task or which one is preferred to the other. The fact that whether they use one learning style or a variety of them, how their mental health influences their learning styles, and lastly, with respect to their mental health, whether they possess a unique learning style or not, illustrate the relationship between leaning styles and mental health (Emamipour & Shamsi Esfandabad, 2010).

The present study aims to investigate the relationship between attachment styles and mental health in the students of Farhangian University of Shahid Modarres Pardis in Sanandaj.

2. Statement of the Problem

Ethologists believe that attachment is recognized as a main human property and individuals should make an attempt to lead it towards a safe style. An attachment accompanied with security can increase individuals’ mental health. Due to the fact that the attachment problems in psycho-analysis, developmental psychology, and recently, ethology play a noticeable role in mental health of individuals, it is necessary to obtain experimental achievements and valid results regarding the interaction of attachment styles with learning problems in defining mental health. This condition can be considered as a link among analytic, developmental, ethologic and cognitive psychology approaches in describing and defining mental health. The implementation of these studies provides a suitable channel for the link between psycho-cognitive and systematic analysis.

Due to the fact that mental health faces noticeable changes in our country; in addition, there are no valid research from a psych-cognitive perspective, it is necessary to obtain experimental data and statistical information regarding the effects of attachment styles on mental health.

With respect to the points above, the main problem of the present study is to examine whether there is a relationship between learning and attachment styles with mental health of male students, and which styles predict their mental health. Hence, the contradiction present among previous research findings about the relationships of learning and attachment styles with mental health motivated us to conduct this study. However, the mental health of male students faces many ambiguities. The

implementation of such studies can lead to identifying the relationships of learning and attachment styles with male students' mental health. Thus, the present study poses this main problem 'which learning and attachment styles predict students' mental health?'

3. Objectives and Hypothesis

3.1 General Objective

Determining the relationship between attachment styles and mental health

3.2 Specific Objectives

1. Determining the relationship of the secure style with mental health of the students in Sanandaj Farhangian University;
2. Determining the relationship of the (avoidant) insecure style with the mental health of the students in Sanandaj Farhangian University;
3. Determining the relationship of the (ambivalent) insecure style with the mental health of the students in Sanandaj Farhangian University.

3.3 General Hypothesis

There is a relationship between attachment styles and mental health of the students in Sanandaj Farhangian University.

3.4 Specific Hypotheses

1. There is a relationship between the secure attachment style and mental health of the students in Sanandaj Farhangian University.
2. There is a relationship between the (avoidant) insecure style and mental health of the students in Sanandaj Farhangian University.
3. There is a relationship between the (ambivalent) insecure style and mental health of the students in Sanandaj Farhangian University.

4. Research Methods

The research has a descriptive correlational design. It aims to explore the relationship between attachment styles and mental health of the students in Sanandaj Farhangian University. The statistical population of the study is the entire Farhangian university students in Pardis of Shahid Modarres, Sanandaj. Through simple random sampling, a number of students in Educational Science were selected who were requested to fill in the questionnaires distributed among them. The sample comprised 100 students in Educational Sciences.

4.1 Instruments

A. Collins N. L. and Read's Attachment Scale

It is a self-report questionnaire consisting of 15 questions. Each attachment style (secure, avoidant and ambivalent) has 5 items/questions. The scoring procedure is based on a

Likert scale ranging from “never” (0) to “almost always” (4). The subscale scores are obtained by calculating the mean of the 5 items that compose each subscale in such a way that to determine each individual’s attachment style, we first add up the numerical values of the items relevant to each level and; then, divide them into 5. The subjects are required to choose the items which describe their characteristic style better in their close relationships. This scale is based on a 7-point Likert scale including 3 descriptions and requires the subjects to specify their positions concerning their conformity to each description which indicates a particular attachment style. A high internal consistency of these three descriptions indicates that each description investigates a totally different theme from the other one. It is the first questionnaire employed for the purpose of measuring adults’ attachment styles. As mentioned above, the scale has 3 items as well as 3 subscales (Rahimian Bouger et al., 2004).

The scale is a self-report of relation-making skills as well as a self-description of the way the attachment relations are formed with closely attached individuals. It includes 18 items and is measured by marking a 5-point Likert scale ranging from “They are not matched with my characteristics at all” (1) to “They are totally matched with my characteristics” (5).

Three subscales are identified through factor analysis, each having 6 items. The 3 subscales are as below:

1. Dependence (D): It measures the extent to which the subjects feel they can depend on others to be available when needed.
2. Closeness (C): It measures the extent to which the subjects are comfortable with regard to closeness and intimacy.
3. Anxiety (A): It measures the extent to which a person is worried about having a relationship (Mallincrodet, et al., as cited in Pakdaman, 2001).

Collins and Read (1990, as cited in Pakdaman, 2001) prepared their questionnaire’s material based on the descriptions present in the Hazan and Shaver’s adults’ attachment scale with regard to 3 main attachment styles.

The anxiety subscale (A) conforms to anxious-ambivalent attachment and the closeness subscale (C) is a bipolar dimension which basically makes a contrast between secure and avoidant subscales (Fenny Van Noller, 1996). Therefore, closeness conforms to the secure attachment and the Dependence subscale (D) can approximately be considered as the opposite of the avoidant attachment. The execution time of Collins and Read’s scale (RAAD) is regarded to be 10 minutes based on the conducted surveys (as cited in Pakdaman, 2001).

B. General Health Questionnaire (GHQ)

Goldberg’s general health questionnaire (GHQ) is used in this study. Since this scale is the most well-known psychiatry tool, it is employed to diagnose non-psychotic psychiatric disorders in varying conditions. It comprises 28 items and 4 scales including 1. Physical symptoms 2. Anxiety symptoms 3. Social performance, and 4. Depression symptoms

1. **Physical Health:** It is a score the subjects achieve by answering the questions 1-7 of the scale. It explores their general health as well as physical symptoms experienced during the past one month.
2. **Anxiety:** It is a score the subjects achieve by answering the questions 8-14 of the scale. It explores their intense clinical anxiety symptoms, insomnia, stress, anger and worrisome.
3. **Social Withdrawal:** It is a score the subjects achieve by answering the questions 15-21 of the scale. It measures their abilities in accomplishing their daily jobs, satisfaction in doing their responsibilities, feelings of usefulness, learning abilities and pleasure in doing daily tasks.
4. **Depression:** It is a score the subjects achieve by answering the questions 22-28 of the scale. It explores their feelings of worthlessness, despair, suicide thoughts, death wishes and abilities in doing tasks.

The total score of every individual is obtained by adding up the scores of the 4 subscales. Low scores signify health and high scores signify lack of health in this scale. The simple Likert Scale (with 0, 1, 2, 3) is used for the choices of the questionnaire items. The scores from 14 to 21 in each subscale indicate seriousness of the subjects' conditions in the factor. The total scores of 23 and above signify lack of general health and the scores below 23 indicate mental health (Goldberg, 1972; as cited in Hooman, 1998).

5. Results

In Table 1 is showed the relationship between attachment styles and mental health.

Table 1: Relationship between attachment styles and mental health

Criterion variable	Predictive variable	Correlation coefficient	Number
General Health	Dependence subscale	0.32	100
	Closeness subscale	0.26	100
	Anxiety subscale	0.24	100

6. Discussion and Conclusion

As illustrated in the table above, the Dependence subscale correlates with General Health of the entire sample indicating the presence of a significant positive relationship between the Closeness component in the attachment styles and Mental Health. Moreover, with respect to Closeness, the two correlation coefficients of Closeness and Anxiety indicate that there is a positive relationship between the attachment styles and mental health. Therefore, with regard to the obtained results, we can say that there is a significant relationship between the attachment styles [closeness (secure), dependence and anxiety (avoidant and ambivalent)] and mental health of students in Sanandaj Farhangian University. The results of this study are in line with those conducted by Austin et al. (2004), Parker (1991), Ample (2009), Besharat (2005), Amin Izadi and Azadi

Fallah (2007), and Bowlby (1996). However, the results do not correspond to the results of Danesh et al. (2008).

6.1 Limitations of the Study

Factors such as insufficient facilities, lack of time and the short period of the study conduction precluded its appropriate implementation.

6.2 Research Recommendations

1. Conducting this study simultaneously in Bent Al-Hoda Sadr Pardis in Sanandaj and comparing the results with each other is recommended.
2. An attempt should be made to employ newer and more updated questionnaires.

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