

■ Original Article

Attachment Style and Resiliency in Patients with Obsessive–Compulsive Personality Disorder

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Background: The goal of the present study was to determine the relationships between attachment styles and resiliency in obsessive-compulsive personality disorder.

Methods: A random sample of 260 subjects was obtained from the population of undergraduate students of the Nour Branch of Islamic Azad University, which is located in Mazandaran, and these subjects were enrolled in this descriptive and correlational study. The collected data included the subjects' responses to an adult attachment style questionnaire, resilience scale, and obsessive-compulsive personality disorder questionnaire. The data were analyzed with Pearson correlation coefficient indices and multiple regressions.

Results: The results of the data analysis showed a positive correlation (relationship) between ambivalent/avoidant attachment styles and obsessive-compulsive personality disorder and a negative correlation between resilience and obsessive-compulsive personality disorder. Furthermore, these results demonstrated that attachment style and resiliency can predict obsessive-compulsive personality disorder. In addition, no significant relationships were found between the demographic variables (convertibles) and obsessive-compulsive personality disorder.

Conclusion: These results suggested that attachment style and resiliency contribute to the development of obsessive-compulsive personality disorder.

Keywords: Compulsive Personality Disorder; Object Attachment; Psychological Resilience; Students

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INTRODUCTION

Obsessive-compulsive personality disorder is a multilateral behavioral-thought pattern involving preoccupations with orderliness, perfectionism, and mental and intrapersonal control that results in a loss of flexibility, openness, and efficiency.¹⁾ A number of studies have shown that parents with certain characteristics, such as excessive child supportiveness, high expectations, strictness, and oversensitivity, tend to have children who possess a high level of obsessive-compulsive symptoms and anxious thoughts.²⁾

Bowlby,³⁾ an attachment theorist, has suggested that humans are born with an innate and adaptable motivational system that is designed with the need to seek proximal figures of attachment, especially in response to threats, to enhance security. During frequent interactions with a supportive and sensitive caregiver, a child develops a stable emotional-cognitive structure that reduces stress and provides peace, comfort, and protection from threatening situations.⁴⁾ Researchers believe that parents treat their children differently based on their personality type and psychological traits. The diverse training and behavioral methods of parents results in three attachment styles: secure, avoidant insecure, and ambivalent insecure.⁵⁾ Bowlby⁶⁾ in 1969 has speculated that many personality disorders are derived from and affected by the deprivation of a child of the care and attention of a caregiver or lack of stability in the relationship of the child with the person to whom he/she is attached.⁶⁾ The results of the studies of Mikulincer⁷⁾ have demonstrated that people with insecure attachment styles are less able to cope with stressful situations.

In addition to the attachment styles that are related to the traditional structure, a new structure has recently caught the attention of psychologists. A number of studies have described factors that moderate the effects of stressful events that contribute to the development of psychological disorders and that protect individuals from these disorders. One factor that allows people to better manage the needs, challenges, and threats of life is resiliency.⁸⁾ Resilient individuals exhibit more adaptive behaviors in response to negative life events.⁹⁾

Studies by Bonanno¹⁰⁾ in 2004, Masten¹¹⁾ in 2001, Connor and Davidson¹²⁾ in 2003, and Basu¹³⁾ in 2004 have shown that individuals with less resiliency for life events experience mental pressure, anxiety, and/or depression. Friberg et al.¹⁴⁾ have suggested that resilient people are more flexible against traumatic situations and are better able to protect themselves against these conditions.

However, it is unclear if resiliency is associated with obsessive-compulsive personality disorder and whether attachment style and resiliency can together predict obsessive-compulsive personality disorder. Because more research is needed on obsessive-compulsive personality disorder and the roles of attachment style and resiliency in predicting this disorder; the objective of the present study was to determine if obsessive-compulsive personality disorder is related to attachment style and resiliency among students.

METHODS

This descriptive/correlational study was designed to investigate the relationship between variables that might play a role in obsessive-compulsive personality disorder. The sampling population consisted of all of the undergraduate students of the Nour Branch of Islamic Azad University in Mazandaran. A Morgan table was used to select a sample size of 300 subjects according to the number of research variables. The 300 subjects were selected with a random sampling method that involved the assignment of a number to each student's name. Numbers were then randomly selected, and the students with the corresponding number were included in the study sample. Forty subjects were excluded from the study because of damaged questionnaires. The data for 260 subjects were analyzed in the study. After the research protocol was approved by the Ethics Committee of the Psychodynamic Research Center (Razi Psychology Center), the registration code of 94.120 was used, and the questionnaires were distributed to the students who consented to participating in the study after they were assured of the confidentiality of their shared information. The age range of the sampled students was 19–26 years old, and they had no histories of chronic physical or mental illness. In addition, the subjects were celibate and living with their parents. The data were analyzed with descriptive statistics, Pearson correlation coefficients, and multiple regressions. In addition, a multivariate regression analysis that adjusted for resilience was performed. The three questionnaires described below were used to collect data.

1. Questionnaire of Adult Attachment Style

This questionnaire, which was created by Hazan and Shaver¹⁵⁾ in 1987, is a self-reporting tool that was designed based on Ainsworth's triple attachment styles (secure, avoidant, and ambivalent). This scale consists of descriptions of the individual's perceptions of his/her relationships with important people in his/her current life.¹⁵⁾ Taheri¹⁶⁾ in 2010 calculated that the internal consistency of this attachment style questionnaire was 0.55 to 0.77 and the reliability was 0.84 for secure attachment and 0.78 for insecure, ambivalent, and avoidant attachments.

2. Resilience Questionnaire

This questionnaire was used to measure resiliency according to Connor and Davidson's resilience scale, which consisted of 25 items and which was designed to measure a subject's ability to deal with pressure and stress.¹²⁾ This scale assesses various aspects of resiliency, such as feelings of personal ability, resistance to negative events, positive acceptance of change, trust in one's instincts, sense of support and security, spiritual faith, and pragmatic approaches to problem solving. The initial studies of this tool have shown that it is suitable for measuring the resilience of adults.¹²⁾ In Iran, Jowkar¹⁷⁾ in 2007 reported an internal consistency for this scale of 0.80 with Cronbach's alpha method. In this scale, a five-option calibration range is implemented for each item (from absolutely false to always true). The minimum tribal resilience score for this scale is zero, and the maximum score is 100.¹²⁾

3. Obsessive-Compulsive Personality Questionnaire

In order to assess obsessive-compulsive personality disorder, the obsessive-compulsive personality questionnaire that was designed by Brannigan¹⁸⁾ was used. The questionnaire that we used in the current study was derived from a book by Brannigan¹⁸⁾ that was translated into Persian by Faride Alagha in 2003. Because the validity and reliability of this questionnaire have not been determined for Iranian subjects, the questionnaire was subjected to exploratory and confirmatory factor analyses. The results of the analysis yielded a Cronbach's alpha value of 0.72, which indicated its validity. This questionnaire included 22 items that were in the form of yes/no questions. 'Yes' answers yielded 1 point, and 'no' answers resulted in 0 points. Higher scores indicated more symptoms of obsessive-compulsive personality disorder. Only one factor was obtained in the exploratory factor analysis, and these results were confirmed in the confirmatory factor analysis. Exploratory factor analyses were done on the questionnaires, and the Kaiser-Meyer-Olkin value was calculated as 0.867. Bartlett's test of sphericity equaled 2,030.43 which was significant ($P<0.001$) and which justified the factor analysis according to the correlation matrix.

RESULTS

Of the 260 samples, 186 (71.5%) were female, and 74 (28.5%) were male. Seventy-seven subjects were 19–21 years old (29.6%), 134 were between 22 and 24 years old (51.5%), and 49 were 25–27 years old (18.8%). Twenty-three were married (8.8%), and 237 were single

Table 1. Baseline characteristics of the study subjects (N=260)

Variable	Value
Demographics	
Gender	
Female	186 (71.5)
Male	74 (28.5)
Age (y)	
19–21	77 (29.6)
22–24	134 (51.5)
25–27	49 (18.8)
Marital status	
Married	23 (8.8)
Single	237 (91.2)
Economic situation	
Poor	40 (15.4)
Medium	157 (64.2)
Good	63 (20.4)
Family history of mental disorder	
Yes	11 (4.23)
No	249 (95.77)
Attachment style	
Secure	21.14±17.4
Ambivalent	36.12±96.4
Avoidant	85.12±55.5
Resiliency	95.80±25.12
Obsessive-compulsive personality disorder	31.6±34.2

Values are presented as number (%) or mean±standard deviation.

(91.2%). The economic conditions of the subjects were poor ($n=40$, 15.4%), average ($n=157$, 64.2%), or good ($n=63$, 20.4%). Eleven of the 260 subjects (4.23%) had a family history of mental illness. The mean age of the subjects was 22.61 years old, and their mean scores for secure attachment style, ambivalent attachment style, avoidant attachment style, resiliency, and obsessive-compulsive personality disorder were 14.21, 12.36, 12.85, 80.95, and 6.31, respectively. The means and standard deviations of all of the variables are presented in Table 1. Considering the normal distribution of the variables, correlation coefficient were administered to examine the relationship between attachment style and resiliency with obsessive-compulsive personality disorder. The Pearson correlation coefficients for the relationships between ambivalent attachment style and avoidant attachment style with obsessive-compulsive personality disorder were 0.22 and 0.36, respectively ($P<0.001$, for both). In contrast, the demographic variables and secure attachment style did not exhibit relationships with obsessive-compulsive personality disorder. A significant correlation coefficient of -0.23 ($P<0.001$) was achieved between resiliency and obsessive-compulsive personality disorder. The results of the correlation coefficient calculations between the attachment styles/resiliency with obsessive-compulsive personality disorder are presented in Table 2. We used a multiple regression analysis to investigate the effects of attachment style and resiliency on obsessive-compulsive personality disorder. The results of the regression analysis, which are shown in Table 3, showed that the regression model was meaningful. In the model, the dependent variable was obsessive-compulsive personality disorder, and the independent variables were resiliency and attachment styles. The variance inflation factor, tolerance, and Durbin-Watson results revealed that the regression analysis met the assumption of no collinearity. The results showed that 17% of the variance related to obsessive-compulsive personality disorder was explained by attachment style and resiliency. The effect size of the avoidant attachment style was 30% ($P<0.001$), while the effect size of the ambivalent attachment style was not significantly meaningful. In addition, the effect size of resiliency on obsessive-compulsive personality disorder was -0.19 ($P<0.001$). The results of the resiliency-adjusted regression analysis showed a significant relationship ($P<0.001$) between the avoidant attachment style

Table 2. Correlation coefficients for the relationships between the demographic variables, attachment styles, resiliency, and obsessive-compulsive personality disorder

Variable	Pearson's R	P-value*
Gender	0.09	0.11
Age (y)	0.02	0.68
Marital status	0.009	0.89
Economic situation	0.008	0.71
Family history of mental disorder	0.08	0.10
Secure style	-0.01	0.77
Ambivalent style	0.22	<0.001
Avoidant style	0.36	<0.001
Resiliency	-0.23	<0.001

*Obtained from the Pearson correlation coefficients.

Table 3. Results of the regression analysis of the effects of attachment style and resiliency on obsessive-compulsive personality disorder

Variable	R	R ^{2*}	F	P-value [†]	B [‡]	B [§]	T	P-value	Tolerance	Variance inflation factor	Durbin-Watson
Ambivalent attachment style	0.41	0.17	18.16	0.001	0.04	0.08	1.37	0.17	.80	1.24	1.50
Avoidant attachment style					0.12	0.30	4.94	0.001	.83	1.20	
Resiliency					-0.03	-0.19	-3.30	0.001	.96	1.04	

In this regression analysis, the dependent variable was obsessive-compulsive personality disorder, and the independent variables were ambivalent attachment style, avoidant attachment style, and resiliency.

*The coefficient of determination in regression analyses. [†]Levels of significance of the coefficients of determination in regression analyses. [‡]Unstandardized coefficient and slope of the regression line. [§]Standardized coefficient in regression analyses. ^{||}Levels of significance of the regression coefficients.

Table 4. Regression analysis of impact of attachment style on obsessive-compulsive personality disorder with modified resiliency variable

Prediction variable	R	R ^{2*}	F	P-value [†]	B [‡]	B [§]	t	P-value	r (partial)	Tolerance	Variance inflation factor	Durbin-Watson
(Constant)					3.97		9.58	0.001				1.50
Ambivalent attachment style	0.37	0.13	20.97	0.001	0.04	0.09	1.57	0.12	0.09	.85	1.18	
Avoidant attachment style					0.26	0.32	5.19	0.001	0.30	.85	1.18	

In this in regression analyses, dependent variable was obsessive-compulsive personality disorder, independent variables were ambivalent attachment style and avoidant attachment style, and moderating variable was resiliency.

*The coefficient of determination in regression analyses. [†]Significance levels for coefficient of determination in regression analyses. [‡]Non-standard coefficient and slope of regression line. [§]Standard coefficient in regression analyses. ^{||}Significance levels for regression coefficients.

and obsessive-compulsive personality disorder. The coefficient for this effect was 0.32, which indicated a positive effect of avoidant attachment style on obsessive-compulsive personality disorder (Table 4).

DISCUSSION

The purpose of this study was to investigate the relationships between attachment styles and resiliency with obsessive-compulsive personality disorder. People with ambivalent/avoidant attachment styles have obsessive-compulsive personality disorder more than others who do not have those attachment styles. Some potential explanations of these results are related to the suggestion that the roots of child anxiety can be discovered in the mother-child relationship. Insecure mothers are less responsive to their children compared with mothers with secure attachment styles. Insecure mothers do not give timely attention to the needs of their children and respond to the child only when they want. Therefore, these children recognize that their mothers are unreliable for meeting their needs. As a result, these children realize that the world is an insecure place for them, and they adopt a pessimistic view of others and the world around them. Therefore, people with insecure attachment styles (avoidant and ambivalent) have a greater risk for developing various diseases and disorders and psychological damage.¹⁹⁾ The results of several studies have indicated that insecure attachments make a person vulnerable to symptoms of anxiety and predict anxiety disorders to a great extent.²⁰⁾ Overall, the results of the present study were consistent with the findings of previous studies.^{21,22)} People with insecure attachment style (avoidant and ambivalent) do not have feelings of peace and comfort. Therefore, they have a constant attitude that makes them unable to trust any people, entities, or events. They do not even trust themselves and are always seeking orderliness and the best, but they still do not feel secure, even when they achieve them.

Thus, people with ambivalent attachment styles feel constant anxiety,²³⁾ and people with obsessive-compulsive personality disorder feel this same constant anxiety.¹⁾ The results of this study can be explained by this relationship.

The results indicated the absence of a relationship between the secure attachment style and obsessive-compulsive personality disorder. Mental health disorders, such as obsessive-compulsive personality disorder, are a mental-social phenomenon that requires a good understanding and accurate interpretation of the relevant issues. Every culture views mental health according to their specific criteria. The goal of every society is to establish conditions in which all people's mental health is guaranteed. In consideration of these cultural conditions, the results of this study might be inconclusive because the questionnaire that we used in our study was based on Western culture, but our subjects were Iranians with different cultural values than those who live in Western societies.

The results of this study showed that resiliency is effective against obsessive-compulsive personality disorder. These results are supported by observations that resilient people can resist and overcome anxiety and stress factors. Therefore, resiliency leads to the adaptation and greater compatibility of people under difficult and unpleasant living conditions and vice versa: people with low resiliency are prone to anxiety disorders, such as obsessive-compulsive personality disorder, because they cannot manage stressful factors. In addition, people with high levels of resiliency have more self-confidence and effective coping strategies against toxic situations. As a result, they easily overcome stressful conditions and interpret stressful life events in a way that is tolerable for them. Enhancing resiliency can help an individual resist and overcome anxiety, stress, and other factors that cause psychological problems.^{24,25)} Various studies have shown that reductions in resiliency are associated with feelings of mental pressure, anxiety, and de-

pression when facing life events.²⁶⁾ Thus, resiliency moderates stress and the inability to cope with stressful situations.²⁷⁾ The results of this study were consistent with the findings of Haddadi and Besharat²⁸⁾ in 2010 who investigated the relationship of resiliency with indicators of vulnerability, such as psychological stress, depression, anxiety, and mental health. The resiliency results suggested that resiliency and avoidant attachment style contribute to obsessive-compulsive personality disorder and that subjects with more resiliency who do not have an avoidant attachment style develop obsessive-compulsive personality disorder less frequently. Thus, therapists should consider these two variables related to obsessive-compulsive personality disorder. When resiliency is kept constant, an avoidant attachment style has a greater impact on obsessive-compulsive disorder, which suggests that individuals with more resiliency are affected less by the negative effects of an avoidant attachment style and individuals with less resiliency are affected more by the negative impact of the attachment style. A study titled "Attachment, Resilience and Prevention" suggested that a secure attachment style provides the necessary resiliency in individuals for coping with unpleasant events so that they can cope with them as adults in the future, without psychological damage.²⁹⁾ Resiliency can control the negative effects of an avoidant attachment style on obsessive-compulsive disorder. Therefore, it is recommended that therapists consider methods to improve the resiliency of individuals with obsessive-compulsive disorder who have an avoidant attachment style. Because this study was correlational, future studies need to investigate the effects on subjects of resiliency training, which is an important component of positive psychology. Because the subjects examined in this study were students, the generalizability of these results to other populations should be performed with caution. Therefore, it is recommended that similar studies be performed in other communities and societies.

In addition to the subjects all being students, another limitation of this study was that the study was cross-sectional. Thus, future studies need to investigate the effects of attachment styles and resiliency on obsessive-compulsive personality disorder in longitudinal studies.

Please note that this study was conducted in Iran, which has its own cultural values and racial conditions. Thus, to extend the results, additional investigations are needed in other societies to determine the generalizability of the results.

CONFLICT OF INTEREST

No potential conflict of interest relevant to this article was reported.

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