

The Relationship between Attachment Styles and Obsessive-Compulsive Disorder: The Moderating Role of Gender

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Abstract

Introduction: Obsessive-compulsive disorder is a common and chronic disorder that starts in order to neutralize some thoughts, thoughts that enter the person's mind that are obsessive and the person cannot control them. With the intensity of these behaviors or mental actions, a person reaches a state where he can no longer prevent them.

Methods: The current research is a correlational descriptive study according to the practical purpose and according to the method of data collection. The statistical population of the present study is made up of all young couples of Kerman city, whose marriage has been at most ten years old. The target sample consists of 240 people who were selected in a purposeful way. In order to collect the data of this research, three tools were used: 1) Collins and Reid attachment style questionnaire, 2) Maudsley practical obsession questionnaire and 3) Rahim couple conflict resolution style questionnaire. Cronbach's alpha was used to check the reliability of these questionnaires and construct validity was used to check their validity. In order to experiment and analyze the data in this research, the structural equation modeling method has been used.

Results: Data analysis results indicated that the gender moderator role in the influence of obsessive-compulsive symptoms on attachment styles in couples was not confirmed. Additionally, obsessive-compulsive symptoms significantly and negatively predicted attachment styles. Thus, an increase in obsessive-compulsive symptoms predicts a decrease in attachment in couples.

Conclusion: Considering the obtained results, it seems that employing problem-solving styles and dependent attachment styles can play a significant role in reducing obsessive-compulsive symptoms in young couples.

Keywords: attachment styles, conflict resolution styles, practical obsession, young couples

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Introduction:

The family is one of the crucial social symbols, and the health and prosperity of society depend on the well-being and dynamism of its members. At the same time, the health and balance of the family system rely on the quality of the relationships between men and women and marital satisfaction (1). Marital satisfaction indicates the strength and efficiency of the family system. If marital satisfaction is low due to physical or psychological problems (such as obsessive-compulsive disorder, inappropriate attachment styles, conflict resolution issues, etc.), the stability and durability of the family will be compromised, leading to negative consequences (2).

Among psychiatric disorders, obsessive-compulsive disorder (OCD) is a common and chronic condition that initially begins as a way to neutralize certain intrusive thoughts that enter an individual's mind repetitively (obsessions) and are uncontrollable. Over time, these behaviors or mental acts become more severe and excessive, referred to as compulsions, and the individual cannot prevent them (3). According to the World Health Organization's annual data, OCD affects about 2 to 3 percent of the world's population. Among the treatments available, the most common are cognitive-behavioral therapy, psychotherapy, and pharmacotherapy. However, 40% of patients do not respond to these treatments (4).

Despite extensive research in recent years on the causes of this disorder, comprehensive knowledge has not yet been obtained. Retrospectively, the onset of obsessive-compulsive disorder has been linked to stressful life events experienced by patients, such as marriage, childbirth or pregnancy, significant losses, promotion to a new job/position, and severe physical illnesses (5).

Considering that marriage is one of the most important decisions in an individual's life, having a satisfactory marriage is the intersection and exchange of positive feelings and emotions between young couples. Forming a healthy family plays a significant role in the health, quality of life, and well-being of the entire society. In marital relationships, especially in the early years, several factors can cause disturbances among individuals, particularly the onset of obsessive-compulsive disorder. One of these factors, which has a high comorbidity with OCD and has been confirmed by many researchers, is attachment styles (6-8). In this context, attachment theory, which is one of the appropriate theoretical frameworks for explaining adaptation to illnesses, has been proposed. Attachment is a relatively stable emotional and emotional bond that is formed between the child and the mother or individuals with whom the child has continuous interaction (9).

The principal theorist of attachment, John Bowlby (10), believed that the level of accessibility and consistent responsiveness to individuals' efforts to achieve calm and security determines the quality and style of their attachment. Johnson (11) identified three attachment styles: secure, avoidant, and ambivalent. They believed that attachment styles shape children's expectations about whether the mother (caregiver) is emotionally responsive and determine whether the individual believes they are worthy of love and affection. Attachment styles play a crucial role not only in childhood but also in adulthood, especially after marriage and in marital life, in establishing communication between couples, particularly young couples. Attachment styles are among the major determinants of

individuals' reactions and adaptations to major stresses. An individual with a secure attachment pattern perceives their caregiver as accessible and experiences themselves positively. In the ambivalent attachment pattern, the caregiver continuously repels the individual, who is insecure yet compulsively trusts themselves. Finally, in the anxious attachment pattern, the individual perceives their caregiver as a consistently unstable respondent and themselves as dependent and worthless. Attachment style is one of the characteristics that affects couples' relationships and is reciprocally influenced by their relationships.

Conflict and disagreement are central to romantic relationships. The existence of a joke like "the main cause of divorce is marriage" reflects the link between conflict and intimacy (12). Therefore, conflict in intimate relationships is natural, and marriage is no exception. The frequent and varied interactions between couples create numerous opportunities for conflict, and marital conflicts span a continuum of disagreements in interpersonal interactions, including behaviors that lead to hostile, stressful, oppositional, and conflicting communications (13).

Determining the nature of the normalcy of conflicts between spouses is challenging. Some couples form a structure of interactions in which they frequently argue, while others experience fewer disagreements and typically only conflict over significant issues. However, the growth and development patterns are consistent; for example, couples who have been married for a long time have fewer conflicts compared to younger couples. Marital conflicts, as a result of negative emotional and behavioral interactions between spouses, depending on the nature, intensity, and persistence of the conflicts, can have serious physiological and psychological consequences and cause problems in attachment between couples (14).

Given the aforementioned points, the issue under investigation is whether the most important individual factors affecting the lives of men and women, particularly among young couples, are attachment styles that impact their lives in various ways, providing a framework for better understanding marital relationships and resolving conflicts. Furthermore, considering that OCD is associated with changes in brain regions related to conflict detection in information processing and signaling, especially when increased top-down control is needed, it can be stated that conflict resolution styles of men and women also influence OCD and can mediate the relationship between attachment styles and OCD. It is also important to examine if there are differences in the mentioned factors between men and women. Therefore, the fundamental question arises: Is there a difference in the relationship between attachment styles and OCD mediated by conflict resolution styles between men and women?

Research Method:

This research is of a correlational type. The statistical population of the study consists of all young couples in the city of Kerman who have been married for a maximum of ten years, though the exact statistics are not available. The sample for the study, considering that the data analysis method in this research is Structural Equation Modeling (SEM), is determined based on the latent variables, not observable variables. A minimum of 20 samples for each factor (latent variable) is required.

Therefore, in this study, considering the number of paths and the fact that we examine three constructs—conflict resolution styles (integrative, dominating, obliging, avoiding, and compromising styles), attachment styles (anxiety, closeness, and dependence), and obsessive-compulsive disorder (OCD) (checking, cleaning, slowness, and obsessive doubt)—and 12 latent variables, 240 participants were selected using convenience sampling from patients visiting Dr. Saeed Raeisi's dental clinic. Data were collected accordingly. The inclusion criteria for the study were young couples who had been married for no more than ten years and who were willing to participate and complete the questionnaires. After reviewing the questionnaires, if individuals had been married for more than ten years, they were excluded from the evaluation process of the study.

Three data collection tools were used in this research:

Collins and Read's Attachment Styles Questionnaire (RAAS): This questionnaire, developed by Collins and Read (15), assesses adult attachment styles. It aims for self-evaluation of relationship skills and self-description of attachment formation towards close attachment figures. It consists of 18 items and three dimensions: anxious attachment (A), which corresponds to ambivalent attachment; closeness (C), which corresponds to secure attachment; and dependency (D), which is almost the opposite of avoidant attachment. Responses are measured on a five-point Likert scale ranging from "strongly agree" to "strongly disagree." The reliability of this scale was assessed by Tahaei and Banisi (9) in two sessions with 30 samples and a two-week interval, resulting in a reliability coefficient of 0.90. The validity of this scale was also confirmed by these researchers using construct validity (confirmatory factor analysis).

Maudsley Obsessive-Compulsive Inventory (MOCI): Developed by Hodgson and Rachman (16), this inventory is designed to research the type and extent of obsessive problems. It includes 30 items, some keyed true and others false, with total scores ranging from 0 to 30. It comprises four components: checking, cleaning, slowness, and obsessive doubt. Dadfar (17) estimated the overall reliability of the test at 0.78 and the convergent validity of this questionnaire at 0.87.

Rahim Organizational Conflict Inventory-II (ROCI-II): This questionnaire, developed by Rahim (18), measures conflict resolution styles. It contains 28 items and aims to evaluate individuals' conflict resolution styles concerning their spouse. It includes five dimensions: integrating, dominating, obliging, avoiding, and compromising styles. The response scale is a five-point Likert scale ranging from "strongly agree" to "strongly disagree." Haghighi et al. (19) calculated the reliability of this questionnaire using Cronbach's alpha for its subscales, which ranged from 0.70 to 0.75, and for the overall scale, it was 0.78. Its validity was confirmed using construct validity.

Findings:

The demographic information of the participants was as follows: 120 men and 120 women. To fit the measurement model or the outer model, the reliability and validity of the model were examined, and the results are presented below. In fitting the outer model, questions and observable relationships

between variables were examined. For assessing discriminant validity at the construct level, the Fornell-Larcker criterion was used.

Table 1. Fornell-Larcker Criterion Matrix

Variables	Attachments styles	Obsessive-Compulsive Disorder (OCD)
Attachment Styles	0.081	-0.478
Obsessive-Compulsive Disorder (OCD)	-0.478	0.791

Based on Table 1, the square root of the extracted mean and variance of each research variable from the correlation between the two latent variables is higher, indicating desirable convergent validity between the two variables. Next, the measurement model was examined. In Figure 1, the path coefficients of the inner model of the research are presented.

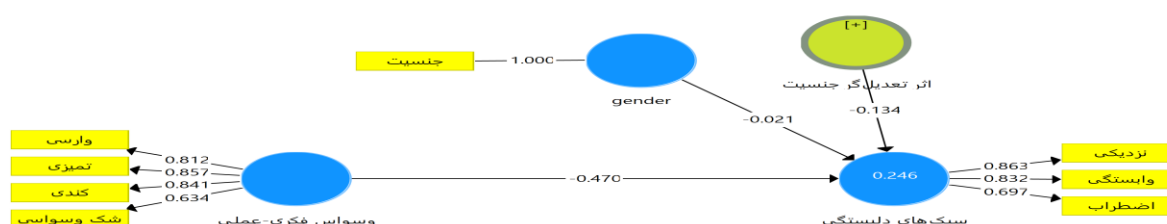


Figure (1): Path Coefficients of the Inner Model of the Research

In Figure 1, in addition to the path coefficients of the inner model of the research, the factor loadings of each of the subscales are presented. The factor loadings of all subscales are greater than 0.4, confirming the reliability of the model.

In Figure 2, the significance of the path coefficients of the inner model (t-values) is presented.

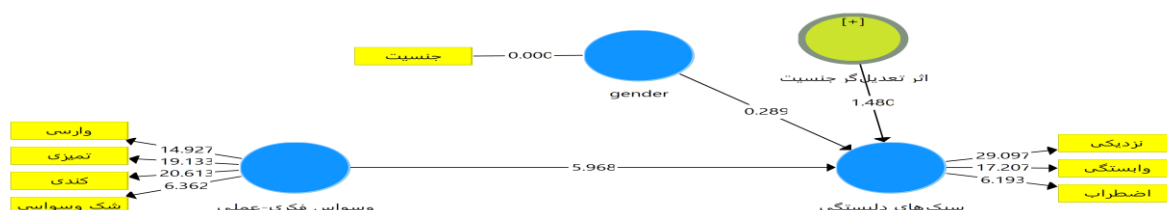


Figure 2 presents the bootstrapped model (t-values)

Based on the findings from Figures 1 and 2, the assessment of significant path coefficients was conducted using standardized path coefficients and t-values. The results of this assessment are presented in Table 2.

Table 2. Estimated Path Coefficients

Path	Path coefficients	Std, deviation	t	P
Obsessive-Compulsive Disorder> Attachment Styles	-0.470	0.079	5.968	0.000

To test the research hypothesis, standardized path coefficients and t-statistics were utilized in the Smart-PLS software. When the t-statistic exceeds the value of 1.96, the research hypothesis is confirmed.

According to the results presented in Table 2, obsessive-compulsive symptoms significantly and negatively predict attachment styles. Therefore, an increase in obsessive-compulsive symptoms predicts a decrease in attachment in couples.

(*path coefficient*= -0.470 , *Standard deviation*= 0.079, *t*=5.968 , *p*<0.0001)

At the end, to investigate the moderating role of gender (a nominal variable) in the relationship between obsessive-compulsive symptoms and attachment styles, the group analysis method was employed. In this method, all data were first separated based on gender, and then the data pertaining to men and women were entered into the model and analyzed separately. In this approach, t-statistics were manually calculated.

Table 3. Examining the Moderating Role of Gender in the Relationship Between Obsessive-Compulsive Disorder and Attachment Styles

Path	Path coefficients		N		Std, deviation		t	
	female	male	female	male	female	male	female	male
The Moderating Effect of Gender> Attachment Styles	-0.134	-0.121	120	120	0.090	0.086	1.480	1.139

Based on Table 3, the calculated t-value obtained using the software data and inserted into the formula is less than the critical value of 1.96. Therefore, the hypothesis that gender moderates the effect of obsessive-compulsive disorder on attachment styles in couples was not confirmed.

Discussion and Conclusion:

Obsessive-compulsive disorder (OCD) is a debilitating psychological disorder characterized by intrusive thoughts and repetitive behaviors or rituals. It consumes significant amounts of time for those affected, negatively impacting various aspects of their lives. One factor that OCD influences, irrespective of gender, is attachment styles. Attachment styles determine the emotional, cognitive rules, and strategies that guide individuals' emotional reactions and interpersonal relationships. These styles are intrapersonal resources that can moderate stress and disability in adverse conditions, mitigating the negative effects of stress (7).

Based on the findings, it is evident that OCD negatively and significantly predicts attachment styles. An increase in OCD symptoms predicts a decrease in attachment in couples. This result aligns with studies by Pakoufta and Akhlaghi (20), Poza et al. (21), Desouki et al. (22), Tibi et al. (8), and Khalifat and Monirpour (7). For example, Tibi et al. (8) investigated whether childhood trauma and attachment styles predict OCD over a four-year period. Their results showed that secure attachment emerged as a protective predictor for improving OCD. In another study, Khalifat and Monirpour (7) examined OCD symptoms based on attachment styles and alienation, with depression as a mediator. Their results confirmed the direct and indirect effects of alienation, secure attachment, ambivalent attachment, and depression on OCD symptoms. The direction of the effect was positive for alienation and ambivalent attachment and negative for secure attachment, with a positive relationship for depression. The overall fit indices indicated an acceptable fit between the data and the model. Khalifat concluded that appropriate early attachment experiences can prevent OCD in adulthood.

In explaining the findings, it can be said that there is no significant relationship between OCD and attachment styles in men and women. Thus, based on these variables, men and women are not distinguishable concerning attachment styles. Alienation, meaning a sense of disconnection, separation, and lack of mental (cognitive) and practical (functional) linkage between an individual and their surrounding environment, including society, other people, social structures, and oneself, is pertinent here. In OCD, individuals lack confidence in their actions, feeling ashamed and guilty for their behaviors without being able to control them. Therefore, individuals experiencing alienation are likely to develop OCD. Additionally, most psychological issues and personality disorders stem from childhood and early experiences. The more these experiences foster trust between a child and their parents, the more protected the child is from future psychological issues, and vice versa. It is inferred that individuals with OCD, who have impaired self-representations and perceptions of the world, are influenced by early attachment experiences that contribute to dysfunctional beliefs in OCD. Individuals with anxious attachment styles reflect negative beliefs about life, are pessimistic, and are prone to psychological disorders like OCD.

Research Limitations: This study, like any other research, has limitations, including the use of self-reported tools instead of observing actual behaviors, which may introduce bias. The study was conducted on young couples in Kerman city, and given the specific temporal and geographical context, the findings cannot be generalized to all individuals.

Suggestions: For future research, it is suggested to use interviews alongside questionnaires to gather information and compare it with questionnaire data. This research should also be conducted in different time frames and regions across the country. The study indicates that OCD can affect attachment styles, hence, it is recommended that educational programs on attachment styles for mothers be considered by education stakeholders to promote attachment-based parenting styles.

Ethical Considerations: Ethical considerations for this study were approved by the Ethics Committee of Islamic Azad University, Shiraz Branch, with the ethics code IR.IAU.SHIRAZ.REC.1401.048. The ethical considerations included anonymous responses to the questionnaires, assuring participants that their data would remain confidential, and clarifying that participation was entirely voluntary.

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Conflict of Interest: The authors declare no conflict of interest in conducting and writing this study.

References:

- 1- Mohammadi Ahmadiabadi N, Doulatabadi F. Investigating the Relationship between Resilience and Obsessive Beliefs among Women. *Iranian Journal of Psychology and Behavioral Sciences*, 2021; 6(25): 21-30. doi: 10.22034/PSYJ.2021.0621.0626
- 2- The comparison of Marital Satisfaction in OCD-patients and normal individuals. Rooyesh 2019; 8 (2): 81-88. doi: [10.29252/shenakht.5.6.13](https://doi.org/10.29252/shenakht.5.6.13)
- 3- Rowe C, Deledalle A, Boudoukha A. H. Psychiatric comorbidities of obsessive-compulsive disorder: A series of systematic reviews and meta-analyses; *Clinical psychology* 2021; 78(4):469-484. <https://doi.org/10.1002/jclp.23240>
- 4- Soondrum T, Wang X, Feng Gao O, Liu Q, Fan J, Zhu X. The Applicability of Acceptance and Commitment Therapy for Obsessive-Compulsive Disorder: A Systematic Review and Meta-Analysis; *Brain Sciences* 2022; 12(5):656. <https://doi.org/10.3390/brainsci12050656>
- 5- Karayagız S, Oralhan B, Oralhan Z, Turabieh H, Khan M. Modeling of Compulsive Behavior Types of Obsessive-Compulsive Disorder Patients by Using the Data Mining Method; *Computational and Mathematical Methods in Medicine* 2022; 23: 8040622. <https://doi.org/10.1155/2022/8040622>
- 6- Falsafi S.H., Asgari M., Kordestani D. Develop a structural model of obsessive-compulsive disorder based on early maladaptive schemas, attachment styles, defense mechanisms, emotional self-regulation and anxiety. *Medical journal of Mashhad University of medical sciences*, 2021; 64(3): 3208-3223. doi: 10.22038/mjms.2021.18919
- 7- Khalifat Z., Monirpour N. Explanation of Obsessive-compulsive Symptoms based on Attachment Styles and Alienation by Mediating Role of Depression. *Journal of Clinical Psychology*, 2020; 12(1): 49-62. doi: 10.22075/jcp.2020.18727.1733

- 8- Tibi L, Oppen P, Balkom J.L, Merijn A, HendriksGert J.E. Anholta, Gideon. Childhood trauma and attachment style predict the four-year course of obsessive compulsive disorder: Findings from the Netherlands obsessive compulsive disorder study; Journal of Affective Disorders, 2020; 264:206-214. <https://doi.org/10.1016/j.jad.2019.12.028>
- 9- Tahaei S.S., Banisi P. The Effectiveness of Effective communication training on attachment styles, social vitality and attitude to love in couples. New Approach in Educational Sciences, 2022; 4(2): 103-114. Doi: 10.22034/naes.2022.329040.1174.
- 10- Balbi J. Epistemological and theoretical foundations of constructivist cognitive therapies: Post-rationalist developments. doi: [10.1708/1009.10983](https://doi.org/10.1708/1009.10983)
- 11- Johnson LV. Attachment Styles: A Retrospective Study of Commercially Sexually Exploited Female Minors (Doctoral dissertation, The Chicago School of Professional Psychology). <https://www.proquest.com>
- 12- Theiss J, Mchugo M, Zhao M, Zald D. Neural Correlates of Resolving Conflict from Emotional and Nonemotional Distracters in Obsessive-Compulsive Disorder; Psychiatry Research: Neuroimaging, 2019; 284(2). <https://doi.org/10.1016/j.psychresns.2019.01.001>
- 13- Frousakis N. N. Communication in married couples: Exploring the roles of betrayal and forgiveness [PhD Dissertation]. Knoxville: U.S state. Tennessee; 2010. https://trace.tennessee.edu/utk_graddiss/690/
- 14- Madanifar M., Esmaeili M., Farahbakhsh K., Asgari M. Conceptual Expansion of Couple Conflict from the Perspective of Ethics Based on the Ethical works of Imam Khomeini. The Women and Families Cultural-Educational, 2022; 17(58): 11-41. [20.1001.1.26454955.1401.17.58.1.0](https://doi.org/10.26454955.1401.17.58.1.0)
- 15- Collins NL. Revised adult attachment scale. Behavior therapy. 1996. <https://doi.org/10.1037/t19162-000>
- 16- Rachman SJ. Obsessional-compulsive disorders. International handbook of behavior modification and therapy 1982: 749-766. Boston, MA: Springer US. https://doi.org/10.1007/978-1-4615-7275-6_24
- 17- Kajbaf M.B., Khosravi Z. The Relationship between Coronavirus Anxiety and Obsessive-Compulsive Disorder in Housewives. Journal of Clinical Psychology, 2022; 13(4): 77-85. Doi: 10.22075/jcp.2021.23119.2128. doi: [10.22075/jcp.2021.23119.2128](https://doi.org/10.22075/jcp.2021.23119.2128)
- 18- Rahim A, Civelek I, Liang FH. A process model of social intelligence and problem-solving style for conflict management. International Journal of Conflict Management. 2018 Aug 13; 29(4): 487-99. <https://doi.org/10.1108/IJCMA-06-2017-0055>
- 19- Haghighi H., Zarei E., GHaderi F. Factor structure and psychometric characteristics conflict resolution styles questionnaire Rahim (ROCI-II) in Iranian couples. Family Counseling and Psychotherapy, 2012; 2(1): 534-562. [20.1001.1.22516654.1391.2.1.7.2](https://doi.org/10.22516654.1391.2.1.7.2)
- 20- Pakoofteh A, Akhlaghi H. The relationship between attachment style, defense mechanisms and rumination with obsessive beliefs in women. Rooyesh 2018; 6 (4): 197-216. [20.1001.1.2383353.1396.6.4.4.2](https://doi.org/10.2383353.1396.6.4.4.2)

- 21- Pozza A, Dettore D, Marazziti D, Doron G. Facets of adult attachment style in patients with obsessive-compulsive disorder; Journal of Psychiatric Research 2021; 144(6):1-14. <https://doi.org/10.1016/j.jpsychires.2021.09.045>
- 22- Dessoki H, Sadek M, Abd Elrassol H, El-Sayed S. Gender-related romantic attachment and serum oxytocin level difference in adult patients with obsessive compulsive disorder; Middle East Current Psychiatry 2021; 28(1):28-76. <https://doi.org/10.1186/s43045-021-00159-9>