



## Attachment Style, Attachment Figure and Intimate Relationship among Emerging Adults with General Anxiety Disorder

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### Abstract

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In this context the present study is an attempt to explore patterns of adult attachment styles, availability of attachment figures and dimensions of intimate relationship among emerging adults with general anxiety disorders. The participants (n=30) were emerging adults diagnosed with general anxiety, and seeking treatment from IHBAS, Delhi. Relationship Style Questionnaire was used to assess the adult attachment styles and Multidimensional Relationship Questionnaire was used to assess dimensions of intimate relationship. Results showed that the participants have insecure attachment styles. They perceived their attachment figure as insensitive and unavailable. Further, it was found that participants experience multiple difficulties to establish and maintain healthy intimate relationships.

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Demographic shifts of past half century have created significant change in the life course of individuals. Young Adulthood is becoming a time period very different from what it used to be; and entrance into adulthood has been prolonged for various individual and contextual reasons. In this background, scholars have recognized that life between the ages of 18 and 25 no longer fits the traditional labels of "late adolescence" or "young adulthood". Currently this transitional period between high school and adulthood is known as Emerging adulthood. Specifically, Arnett (2000) postulate this distinct age period as new developmental phase with unique tasks and expectations. Arnett and his colleagues has done very extensive research to conceptualize this period of transition from adolescence to adulthood as a distinctive stage of human life course with specific pattern expectation and developmental task. Current academic literatures reports that the Arnett's theory is getting notable position in the field of psychological research. It encourages researchers to incorporate this theory of emerging adult in mental health researches.

Arnett (2000, 2001) theorized that emerging adulthood is a new period of human development that has emerged as part of living in an industrialized society. However, researchers have found features of emerging adulthood in various countries such as Japan Israel and China (Seiter, 2009). It can be speculated that India would be an interesting place to study emerging adulthood because, like other Industrialized societies, during the last two decades Indian population have also undergone a significant demographic changes, such as spurt in educational opportunities, jobs in information technology, demographic changes in family structure and increased the age of marriage. Review of national and international academic literature shows that till date there are only few research works about Emerging adult in Indian cultural context. Finding form Seiter's (2009) work about nature of emerging adulthood in Southern India shows that young people in India also experience the years between 18 and 25 as different stages of life course and a transition from Adolescence to adulthood.



### **Intimate relationship among Emerging adults**

From extensive researches with emerging adults over the past decade, Arnett (2001) has proposed that establishing and maintaining healthy intimate relationships and friendships are an important developmental task for Emerging adults. Erikson's (1968) Psychosocial theory also specifies that young adults are facing the intimacy versus isolation conflict. Emerging adults express higher levels of passionate feelings and intimacy than adolescents perceive their friends and romantic partners as providing more intimacy and social support in this period than in late adolescence (Melanie, 2012). Intimate relationships are an interpersonal process that involves communication of personal feelings and information to another person who responds warmly and sympathetically. Masters, Johnson, and Kolodny (1988) define intimacy as process in which two caring people share as freely as possible in exchange their feelings, thoughts and action. Intimate relationship between two people are generally marked by a mutual sense of acceptance, commitment, tenderness and trust. Emerging Adults voluntarily form relationships with friends and romantic partners. They consider their friends and their romantic partners very important persons within their social networks (Collins & van Dulmen, 2002). Qualities of these intimate relationships have been associated with happiness and higher level of psychosocial adjustment (Barry et al., 2009).

### **Intimate relationship and adult attachment process**

Intimate relationships are perceived as vital source of support during the period of Emerging adulthood. These close friends and romantic partners serve significant roles in the psychosocial development of Emerging adults with evolutionary significance. Intimate partner tend to satisfy social integration needs (i.e., companionship), feelings of worth, primarily satisfy intimacy needs and provide emotional support (Fraley & Shaver, 2000). These intimate relationships gradually develop attachment characteristics over the course of a particular relationship and with age. Researchers have considered intimate partners to become major figures in the functioning of the attachment and care giving behavioral systems. Hazan and Shaver (1987) conceptualized intimate relationship during young adulthood as an adult attachment process and intimate partner can be an attachment figure. This attachment relationship may provide critical interpersonal experiences that establish a template for all subsequent interpersonal experiences such as marriage. Hazan and Shaver (1990) define adult attachment as more complex and evolved form attachment that is determined by childhood attachment experiences. Adult Attachment relationships are emotional partnerships in which the attachment relationship is preferred, active, dyadic, reciprocal and culturally mediated.

Hazan and Shaver (1987) made significant contribution to adult attachment theory through the empirical study of adolescent and adult romantic attachment. They developed a three-paragraph self-report questionnaire to assess the three attachment categories; *secure*, *anxious-ambivalent*, and *avoidant*. These three adult attachment styles are similar to the three identified infant attachment styles. Later, Bartholomew and Horowitz (1991) revised Hazan and Shaver's three-category classification scheme. They developed a two-dimensional model for adult attachment that consisted of one's model of self and one's model of others. The resultant four attachment types include 1) *secure* attachment (positive model of self and positive model of others), 2) *preoccupied* attachment (negative model of self and positive model of others), 3) *dismissing-avoidant* attachment (positive model of self and negative model of others), and 4) *fearful-avoidant* (negative model of self and negative model of others).

Bartholomew and Horowitz (1991) also identified that each adult Attachment styles makes a distinct template for expression and experience of interpersonal relationship. *Secure adults* were shown to be comfortable with intimacy in the relationship. They were more likely to view their partners as trustworthy and less likely to worry about rejection and they seek to balance intimacy and independence in their relationship. *Preoccupied (anxious or ambivalent)*

*adults* tended to be anxious about relationships and desired greater intimacy than secure and avoidant adults. They often doubt their worth as a partner and blame themselves for their partners' lack of responsiveness. *Fear-Avoidant adults* show mixed feelings about close relationships. On the one hand, they desire to have emotionally close relationships. On the other hand they tend to feel uncomfortable with emotional closeness. They seek less intimacy from partners and frequently suppress and deny their feelings. Instead, they are much less comfortable initially expressing affection. *Dismissive-avoidant adult* show a high level of independence. The desire for independence often appears as an attempt to avoid attachment altogether. They view themselves as self-sufficient and invulnerable to feelings associated with being closely attached to others. They often deny needing close relationships .

### **Intimate relationship and Psychopathology among emerging adults**

During period of Emerging adulthood, establishing and maintaining healthy intimate relationships is an important developmental task. This tasks must be completed to make a successful transition to adulthood, and failure to master this developmental task can result in frustration and stress, which can lead to a variety of unhealthy behaviors.(Arnett, 2000). However, in reality the task of establishing and maintaining healthy interpersonal and intimate attachment relationship in emerging adulthood is more complex and multidimensional. Tanner (2002) reported that, nature of interpersonal relation has crucial role in determining the psychosocial adjustment and psychopathology in emerging adulthood. Level of unhappiness and worry from disturbance intimate relationships are higher among emerging adults as compared to older adults. This results in increased vulnerability for developing wide variety of psychosocial adjustment problems and mental disorders, more significantly anxiety disorder. Intimate relationship problems are not only important for defining psychopathology in emerging adulthood but also for understanding the origins, course and prognosis of mental health problems. Epidemiologic data indicate that emerging adults with interpersonal problems have high-risk for psychiatric disorders such as anxiety spectrum disorder, mood disorder, substance abuse disorder, etc(Tanner et al, 2007). Lifetime prevalence of any psychiatric disorder has recently been estimated at 52.4% for Emerging Adults (Tanner et al, 2007). Multiple empirical studies reported that comparing to other psychiatric disorder, emerging adults have high prevalence for Anxiety and depression(Shulenberg & Zarret, 2002). Tanner (2007) reported that "almost 1 in every 5 emerging adults (19%) meets the criteria for an anxiety disorder. The high prevalence of anxiety disorder and depression among emerging adults may be due to stress associated with the assumption of greater responsibility as well as the imbalance between their psychosocial needs and available intimate relationship". However, current academic literature highlights that researches have paid very little attention to interpersonal and related mental health problems which are unique to emerging adults. This scenario highlights dire need for a comprehensive academic effort to identify various risk factors for intimate relationship problems among this population. It also underscores the need for appreciation of etiological dynamics of various psychiatric disorders from the perspective of adult attachment style.

### **Adult attachment and Psychopathology among emerging adults**

Multiple dimensions of attachment behaviors and psychosocial environment of emerging adults are crucial to understand intimate relationship problems and related psychopathology. During the past 20 years, attachment theory has provided one of the best conceptual framework both for understanding and mending interpersonal problems and related psychopathology in both children and adults. Multiple experimental and observational studies in both the child and adult attachment styles have demonstrated the potential link of insecure attachment style and various psychopathologies(Deklyen & Greenberge,2008). These

literatures have also reported that unavailable and insensitive attachment figures could be risk factor for anxiety disorder (Bowlby,1980; Cassidy, 1995). Insecure attachments do not directly lead to psychopathology. They do so by creating a vulnerability for maladaptive interaction patterns with others.

Based on the above conceptual understanding, it can be proposed that, Adult Attachment theories would be useful in conceptualizing psychopathology among emerging adults. It provides a theoretical framework to understand interpersonal difficulties, behavioral or emotional responses to stressors and psychopathology commonly associated with this transition period. Attachment styles, availability of attachment figure and interpersonal relationships may be conceptually linked to psychosocial adjustment of emerging adults but it is still empirically unclear how these factors are inter-related and how they are also related to psychological states of emerging adulthood. In this background the present study was an attempt to explore adult attachment styles, availability of attachment figure and dimensions of intimate relationship among emerging adults with general anxiety disorder.

## Method

### Participants

The sample comprised of 30 emerging adults who have been diagnosed with general anxiety disorder according to the ICD-10 criteria. They were seeking treatment from the Out Patient Department of IHBAS, Delhi. The diagnosis of participants was confirmed by two consultant Psychiatrists. Exclusion criteria for selection were: patients diagnosed with any Neurological disorder, significant medical illness, severe psychiatric illness, and mental retardation. The demographic profile of the respondents in terms of gender, religion, education, socio- economic status (SES), family type, accommodation status, occupational status and source of income are given in Table.1. 75% of total participants had one or more comorbid psychiatric disorders particularly, Obsessive Compulsive Disorder (OCD), depressive disorder. and Adjustment Disorder. The mean duration of the diagnosed disorders (i.e. depression or/and anxiety) was 2.1 year (SD = 1.1 year) and mean duration of psychiatric treatment taken was 1.5 years (SD = 1 year). Most of the participants had undergone Pharmacotherapy and a very few of them had been taking psychotherapy.

Table 1

*Demographic profile of participants*

Socio demographic characteristics																			
	Gender		Religion			Education			Accommodation status			SES		Occupation status			Source of income		
	<input type="checkbox"/> Male	<input type="checkbox"/> Female	<input type="checkbox"/> Hindu	<input type="checkbox"/> Muslim	<input type="checkbox"/> Sikh	<input type="checkbox"/> Below 10th class	<input type="checkbox"/> Graduate	<input type="checkbox"/> Post graduate	<input type="checkbox"/> With family	<input type="checkbox"/> Hostel	<input type="checkbox"/> Staying alone	<input type="checkbox"/> class	<input type="checkbox"/> Middle class	<input type="checkbox"/> Upper class	<input type="checkbox"/> Student	<input type="checkbox"/> Employed	<input type="checkbox"/> Unemployed	<input type="checkbox"/> Self	<input type="checkbox"/> Family
(n = 30)	19	1	2	8	1	7	1	5	2	5	2	5	22	3	20	7	3	8	2

## Instruments

1. Personal Data Sheet: It consists of three parts; Part-1 contains the socio-demographic details and personal information relevant to the study including name, age, gender, education, religion, domicile, family type and family members. Part-2 comprises information about participants' psychiatric illness. And Part-3 is regarding the availability of attachment figures.
2. Adult Attachment style was assessed using the Relationship Style Questionnaire (RSQ) by Griffin & Bartholomew, 1994. It is a 30-item inventory drawn from Hazan and Shaver's (1987) attachment measure and Bartholomew and Horowitz's (1991) Relationship Questionnaire. On a 5-point scale, participants rate the extent to which each statement best describes their characteristic style in close relationships. RSQ provides a score for the respondent on each of the four adult attachment styles (viz. secure, preoccupied, dismissive and fearful).
3. Dimensions of Intimate relationship were assessed by using the Multidimensional Relationship Questionnaire (MRQ) by Snell, Schicke & Arbeiter, 1996. It is a 61-item self report measure that assesses individuals' multiple psychological tendencies associated with intimate relationships. Participants rate multiple aspects of their intimate relationship on a 5-point Likert scale. MRQ consists of twelve intimacy oriented subscales.

After translation by the standard procedure, the Hindi versions of the above questionnaires were used. Prior permission was taken from authors for doing so.

## Procedure

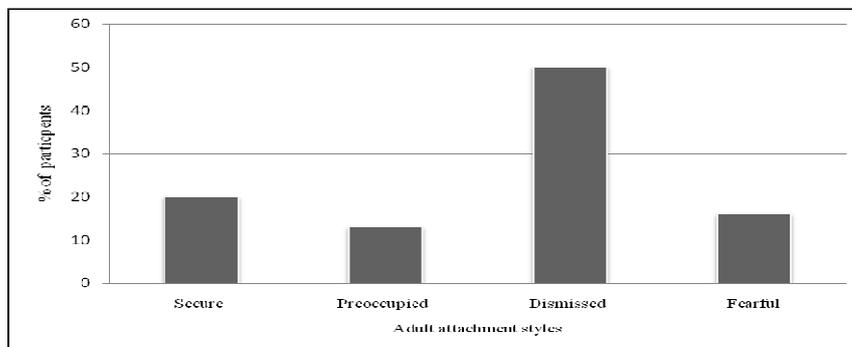
The Participants diagnosed with general anxiety disorder (GAD) were approached in the OPD at IHBAS, Delhi. On the basis of inclusion and exclusion criteria a total of 30 participants were selected for the study. They were screened out by the Personal Information Schedule. Participants and their bystanders were adequately informed and explained about the study, including the objective and nature of the study, amount of time required the benefits and costs of participation and possible implications of the study. Written informed consent was obtained from the participants. Administration of both tests was completed within single session with duration of 70 to 90 minutes. Administration of the tests was done on an individual basis. Scoring of each protocol was done as per the manual of each tool. Data was analyzed using the Statistical package for Social Sciences (SPSS.20). Descriptive statistical techniques were used.

## Results and Discussion

As a transition period from adolescence to adulthood, emerging adulthood is one of the most critical juncture in the course of interpersonal difficulties and psychopathology. Difficulties in establishing and maintaining healthy intimate relationships and associated mental health problems are higher among emerging adults as compared to older adults. This increases their vulnerability to develop anxiety and related psychopathology. In this context, the study assumed that the nature of intimate relationship and adult attachment has a vital role in determining the psychosocial adjustment and psychopathology in emerging adulthood. To attain this premise the study has the following objectives: First to explore the type of Adult Attachment styles (i.e. Secure, Preoccupied, Dismissing and Fearful) and its relation with the general anxiety disorder in emerging adults. Second, to explore the availability of Attachment Figures and its relation with the general anxiety disorder in emerging adults. Third, the dimensions of intimate relationship and its relation with the anxiety and depression in emerging adults. Major findings of the study are summarized and discussed under the following headings.

### ***Attachment figures among emerging adults with general anxiety disorder***

Over the past 20 years, adult attachment style has become one of the most important conceptual frameworks to understand the interpersonal experience and a functional system to explain the mechanisms of clinically significant symptoms. A significant majority (80%) of the participants have insecure attachment styles (50% dismissive-avoidant attachment style, 13% fearful attachment style and 16 % preoccupied attachment style respectively, See Figure-1.)



**Figure 1:** Pattern of adult attachment styles among emerging adult with anxiety and depression

These findings indicate the potential link between attachment insecurity and general anxiety disorder among emerging adults. Bartholomew and Horowitz (1991) reported that people with a dismissive-avoidant attachment style tend to suppress and hide their feelings, and they tend to deal with rejection by distancing themselves from the sources of rejection. Dismissing adults perceive that their intimate partners are not supportive and that the partner will hurt them. Similarly emerging adults with fear-avoidant style are uncomfortable in expressing their affection towards others and frequently suppress and deny their feelings (Bartholomew & Horowitz, 1991). As a result both groups face significant difficulties to establish and maintain healthy intimate relationships. This lack of a good intimate relationship and resulting poor social support renders the person vulnerable to general anxiety disorder. Similar to the above insecure attachment styles, emerging adults with preoccupied attachment style also show vulnerability for general anxiety and related psychopathology. They tend to have less positive views about themselves. They often doubt their worth as a partner and blame themselves for their partners' lack of responsiveness. Emerging adults with preoccupied attachment style incessantly worry about social acceptance and have a strong fear of rejection. This would be a potential risk factor for developing anxiety disorders and related psychopathology. The link between attachment style and psychiatric disorder (i.e. anxiety disorder) observed from the present study has been supported by multiple empirical studies (Cassidy, 1995; Mikincer & Shaver, 2003; Rigger & Han, 2009; Williams & Elwood, 2010; Mikulincer & Shaver, 2012).

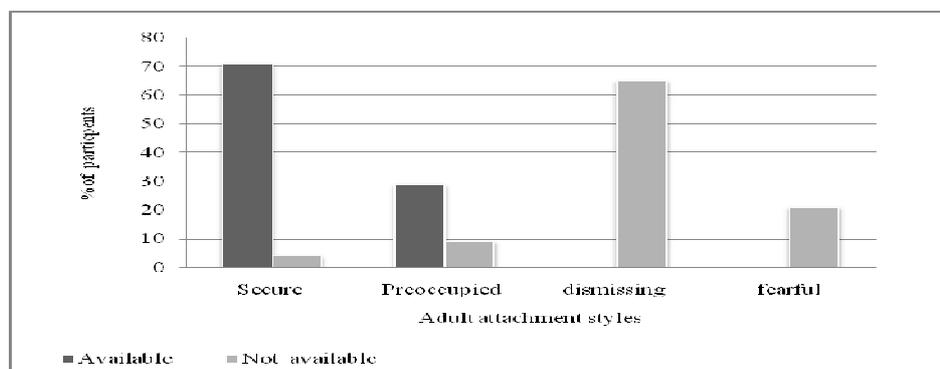
### ***Attachment figures among emerging adults with general anxiety disorder.***

As a developmental requirement, emerging adults are expected to form new voluntary attachment with an intimate partner. Establishing and maintaining an active, dyadic and reciprocal relationship is determined by various factors. As a result emerging adults may have difficulty to find an intimate partner as an attachment figure, particularly those with general anxiety disorder. Findings of the present study show that a significant majority (88%) of participants considered their mothers and friends as their attachment figures. And a very few number of participants considered their romantic partners as attachment figure. They have difficulty in forming attachment relationship with intimate/ romantic partner and in meeting their intimacy needs. From a review of similar studies (e.g. Hazan & Shaver, 1987; Fraley & Shaver, 2000; Tanner, 2002) it was found that difficulty in establishing intimate relationship

could be considered as a vulnerable factor general anxiety disorder. Further, the present study found that majority of the participants (76%) perceived their attachment figures as insensitive and unavailable. It has long been assumed that relationships with unavailable and insensitive attachment figures could be a risk factor for general anxiety disorder. According to attachment theory (Bowlby, 1969; Bretherton, 1992) inconsistent, unavailable or insensitive attachment figures hamper the development of a secure, stable mental foundation, reduce resilience in coping with stressful life events, and predispose a person to break down psychologically in times of crisis. It puts an individual at risk for general anxiety disorder.

#### *Availability of attachment figure and Adult attachment style*

The link between availability of attachment figures and individual's attachment styles is one of the central postulates of attachment theories. Bowlby and colleagues suggested that attitude, availability and sensitivity of the attachment figure have a significant role in the shaping of attachment styles. Various experimental and observational studies among children reported that attachment figures who provide consistency and availability helps to foster secure attachment. Later Bartholomew and Horowitz (1991) proposed the bidirectional link between availability of attachment figures and adult attachment styles. They identified that each adult attachment style will influence the perception regarding the availability and unavailability of attachment figures. Adults with secure attachment styles were shown to have positive views about their partner's availability and their relationship. Whereas adults with insecure attachment styles tend to feel uncomfortable with emotional closeness and they have negative views about themselves and their partner's availability. From the findings of the present study, it can be observed that 71% emerging adults with secure attachment style perceived their attachment figures as sensitive and available. While a significant majority of them with insecure attachment style perceived that attachment figures are not available. Another significant observation from the study is that 65% and 21% of those reporting unavailability of attachment figures reported dismissing attachment style and fearful attachment styles respectively. But none of the participants reporting attachment figure as available showed dismissing attachment style or fearful attachment style (see Figure.2).



*Figure 2: Availability of attachment figure and pattern of adult attachment styles among emerging adults with anxiety and depression*

These findings strongly indicate that availability of attachment figure is significantly related to the attachment style and vice-versa. Various studies described the mechanisms behind the potential link between attachment figures and attachment styles which were observed in the present study. Young adults with a dismissive-avoidant attachment style tend to suppress and hide their feelings, and they tend to deal with rejection by distancing themselves from the sources of rejection (Bartholomew & Horowitz, 1991). They view themselves as self-sufficient and some of them even view attachment figure as relatively

unimportant. Along with support from such studies, it can be understood from the findings that insecure attachment styles are linked to the unavailability of attachment figures. The causal direction of this link has to be explored through further studies.

### *Nature of intimate relationship among emerging adults with depression & anxiety*

Establishing and maintaining healthy intimate relationships is an important developmental task for emerging adults. Intimacy comprises of strong interpersonal processes that involve various emotional and cognitive factors such as relationship esteem, relationship consciousness, relationship motivation, relationship anxiety, relationship assertiveness, fear of relationship and relationship satisfaction etc. It is expected that nature of these intimate relationship factors are linked to psychosocial adjustment of emerging adults .

From the findings, (see Figure.3) it is observed that the participants scored high on relationship anxiety, fear of relationship, motivation for relationship and relationship monitoring.

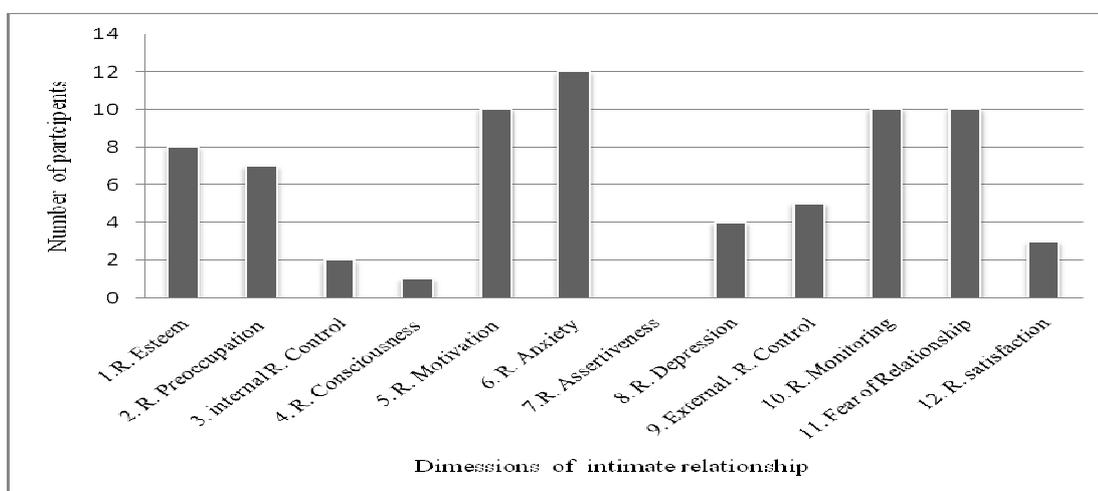


Figure 3: Dimension of intimate relationship among emerging adults with anxiety and depression

These findings indicate that emerging adults with anxiety and depression tend to be anxious about intimate aspects of their life. They tend to have fear of engaging in an intimate relationship with another individual. They are concerned about reactions to their intimate relationships for example, they are worried about the image which their intimate relationships projects to others. But at the same time they have a strong motivation to pursue intimate activity to strive to maintain the development of their intimate relationships in their life.

Findings also illustrate that emerging adults with anxiety and depression scored very low in relationship assertiveness, relationship consciousness and relationship satisfaction. Snell, Schicke and Arbeiter (1996) reported that individuals with poor relationship assertiveness experience behavioral difficulty in fulfilling their intimate desires and motivations. They tend to experience difficulty to take an instrumental, self-directed orientation to their intimate relationships and tend to experience difficulty in relying more on themselves than on others in making decisions about their relationship satisfaction. Individuals with poor relationship consciousness show difficulty in reflecting about the nature of their intimate relationships. Another important observation is that majority of emerging adults with anxiety and depression have a low score in relationship satisfaction which indicates that these individuals are less satisfied in their intimacy needs and dissatisfied with their relationships. Recent empirical research regarding the role of intimate relationship on psychosocial adjustment of emerging adults demonstrated that emerging adults whose intimate relations are

characterized by high levels of fear, conflict and poor satisfaction are more likely to be more vulnerable to anxiety disorder. Barry et al. (2009) reported that emerging adults whose friendships are characterized by low relationship satisfaction reported having higher levels of depression symptoms. Similarly poor relationship assertiveness and poor relationship consciousness negatively affect individual's competency for establishing and maintaining relationships. Hence it will act as a risk factor for anxiety and depression in emerging adults

### Conclusion and Implication of the findings

The present study was able to achieve its aim of exploring the patterns of attachment style and intimate relationship among a group of emerging adults suffering with general anxiety disorder. Though the study did not indicate a cause effect relationship or pathway to establish a link between attachment styles, availability of attachment figures and intimate relationships with anxiety disorder and related psychopathology, certainly it has highlighted the patterns of relationship and general trend of these variables among emerging adults with anxiety disorder and related psychopathology

The findings have profound implications both in terms of academic significance and clinical relevance. i.e. firstly, it would help in the development of the conceptual base to form a potential predictive pathway for psychopathology in emerging adults through the frame work of adult attachment theories and intimate interpersonal relationships. These factors being significantly neglected in psychopathology research, particularly in India. Secondly, it would provide a useful conceptual and empirical foundation to develop intervention programs for emerging adults with psychological problems to deal with attachment issues and interpersonal difficulties. These difficulties may be more amenable to therapeutic change, such as attachment based psychotherapy and interpersonal psychotherapy etc. Thirdly, the findings also provide conceptual base to develop a preventive intervention programs for emerging adults with risk for psychopathology, which would enable them to correct their maladaptive attachment pattern and vulnerable interpersonal relationships, and also increase the quality of relationships which will act as protective factor from various psychopathology.

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