



## Original Article

# Attachment Styles and Their Impact on Sleep Disturbances and Dissociation in Adults: A Comprehensive Study

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## Abstract

**Background:** Attachment theory posits that early attachment experiences significantly shape an individual's emotional well-being and relationships throughout life. This study explores the complex relationships between attachment styles, sleep disturbances, and dissociation in adults.

**Methodology:** A sample of 50 participants with varying attachment styles was surveyed using standardized measures of attachment, sleep disturbances, and dissociation. Statistical analysis, including correlation tests, was conducted to investigate the relationships between these variables.

**Results:** The findings indicate a strong positive correlation between anxious attachment and sleep disturbances, highlighting the lasting impact of childhood attachment experiences on sleep quality. Surprisingly, a negative relationship between anxious attachment and dissociation was observed, underscoring the intricate nature of attachment-related coping strategies.

**Conclusion:** This study underscores the enduring consequences of early attachment experiences, emphasizing their influence on adult well-being. Recognizing these connections is vital for mental health professionals and practitioners in tailoring interventions to address attachment-related challenges. Further research is needed to deepen our understanding of these relationships and refine therapeutic strategies.

## Keywords

Attachment Theory, Anxious Attachment, Sleep Disturbances, Dissociation, Adult Well-Being.



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## Introduction

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Attachment, a fundamental aspect of human development, reflects the emotional bond formed between a child and their primary caregiver<sup>1</sup>. This connection serves as a secure base from which individuals explore the world and manage their emotions. According to attachment theory, children internalize their experiences in interactions with their primary caregivers and develop mental representations of these caregivers. These representations, known as internal working models, are subsequently used to navigate relationships with others throughout life. Early relationships with parents, including parental rearing styles and the household atmosphere, influence the formation of these internal working models. However, when this attachment is not securely established due to the inconsistency or unavailability of parents or caregivers, it can lead to an 'anxious attachment'<sup>2</sup>. Anxious attachment represents a rupture in the parent-child connection, resulting in psychological complexities that extend across various domains of life<sup>3</sup>.

Attachment theory posits that an individual's attachment style is shaped by their interactions with primary caregivers and other significant individuals in their lives. These attachment styles then become integrated into an individual's interpersonal interactions, serving as a foundation for their future relationships<sup>4</sup>. They contribute to an individual's self-perception views of others, known as internal working models, and their generalized perspective on human bonds and connections<sup>3,5</sup>.

Repetitive experiences of neglect and inconsistent care from attachment figures increase the likelihood of developing an insecure attachment style. Consequently, individuals with such attachment styles tend to form negative working models of

themselves, others, and relationships in general. Those with anxious attachment tendencies often struggle with heightened distress and difficulties in regulating their emotions<sup>6,7</sup>.

Research emphasizes that anxious attachment can lead to a form of developmental trauma<sup>8</sup>. Parental unavailability, inconsistency, or negative behavior and attitudes toward their children can result in trauma during childhood. The early childhood phase is particularly susceptible to experiencing traumatic events<sup>9</sup>. Studies suggest that traumatic experiences during childhood, including neglect and abuse, have enduring effects on adult life, especially in the context of romantic relationships<sup>4</sup>.

Research findings indicate gender differences in attachment organization, with more men exhibiting an avoidant attachment style and more women falling into the anxious attachment category<sup>10</sup>. Research also underscores the strong connection between anxious attachment styles in females and sleep disturbances. There is a notable link between mental health disturbances and sleep problems, particularly in females<sup>11</sup>. Adult females often adopt an anxious approach in their romantic relationships, while males tend to lean toward an avoidant approach<sup>12</sup>, illustrating how females may tend to exhibit an anxious attachment style.

Attachment insecurity in intimate adult relationships is associated with increased physical illness and psychological issues<sup>13</sup>. Both physical health conditions and mental disorders are recognized factors linked to disruptions in sleep patterns<sup>14</sup>. The relationship between sleep disturbances and these conditions is intricate because sleep problems are often considered an outcome of various health and mental disorders<sup>15</sup>.

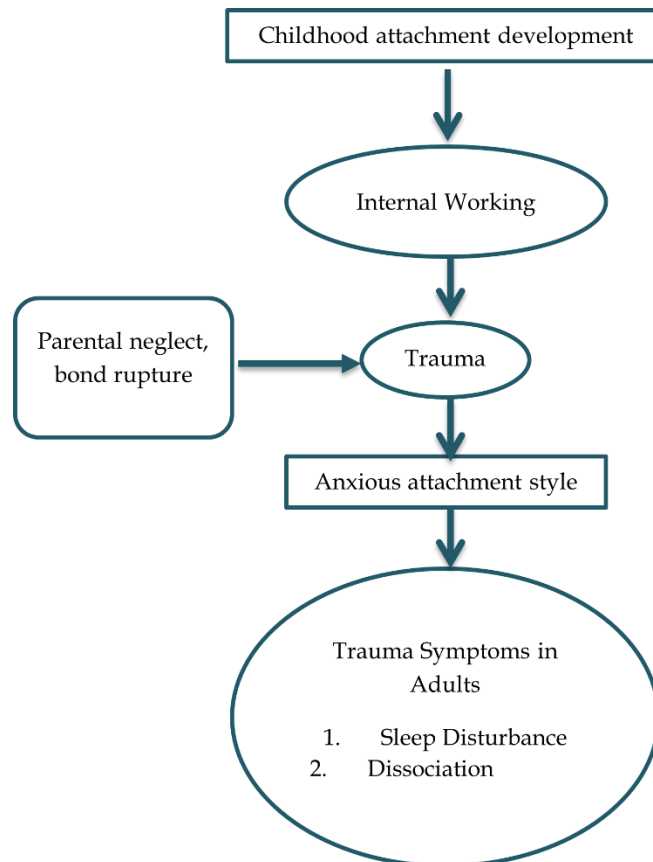
Attachment insecurity has been identified as a potential contributory factor to sleep problems<sup>16</sup>. The attachment system becomes active in situations that increase vulnerability, such as loneliness, and attachment bonds reduce vulnerability during sleep<sup>17</sup>. While a secure attachment style may promote restful sleep, an insecure attachment style may heighten feelings of unease and alertness, interfering with the ability to sleep peacefully.

Moreover, parental behaviors that foster secure attachment, such as providing comfort in times of distress, may facilitate the regulatory mechanisms that promote restful sleep. Some studies have indicated that insecure maternal attachment can influence and lead to the development of sleep disorders in infants<sup>18</sup>. Another notable study suggests that attachment styles developed during childhood can impact sleep quality. Children with more insecure attachment styles tend to exhibit greater resistance and fussiness during bedtime routines compared to children with secure attachment styles, as observed by their mothers<sup>19</sup>. Children experiencing sleep difficulties are more likely to have insecure attachment styles<sup>18</sup>. Additionally, women who experience severe separation anxiety, which hampers their ability to establish secure attachment, are more likely to have infants who wake up more frequently at

night and experience poorer sleep quality<sup>20</sup>. In late adolescence, the relationship between insecure attachments and sleep disruptions persists<sup>21</sup>, extending into adult married couples and the elderly<sup>16</sup>.

Sleep disturbances and dissociation are trauma symptoms that assess distress in adults stemming from childhood traumatic experiences<sup>22</sup>. Both sleep problems and dissociation are prevalent in the population<sup>23</sup>, leading researchers to study these variables together. There is a connection between dissociative symptoms and individuals reporting vivid dreams, nightmares, recurrent dreams, and other unusual sleep issues<sup>24</sup>. Dissociation is one of the coping strategies used to deal with the stress of unhealthy attachment<sup>8</sup>. Research findings suggest that traumatic events may contribute to the link between disorganized attachment during childhood and later dissociation<sup>25</sup>. Individuals with high attachment anxiety, avoidance, or both tend to experience feelings of insecurity and may adopt secondary attachment strategies, which include either dissociation or hyper-activation of their attachment system as a means of coping with challenges<sup>26</sup>.

Research findings consistently show a strong connection between emotional abuse, dissociation<sup>21,27,28</sup>, and insecure attachment<sup>29</sup>.



**Figure 1: Theoretical Framework**

**Childhood Attachment Development:**

Humans possess an internal system known as the attachment behavioral system. This system serves as a predictor and motivator for seeking care and affection from caregivers when needed<sup>1</sup>. When individuals receive adequate care from their attachment figures during times of need, they develop a secure attachment. This secure attachment leads individuals to believe that the world is a safe place free from threats, that attachment figures provide support during times of distress, and that people can be relied upon for interaction.

**Internal Working Models and Trauma:**

The formation and perception of a secure and safe environment are based on internal working models, which are mental representations of how individuals perceive

the world and themselves<sup>30</sup>. These internal working models can become distorted when negative interactions with caregivers, such as neglect and avoidance during times of distress, occur. Conversely, when individuals consistently fail to receive care when needed and experience rejection from attachment figures throughout childhood interactions, they may develop an insecure attachment style<sup>3</sup>. Issues with adult relationships often stem from the development of an insecure attachment style, which results from traumatic interactions with caregivers during childhood<sup>1</sup>.

**Dissociation and Sleep Disturbances; Subscales of Trauma Symptom:**

Parental neglect and disrupted attachment patterns are significant factors in the

development of psychopathological conditions in children, such as dissociative identity disorder, which is an attachment disorder<sup>31</sup>. A disorganized attachment style is significantly associated with higher levels of dissociation<sup>32</sup>. Insecure attachment styles make individuals feel threatened and vulnerable in relationships, which contributes to sleep difficulties experienced by anxiously attached individuals<sup>3</sup>.

In line with our research objectives, we formulated two hypotheses to guide our investigation. Firstly, we hypothesized that there exists a significant and noteworthy relationship between anxious attachment and sleep disturbances among the participants. This hypothesis stemmed from previous literature suggesting a connection between attachment styles, particularly anxious attachment, and disruptions in sleep patterns. Secondly, we hypothesized a significant relationship between anxious attachment and dissociation despite this relationship being expected to be negative. This hypothesis was rooted in the understanding that attachment styles can influence coping strategies, such as dissociation, as individuals navigate challenges related to their attachment patterns. These hypotheses served as the basis for our research and guided our exploration of the intricate relationships between attachment styles, sleep disturbances, and dissociation in adults.

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## Methodology

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This study employs a quantitative research approach, utilizing surveys as the primary data collection method. A sample of 50 individuals were selected from various universities and wellness centers for this study. Participants were chosen using a convenient purposive sampling method. The age range of the participants was limited to 18 to 30 years. All participants were required

to be female, capable of reading and comprehending English, and exhibit high scores on the insecure, anxious attachment style.

The inclusion criteria for participant selection in this study were carefully defined. Individuals eligible to participate were required to fall within the age range of 18 to 30 years and identify as female. Proficiency in reading and comprehending the English language was also a prerequisite, ensuring that participants could effectively engage with the study materials and provide meaningful responses. Additionally, participants needed to exhibit high scores on the anxious attachment style, reflecting a specific focus on individuals with this attachment pattern for the research investigation. These criteria were established to create a targeted and relevant participant group for the study's objectives.

### Measures:

**Consent Form/Demographic Sheet:** Participants were asked to complete consent forms and demographic questionnaires.

**Adult Attachment Revised Scale (AAS):** The AAS, initially developed in 1990 by Hazen & Shaver (1987) and Levy & Davis (1988), consists of 18 items. It measures three dimensions of relationship attachment: closeness, dependence, and anxiety.

**Trauma Symptom Checklist:** The TSC-40 is a research tool used to assess various symptoms in adults associated with traumatic experiences. It is an updated version of the earlier TSC-33 (Briere & Runtz, 1989). The TSC-40 demonstrates good reliability, with subscale alphas typically ranging from .66 to .77 and full-scale alphas averaging between .89 and .91. It comprises six subscales: Dissociation, Sleep

Disturbance, Anxiety, Depression, Sexual Abuse Trauma Index, and Sexual Problems.

**Procedure:**

Participants were first provided with informed consent forms and demographic questionnaires. Subsequently, they completed the Adult Attachment Revised Scale. Those participants who exhibited insecure, anxious attachment styles were further assessed using the Trauma Symptom Checklist to determine their scores on sleep disturbance and dissociation. SPSS software was employed to analyze the correlation between anxious attachment, sleep disturbance, and dissociation, which represent subscales of trauma symptoms.

**Result**

Table 1 presents demographic information for the participants in percentage form. Out of 150 potential participants, 50 were selected based on scoring a minimum of 24 out of 30 on the Anxious Attachment subscale of the Adult Attachment Revised Scale (AAS). All selected participants were female. Specifically, 8 participants scored 24, 5 scored 25, 30 scored 26, and 8 scored 27 out of the maximum score of 30 on the subscale. The age distribution was as follows: 15 participants were aged 18-20, 18 were aged 21-23, and 17 were aged 24-26. Regarding education, 9 participants had completed 12 years, approximately 24 had completed 14 years, and 17 participants had completed 16 years of education.

**Table 1: Descriptive Statistics of Demographic Information of Participants (N=50).**

Category	Measure	%
Age	18-20	30
	21-23	36
	24-26	34
Gender	Male	0
	Female	100
Education in years	12 years	20
	14 years	46.67
	16 years	33.33
Anxious Attachment Scores	27/30	16
	26/30	60
	25/30	10
	24/30	14

The results reveal a strong positive correlation between sleep disturbances and anxious attachment style, with a correlation coefficient of 0.694 ( $p = 0.02, p < 0.05$ ). Additionally, a significantly moderate relationship exists between anxious attachment and dissociation, with a correlation coefficient of -0.518 ( $p = 0.03, p < 0.05$ ). It's worth noting that this relationship is negative, consistent with previous research findings (Table 2).



**Table 2: Correlation of Anxious Attachment, Sleep Disturbance & Dissociation.**

Variable	<i>n</i>	1	2	3
<b>Anxious Attachment</b>		1	-	
<b>Sleep Disturbance</b>	50	0.694**	1	-
<b>Dissociation</b>		-0.518**	-	1

\*\*Correlation is significant at the 0.01 level (2-tailed)

The results reveal a strong positive correlation between sleep disturbances and anxious attachment style, with a correlation coefficient of 0.694 ( $p = 0.02$ ,  $p < 0.05$ ). Additionally, a significantly moderate relationship exists between anxious attachment and dissociation, with a correlation coefficient of -0.518 ( $p = 0.03$ ,  $p < 0.05$ ). It's worth noting that this relationship is negative, consistent with previous research findings.

## Discussion

The present study delved into the association between attachment insecurity and sleep disturbances. The findings suggest a link between anxious attachment and sleep disruption, a pattern that may take root in early childhood and persist over time. Individuals exhibiting an insecure, anxious attachment style appear more susceptible to experiencing sleep disturbances<sup>18</sup>.

This connection between attachment style and sleep issues mutually influencing each other is supported by a body of research focused on infants and children<sup>33</sup>. The burgeoning data suggests that the relationship between sleep quality and attachment style begins to form early in life and endures. Moreover, it seems that different aspects of this intricate relationship may vary in significance depending on the developmental stage. This is evidenced by research examining the link between sleep problems in adult couples. Inadequate sleep was found to be associated with more negative perceptions of partner interactions, suggesting that sleep interruptions can impact a person's ability to regulate relationships<sup>34</sup>.

Additionally, anxiously attached individuals often hold negative views of themselves, leading to heightened self-doubt and

ruminative thinking, which can contribute to sleep disturbances. Overthinking is a prominent symptom of anxiety, which is closely linked with sleep disruptions<sup>23</sup>.

Another study suggests that females with insecure attachment tend to employ unhealthy coping strategies such as self-punishment and excessive worry. These coping strategies are associated with emotional and mental issues<sup>35</sup>. Research indicates that females often feel that worry is beyond their control, leading to increased levels of worry and stress<sup>36</sup>. Elevated stress levels can interfere with sleep by prolonging the time it takes to fall asleep and disrupting sleep continuity<sup>37</sup>.

The second hypothesis of our study posited a significant relationship between anxious attachment and dissociation, a relationship supported by our results. However, it's noteworthy that this relationship is negative, implying that more anxiously attached individuals exhibit fewer dissociative symptoms.

This negative correlation aligns with previous research findings. Individuals with high scores in avoidant attachment often tend to adopt deactivating strategies in their relationships, such as dissociation. These strategies involve avoiding closeness, suppressing attachment needs, and evading

dependency in relationships. These behaviors often develop in response to attachment figures who disapprove of or penalize emotional closeness and the expression of needs or vulnerabilities<sup>3</sup>.

Conversely, individuals with high levels of attachment anxiety are prone to employ hyper-activating strategies. These strategies involve intense efforts to seek closeness, support, and affection, coupled with uncertainty about receiving these resources. Feelings of frustration and anger can arise when these expected resources are not provided<sup>38</sup>. Consequently, there exists a negative relationship between anxious attachment and dissociation, as individuals with anxious attachment find it challenging to detach themselves from the overwhelming fear of abandonment and the need for constant closeness.

The inconsistent parenting patterns experienced by children can lead them to perceive themselves as unlovable, prompting anxiously attached individuals to seek excessive attention and clinginess when seeking support from others. Conversely, those characterized by an avoidant attachment style often have a history of caregivers rejecting them, leading them to avoid seeking closeness and dissociating their need for love as they find safety in their independence<sup>39</sup>.

One limitation of this study is the scarcity of longitudinal research involving adults or the elderly. This limitation hinders our ability to comprehensively assess the relationship between sleep disturbances and attachment styles over extended periods, leaving us with a limited understanding of the various underlying factors that may affect this relationship over time.

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## Conclusion

In summary, our study reveals that anxious attachment styles stemming from early childhood experiences are closely linked to sleep disturbances in adulthood. While a surprising negative relationship between anxious attachment and dissociation was discovered, it underscores the intricate nature of attachment-related coping mechanisms. These findings emphasize the lasting impact of attachment experiences on adult well-being, shedding light on the need for targeted therapeutic interventions that address the root causes of sleep disruptions and dissociation. Understanding these connections can significantly benefit mental health professionals and practitioners in providing effective support and treatment for individuals with attachment-related challenges. Further research is essential to delve deeper into these relationships and refine intervention strategies.

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