

Emotion regulation in emerging adult couples: Temperament, attachment, and HPA response to conflict

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Abstract

Difficulty managing the stress of conflict in close relationships can lead to mental and physical health problems, possibly through dysregulation of the hypothalamic-pituitary-adrenal (HPA) axis, the neuroendocrine stress response system. Temperament, an individual characteristic, and attachment, a dyadic characteristic, have both been implicated in emotion regulation processes and physiological reactivity, yet there is no clear consensus on how the two work together to influence the stress response, especially after childhood. The present study investigated the ways in which temperament and attachment together predict HPA response in emerging adult couples. Analyses using multilevel modeling (HLM) found that partners' dyadic fit on attachment avoidance impacted females' cortisol response patterns, and attachment avoidance further moderated the effect of males' emotionality on both their own and their partners' cortisol. Results are discussed in terms of emotional coregulation processes in romantic attachment.

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1. Introduction

Although the experience and regulation of emotion has generally been considered a personal phenomenon, there is growing recognition of the importance of interpersonal relationships for the amplification and repair of emotional states (Diamond and Aspinwall, 2003). More attention has been focused on psychobiological regulation processes in infant-caregiver dyads (e.g., Schore, 1996), yet intimate partnerships throughout life provide a context for the regulation of emotional and physical well-being (Cacioppo, 1994; Hofer, 1984), making biobehavioral coregulation in adult romantic dyads a key target for further study. The way in which a person or couple responds to stressful situations has important implications for mental and physical health; an inability to cope with the stresses that inevitably arise within relationships sets the stage for distressed relationships, which in turn increase the risk for internalizing disorders (Coyne et al., 2002; Davila et al., 2003) and morbidity/mortality (e.g., Helgeson, 1991; Hibbard

and Pope, 1993). Physiological stress response, as measured by the output of the hypothalamic-pituitary-adrenal (HPA) axis, offers a promising route by which relationship stress might lead to such disorders, given that dysregulation of this system consistently characterizes depressive and/or anxiety disorders (e.g., Butler and Nemeroff, 1990; Young et al., 2004), as well as impaired cardiovascular and immune function (Glaser and Kiecolt-Glaser, 1994; Kuhn, 1989). To understand differences in couples' responses to conflict and the health implications of these responses, we propose a biopsychosocial model of emotion regulation, in which a combination of intra- and interpersonal characteristics shapes one's response to stressors across various psychobiological systems. In this paper, we seek to illuminate a central part of the pathway from interpersonal stress to health outcomes by investigating how components of romantic partners' emotion regulation systems work together within and across partners to predict their neuroendocrine response to conflict.

Two variables that should be important for regulating emotion in relationship conflict are temperament, an individual characteristic that dictates innate emotionality, and attachment, a dyadic characteristic that describes how a person uses close relationship partners to attenuate distress in the face of threat.

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Although these two variables have often been linked, both conceptually and empirically, there is no clear consensus on how the two factors uniquely contribute to stress response, especially on the physiological level. Additionally, most of the research on temperament and attachment focuses on infants or children, rather than on adolescents or adults, even though these factors are assumed to remain relatively stable and influential across development. The current study was designed to address this gap in the emotion regulation literature by testing effects of emerging adult partners' temperament and attachment on their HPA activity during conflict, considering both main effects and interactions within and across partners.

1.1. HPA response and emotion regulation in couples

The HPA axis releases the adrenocortical steroid hormone cortisol in response to stress, particularly situations that involve social threat and an element of uncontrollability (Dickerson and Kemeny, 2004). The relevance of this system as a marker of emotion regulation is suggested by its association with subjective distress (Miller et al., 2007). In addition, dysregulation of the HPA system has commonly been found in depression and/or anxiety disorders (e.g., Gold et al., 1988; Young et al., 2004), which entail a breakdown of the capacity to regulate negative emotion. In particular, increased cortisol reactivity to stressful situations and/or slower recovery to baseline levels, as well as chronically elevated cortisol levels, have been implicated in internalizing disorders (e.g., Heim et al., 1998; Miller et al., 2007). These features, suggestive of stress hyperactivation, also mark risk for multiple physical ailments, such as diabetes, hypertension, cancer, and cardiovascular disease (McEwen, 1998).

Romantic relationships provide a context for the occurrence and consequences of psychosocial stress that activates the HPA system, and ineffective physiological regulation may be both driven by and a contributor to distressed relationships. A series of studies by Kiecolt-Glaser and colleagues (Heffner et al., 2004; Kiecolt-Glaser et al., 2003; see also Kiecolt-Glaser and Newton, 2001, for a review) have found that partners' HPA reactivity/recovery patterns relate to their behavior in conflict interactions and relationship quality, with differences in newlyweds' HPA reactivity prospectively predicting troubled marriages 10 years later. Given these links among exaggerated physiological stress response, disturbed relationships, and poor mental/physical health, we must begin to explore specific pathways of risk for HPA dysregulation and associated negative outcomes in young couples. Evidence from the above studies points to a role for both individual partners' emotional characteristics and their ability to use one another for support in explaining HPA differences during conflict, suggesting that temperament and attachment may each contribute to couples' stress response.

1.2. Temperament and emotion regulation

Temperament refers to a set of biologically based traits that appear early in life and show at least moderate consistency throughout life (Vaughn and Bost, 1999). As a psychobiological

variable, temperament both influences and is influenced by physiological responses to events (Gunnar and Mangelsdorf, 1989). Measures of temperament often include some measure of emotionality (e.g., Buss and Plomin, 1984; Goldsmith and Campos, 1986; Rothbart, 1989; Thomas and Chess, 1977), with a focus on the tendency toward negative emotional experience and/or expression. The emotionality dimension taps a weakness in the regulation of negative affect that may involve more extreme and/or extended negative reactivity to internal or external stimuli. At the physiological level, emotionality has been found to relate to higher cortisol reactivity to stress (Gunnar et al., 1989; van Bakel and Riksen-Walraven, 2004; Zobel et al., 2004). This relationship may be buffered by social context, though, with children high in negative emotionality more likely to show cortisol elevations under conditions of less than optimal care (Gunnar and Donzella, 2002). The role of emotionality in adult stress reactivity/recovery remains largely unexplored, though the definition of temperament suggests that it remains an important factor in emotion regulation throughout life. Study in older samples is needed to clarify what emotionality means for mature psychobiological regulation, as well as how relationship factors may buffer or exacerbate its effects.

1.3. Attachment and emotion regulation

The way in which an individual uses relationships with others in stressful situations may also be conceptualized as a factor in emotion regulation, and attachment is sometimes discussed as an affect regulation strategy. Bowlby's (1973) definition of attachment as an evolutionarily adaptive bond between infant and caregiver has been extended to other close relationships, including romantic relationships (Hazan and Shaver, 1987), in which the attachment figure provides the sense of "felt security" important for the successful regulation of negative affect (Sroufe and Waters, 1977). Although early approaches to attachment quality distinguished people in terms of categories, more recent approaches find that individual differences in attachment can best be captured by the two dimensions of *anxiety*, which refers to desire for closeness coupled with anxiety about abandonment, and *avoidance*, which refers to discomfort with closeness and dependency (Fraley et al., 2000). These attachment styles are associated with distinct emotion regulation strategies; whereas secure individuals are able to acknowledge negative feelings and cope with them with the help of others, avoidant individuals attempt to deactivate and deny negative emotion, and anxious-ambivalent individuals show a hyperactivation of distress (Shaver and Mikulincer, 2002).¹

In the context of relationships, secure partners are better able to seek and provide support in anxiety-producing situations

¹ These patterns are thought to result from the internalization of caregiver response to negative emotion, making attachment style to some extent an individual characteristic. At the same time, these strategies always imply a response (adequate or inadequate) from the attachment partner and are most clearly realized in relationship interactions, which is why we consider it a dyadic aspect of emotion regulation.

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