

The relationship between attachment styles and Cluster B personality disorders in prisoners and forensic inpatients

Irma G.H. Timmerman^{a,*}, Paul M.G. Emmelkamp^b

^a *Clinical psychologist at Forensic Psychiatric Center Veldzicht, PO Box 20, 7707 ZG Balkbrug, The Netherlands*

^b *Clinical Psychology at the Department of Clinical Psychology at the University of Amsterdam, The Netherlands*

Received 23 April 2003; received in revised form 16 July 2004; accepted 9 April 2005

Abstract

The relationship between attachment styles and Cluster B personality disorders were examined among prisoners, forensic inpatients and controls from the general population. Forensic inpatients and prisoners reported significantly less frequently the secure attachment style (Relationship Questionnaire) and significantly more the fearful attachment style compared to the normal controls. Both forensic groups could not be distinguished from each other. Further, prisoners, forensic inpatients and controls could not be differentiated on the basis of the dismissing nor the preoccupied attachment style. With respect to personality pathology, almost all relationships between Cluster C pathology, on the one hand, and attachment styles, on the other, were significant. Cluster A pathology was clearly related to the secure and fearful attachment style. With respect to cluster B pathology, the results were more specific but also less clear. The results were strongly dependent on the way the personality pathology variables were treated, as either categorical or dimensional. None of the cluster B personality pathology variables were associated with the fearful attachment style and histrionic personality pathology was negatively associated with the dismissing attachment style. Antisocial personality features were associated with a dismissing attachment style. Borderline personality pathology, when treated as a categorical variable, was significantly related to the preoccupied attachment style. These results show that (1) cluster A and cluster C pathology are more strongly associated with attachment than cluster B, (2) treating personality data as either dimensional or categorical is of major importance to the conclusions that can be drawn, (3) it is important to control for the influence of co-morbid personality pathology when examining the relationship between (Cluster B) personality pathology and attachment.

© 2005 Elsevier Inc. All rights reserved.

Keywords: Attachment; Personality disorder; Cluster B; Forensic inpatients

1. Introduction

Attachment is considered an important etiological factor in the development of personality disorders. Bowlby defines his attachment theory as ‘a way of conceptualizing the propensity of human beings to make strong affectional bonds to particular others and of explaining the many forms of emotional distress and personality disturbance, including anxiety, anger, depression, and emotional detachment, to which unwilling separation and loss give rise’ (Bowlby, 1977, page 201). Primary caretakers play an important role in the development of the attachment representations of the child. The

* Corresponding author.

E-mail address: i.timmerman@veldzicht.dji.minjus.nl (I.G.H. Timmerman).

child learns to organize the information about itself and its social environment and develops an internal network of attachment that directs feelings and behaviors later on in life. When the attachment pattern is insecure, problems later on in life are likely to occur. According to Bowlby, emotionally detached individuals (such as in psychopathy), who are incapable of maintaining a stable affectional bond with anyone are often delinquent or suicidal.

Based on Bowlby's attachment theory, several theorists have postulated different types of attachment styles, though on first sight they do show resemblance. [Main and Goldwyn \(1991\)](#) classify attachment styles as: (1) secure–autonomous, (2) insecure–dismissing, (3) insecure–preoccupied and (4) unresolved with respect to loss of trauma. [Bartholomew and Horowitz \(1991\)](#) distinguish four attachment types that are conceptualized on two dimensions: concept of self and concept of others. *Secure attachment* is characterized by a valuing of intimate friendships, the capacity to maintain close relationships without losing personal autonomy, and a coherence and thoughtfulness in discussing relationships and related issues. The *dismissing attachment* style is characterized by a downplaying of the importance of close relationships, restricted emotionality, an emphasis on independence and self-reliance, and a lack of clarity or credibility in discussing relationships. The *preoccupied attachment* style is characterized by an over-involvement in close relationships, a dependence on other people's acceptance for a sense of personal well-being, a tendency to idealize other people, and incoherence and exaggerated emotionality in discussing relationships. The *fearful attachment* is characterized by avoidance of close relationships because of fear of rejection, a sense of personal insecurity and a distrust of others.

The typology of [Bartholomew and Horowitz \(1991\)](#) originates from a social psychological tradition, in which attachment is defined as an interpersonal concept, whereas the classification of [Main and Goldwyn \(1991\)](#) stems from developmental psychology in which attachment refers to intrapsychic processes ([Zeijlmans van Emmichoven, 2000](#)). The measures that are derived from both views, the Adult Attachment Interview (AAI; [Main & Goldwyn, 1994](#)) and the Relationship Questionnaire (RQ; [Bartholomew & Horowitz, 1991](#)), respectively, are therefore not regarded as measures of identical constructs ([Zeijlmans van Emmichoven, 2000](#)). This implies that when reviewing the literature on the relationship between attachment and criminality and personality disorders (PDs), one has to take note of the attachment measure that is reported on.

Several empirical studies have been conducted on the relationship between attachment on the one hand and personality disorders and delinquent, criminal and/or aggressive behavior on the other hand. In a review article on attachment relationships among children with aggressive behavior problems it was concluded that disorganized attachment behaviors (unresolved) predict aggression in school-age children with other family factors controlled for ([Lyons-Ruth, 1996](#)).

In their meta-analysis of 30 studies on the relationship between attachment and psychopathology [IJzendoorn and Bakermans-Kranenburg \(1996\)](#) concluded that there are no systematic relations between clinical diagnosis and type of insecure attachment as assessed by the AAI. More recently however, a few studies have found specific associations. For example, [Rosenstein and Horowitz \(1996\)](#) found that psychiatrically hospitalized adolescents, showing a dismissing attachment organization according to the AAI, were more likely to have a conduct or substance abuse disorder, narcissistic or antisocial personality disorder. Patients with a preoccupied attachment organization were more likely to be diagnosed with an obsessive–compulsive, histrionic, borderline or schizotypal PD.

Inpatients with a borderline PD diagnosis according to the AAI were characterized more frequently by an unresolved attachment style than matched controls ([Fonagy et al., 1996](#)). In another study significant differences on several self-report measures for attachment styles were found between borderline patients and students, primarily females ([Sack, Sperling, Fagen & Foelsch, 1996](#)). Borderline patients were found to endorse avoidant, hostile, and resistant/ambivalent attachment styles significantly more frequently than college students according to the Attachment Style Inventory ([Sperling & Berman, 1991](#)). According to another self-report attachment instrument, the Reciprocal Attachment Questionnaire (RAQ; [West, Sheldon, & Reiffer, 1987](#)), the borderline group was characterized by angry withdrawal. A similar finding was found in a study among male forensic borderline outpatients and outpatient controls who were characterized by avoidant/schizoid PDs: the forensic patients reported an anxious style of attachment that is characterized by angry withdrawal as measured with the RAQ ([West et al, 1987; West, Rose, McDonald & Hashman, 1996](#)).

No clear pattern of relationships between attachment as assessed with the AAI and PDs was found in a group of 40 male forensic patients ([van IJzendoorn et al., 1997](#)). Though more insecure attachment styles were found than in non-clinical samples, the distribution of attachment styles could not be distinguished between the forensic sample and other clinical samples. Further, subjects were difficult to classify in one of the three clusters of the AAI (Autonomous,

متن کامل مقاله

دریافت فوری ←

ISIArticles

مرجع مقالات تخصصی ایران

- ✓ امکان دانلود نسخه تمام متن مقالات انگلیسی
- ✓ امکان دانلود نسخه ترجمه شده مقالات
- ✓ پذیرش سفارش ترجمه تخصصی
- ✓ امکان جستجو در آرشیو جامعی از صدها موضوع و هزاران مقاله
- ✓ امکان دانلود رایگان ۲ صفحه اول هر مقاله
- ✓ امکان پرداخت اینترنتی با کلیه کارت های عضو شتاب
- ✓ دانلود فوری مقاله پس از پرداخت آنلاین
- ✓ پشتیبانی کامل خرید با بهره مندی از سیستم هوشمند رهگیری سفارشات