

Relationships of Attachment Behaviors with Depression and Marital Quality among Women in Ahvaz, Iran: Mediating Role of Self-esteem

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Abstract

Background: Depression could negatively impact the mood, behavior, attitude, and efficiency of women and massively harm family performance. The present study aimed to investigate the mediating role of the self-esteem in the association of attachment behaviors with depression and marital quality in women in Ahvaz, Iran.

Methods: The study was descriptive-correlational estimated through structural equation modeling. The statistical population was made up of married women with at least high school education in Ahvaz, Iran in 2021. Convenience sampling was used to choose 340 individuals. The instruments included the Quality Marriage Index (QMI), Beck Depression Inventory (BDI-13), the Brief Accessibility, Responsiveness, and Engagement (BARE) Scale, and the Rosenberg Self-Esteem Scale (RSES). A path analysis approach was adopted to evaluate the proposed model and the indirect relationships were examined through bootstrapping in AMOS version 24.

Results: The mean and standard deviation (SD) of depression, marital quality, and self-esteem were 5.78 ± 2.86 , 28.58 ± 6.48 , and 7.22 ± 2.93 , respectively. Depression was negatively correlated with marital quality ($r = -0.78$) and self-esteem ($r = -0.72$) in women. The direct paths from attachment behaviors to self-esteem ($P < 0.001$) and from self-esteem to depression ($\beta = -0.53$, $P < 0.001$) and marital quality ($\beta = 0.18$, $P < 0.001$) were significant. The indirect paths from attachment behaviors to depression and marital quality through self-esteem were also significant ($P < 0.05$).

Conclusion: The suggested model suited the data well. The relationship between attachment behaviors, depression, and marital quality in women was mediated by self-esteem. Workshops on boosting self-esteem and outlining its advantageous effects on women's mental health are advised.

Keywords: Depression, Quality of life, Behavior, Self-concept, Women

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1. Introduction

Family is the first influential institution in life and the backbone of a healthy, dynamic, and excellent society. A healthy society requires particular attention to the health of families. Marital interactions are specific and influence different aspects of life. Consequently, marital conflicts would affect dissatisfaction with the partner (1, 2). A significant factor in determining the overall quality of family ties is the marital quality of couples' relationships (3). Adjustment, pleasure, happiness, solidarity, and commitment are just a few of the relationship dimensions that make up this multi-dimensional notion (4, 5). Depression is a common and disabling psychological disorder with an occurrence rate of 2-10% per year. It is a common challenge appearing in the lives of couples

(6). Depression could negatively impact the mood, behavior, attitude, and efficiency of couples and massively harm family performance. Hence, it is essential to investigate the depression, relationship statuses, and marital relationships of couples, particularly among married women (7).

In particular, attachment behaviors affect the marital quality and psychological health among women. These behaviors have their roots in childhood. The internal concepts of attachment forming in the childhood influence how individuals express their attachment demands, responding to such demands, and implement emotional adjustment (8). The attachment behaviors arising from secure attachments have strong effects on romantic relationships. Secure attachments could bring trust, welfare, and satisfaction to couples (9).

The romantic relationship quality of couples may be influenced by individual, contextual, and relational factors. Attachment characteristics may differ and predispose individuals to adopt a set of behaviors (10). Secure attachments allow a person to be a secure model in their adult romantic relationships by being attentive and available to their partner (11). However, such a model is not possible for insecure attachment styles that are anxious or avoidant (12).

Attachment behaviors are involved in interpersonal interactions in terms of the secure attachment style of an individual and significantly affect their performance and relationships (13). Accessibility and responsiveness are described as key behaviors in romantic relationships. When accessibility and responsiveness are high enough to satisfy the marital expectations of couples, marriage quality and psychological health are more likely to improve. This suggests that attachment tendencies significantly improve the family institution (14). Engagement refers to the fact that an individual can ask their partner for help whenever they need. This new event is the basis of emotional engagement in a relationship (15).

A review of theoretical foundations and empirical literature suggest that some individual variables can play a mediating role in the relationships of attachment behaviors with marital quality and depression among married women. These mediators may improve or deteriorate marital quality and prevent or worsen depression and other psychological disorders. Self-esteem is among such mediators (16). According to intra-functional models, attachment behaviors may affect how people attribute things like communication, marital quality, and psychiatric problems, and self-esteem may be able to moderate these factors (17). Self-esteem refers to a person's assessment of their own worth as a result of their attitude toward themselves (17). An individual's self-view, life satisfaction, capacity to experience pleasure, and desire to interact with others decline when their self-esteem is damaged (18). This was supported by papers on the relationship between self-esteem with marital burnout, marital dissatisfaction, marital satisfaction, marital disorders, and psychological health in couples (19-21).

Therefore, the effect of attachment behaviors on marital quality and depression among women may

be partially measured by self-esteem. Although previous research investigated the independent associations between marriage quality and psychological health of couples, the linkages between attachment behaviors with depression and marital quality in women with self-esteem serving as a mediator have not been exhaustively modeled. Hence, the present work aimed to shed light on factors, which directly or indirectly affect the marital quality and depression among women and provide deeper insights into the relationships of such variables. Moreover, the present study aimed to investigate the relationship among the attachment behaviors with depression and marital quality via the mediating role of self-esteem in women in Ahvaz, Iran.

2. Methods

This paper adopted a correlational methodology to evaluate the relationships between the variables through a path analysis approach. The statistical population consisted of married women with at least a diploma in the city of Ahvaz, Iran, in 2021. A total of 356 participants were selected through convenience sampling. The data of the remaining 340 participants were evaluated after the data of sixteen persons with outliers and/or non-responded questionnaires were deleted. In structural equation analysis, the sample size should be at least 10 or 15 times the number of variables plus 50, depending on the number of study variables (22). Based on the number of variables in the model, the sample size was selected from this statistical population. Therefore, according to 6 variables in this study, and predicting the sample loss, 365 questionnaires were distributed among the participants; finally sample size of 340 was considered. The inclusion criteria included a minimum age of 18, at least having diploma, voluntary participation, no psychological disorder, no drug addiction, having one-year marriage experience, and commitment to honestly responding to the questionnaire. The exclusion criterion, on the other hand, would be non-responded questionnaires.

The participants were given the questionnaires and necessary explanations and written informed consent was obtained from the participants. They received guarantees that their information would be confidential and just used in this study. The participants were not forced to disclose their identity in order to maintain their privacy.

2.1. Research Tools

Quality Marriage Index (QMI): QMI was developed by Norton (23). It is a six-item tool that measures marital quality using general expressions, such as “we have a good marriage.” The items were scored on a five-point scale, ranging from 1 (strongly disagree) to 7 (strongly agree). However, the sixth item is to be scored 1-10, where 1 stands for “strongly disagree”, while a score of 10 represents “strongly agree.” A larger MRQS score would be a representative of high marital quality and vice versa. Cronbach’s alpha coefficient for the scale was 0.92 (24). The Content Validity Index (CVI) (0.86) and the Content Validity Ratio (CVR) (0.84) indicate the adequacy of validity in the QMI (24). The reliability of this scale based on Cronbach’s alpha was equal to 0.87.

Beck Depression Inventory (BDI-13): BDI-13 is an effective tool to reflect depression states. It was developed by Beck and other colleagues (25). Its short-form consists of thirteen items which measure physical, behavioral, and cognitive symptoms of depression. The minimum and maximum scores of BDI-13 are 0 and 39, respectively. Cronbach’s alpha coefficient for the questionnaire was 0.85. Nine experts confirmed the validity of this scale, where the results were as follows: CVI= 0.95, and CVR= 0.93 (26). In the present study, the reliability of this questionnaire based on Cronbach’s alpha was equal to 0.82.

The Brief Accessibility, Responsiveness, and Engagement (BARE) Scale: BARE is a systematic and self-report scale to measure attachment behaviors developed by Sandberg and other colleagues (27). It involves twelve items that measure accessibility, responsiveness, and engagement. The items are scored on a five-point Likert scale, where scores 1, 2, 3, 4, and 5 represent “never,” “rarely,” “sometimes,” “usually,” and “always,” respectively. Cronbach’s alpha coefficient for the scale was 0.82.

The validity of the Persian version of this tool was affirmed by ten experts (CVI=0.96, CVR=0.96) (28). In this study, the reliability of this questionnaire was 0.79 based on Cronbach’s alpha.

Rosenberg Self-Esteem Scale (RSES): Ten broad phrases make up the RSES, five of which are stated negatively and the other five are favorable. On a four-point scale, the statements are rated as strongly agree, agree, disagree, and strongly disagree. The top score is ten. A score above 8 would represent high self-esteem, a score from 5 to 8 stands for moderate self-esteem, and scores below 5 reflect low self-esteem (29). Shapurian and co-workers (30) reported a Cronbach’s alpha of 0.84 for the scale. The validity of the Persian version of scale was assessed by nine experts (CVI= 1.00, CVR=0.98) (30). Cronbach’s alpha coefficient was 0.80 for the scale.

2.2. Statistical Analyses

The proposed model was tested using structural equation modeling (SEM) in AMOS version 24. The mediating relationships of the final model were tested through bootstrapping.

3. Results

The age of the subjects had mean of 36.25 and an SD of 7.12, respectively. Table 1 presents the descriptive data for the study variables, including mean, standard deviation, skewness, kurtosis, and Pearson correlation coefficient. According to Table 1, the variables were ensured to have a normal distribution. Moreover, the variables had significant correlations ($P < 0.05$).

To investigate the multivariate data, the Mahalanobis distance was calculated for the exogenous variables. The results showed that the greatest and lowest Mahalanobis distances were 0.60 and 34.22, respectively. At P value of 0.01,

Table 1: Mean (SD), skewness, kurtosis, and Pearson correlation coefficients of the variables

Variables	Mean (SD)	Skewness	Kurtosis	1	2	3	4	5	6
1- Accessibility	7.24 (2.55)	-0.45	-0.94	1					
2- Responsiveness	8.12 (2.10)	-0.94	0.07	0.55*	1				
3- Engagement	7.90 (2.36)	-0.86	-0.54	0.58*	0.72*	1			
4- Self-esteem	7.22 (2.93)	-0.82	-0.63	0.55*	0.54*	0.56*	1		
5- Depression	5.78 (2.86)	1.14	0.28	-0.62*	-0.63*	-0.65*	-0.78*	1	
6- Marital quality	28.58 (6.48)	-0.98	-0.18	0.61*	0.70*	0.81*	0.63*	-0.72*	1

* $P < 0.05$

Table 2: Fit indicators of the proposed model

Fit indicators	χ^2	df	(χ^2 /df)	GFI	AGFI	IFI	TLI	CFI	NFI	RMSEA
Proposed model	2.92	1	2.92	0.98	0.94	0.99	0.94	0.99	0.99	0.021

the required chi-square was 13.28. As multivariate outliers, sixteen people were removed from the data because their chi-square values were above average. The data of the 340 individuals who remained were examined. Table 2 provides the fit indices of initial and final models. As can be seen, χ^2 , χ^2 /df, the Goodness of Fit Index (GFI), adjusted GFI (AGFI), Comparative Fit Index (CFI), Incremental Fit Index (IFI), Tucker-Lewis index (TLI), and Root Mean Square Error of Approximation (RMSEA)

were found to be 2.92, 2.92, 0.98, 0.94, 0.99, 0.99, 0.94, and 0.021, respectively. This indicates that the model had an excellent fit. Figure 1 depicts the proposed and final models along with the path coefficients.

Table 3 shows the paths and their standard coefficients in the proposed and final models. As can be seen, all path coefficients of final model were significant.

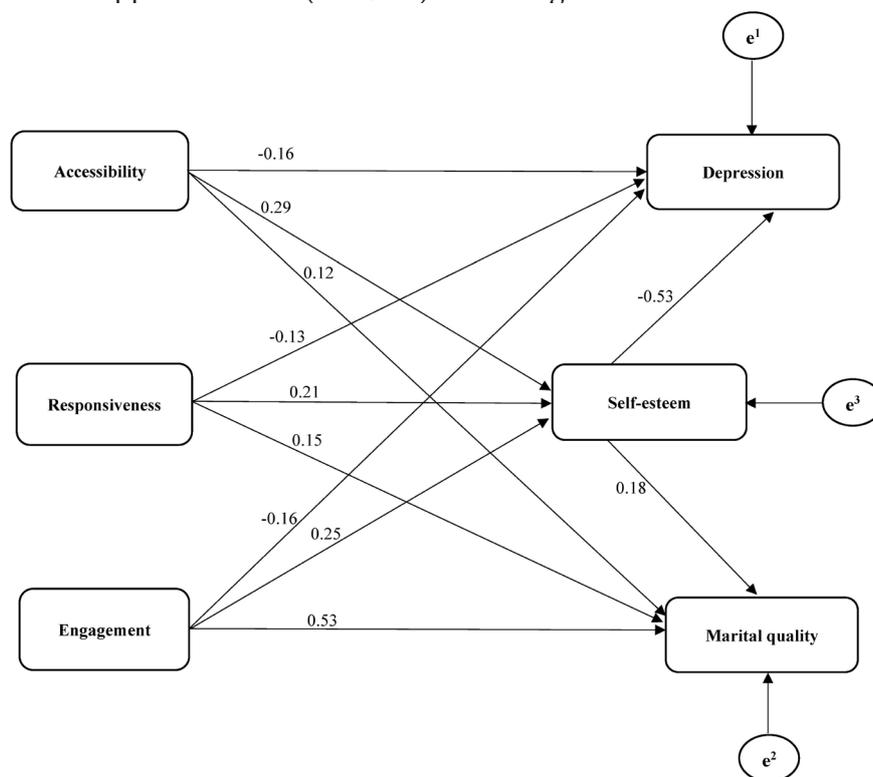


Figure 1: The figure shows the proposed model of the mediating role of self-esteem.

Table 3: Direct paths among the variables in the proposed model

Path→	Proposed model			
	β	B	Critical ratio (CR)	P
Accessibility → Self-esteem	0.29	0.33	5.41	0.001
Accessibility → Depression	-0.16	-0.44	-4.19	0.001
Accessibility → Marital quality	0.12	0.31	3.26	0.001
Responsiveness → Self-esteem	0.21	0.29	3.35	0.001
Responsiveness → Depression	-0.16	-0.44	-3.04	0.002
Responsiveness → Marital quality	0.15	0.47	3.53	0.001
Engagement → Self-esteem	0.25	0.31	3.96	0.001
Engagement → Depression	-0.16	-0.46	-3.50	0.001
Engagement → Marital quality	0.53	1.44	11.97	0.001
Self-esteem → Depression	-0.53	-1.23	-13.77	0.001
Self-esteem → Marital quality	0.18	0.40	4.94	0.001

Table 4: Analysis of indirect and intermediary paths in the in the proposed model

Predictor variable	Mediator Variable	Criterion variable	Proposed model			
			B	β	Standard error (SE)	P
Accessibility	Self-esteem	Depression	-0.41	-0.15	0.03	0.023
Responsiveness	Self-esteem	Depression	-0.36	-0.11	0.03	0.015
Engagement	Self-esteem	Depression	-0.38	-0.13	0.04	0.005
Accessibility	Self-esteem	Marital quality	0.13	0.05	0.01	0.014
Responsiveness	Self-esteem	Marital quality	0.12	0.04	0.01	0.008
Engagement	Self-esteem	Marital quality	0.13	0.05	0.2	0.004

Table 4 presents the indirect path results. The results showed a significant indirect path from accessibility to depression ($P=0.023$) and marital quality ($P=0.014$) via the mediating role of self-esteem in the women. There was a significant indirect path from responsiveness to depression ($P=0.015$) and marital quality ($P=0.008$) through the mediating role of self-esteem. Moreover, there was a significant indirect path from engagement to depression ($P=0.005$) and marital quality ($P=0.004$) via the mediating role of self-esteem in the women.

4. Discussion

This study aimed to investigate the relationship among attachment behaviors with depression and marital quality via the mediating role of self-esteem in women. The results showed that the three aspects of attachment behaviors—accessibility, responsiveness, and engagement—had a direct and substantial impact on the quality of marriage. Hence, increased attachment behaviors of couples lead to better pleasure and happiness. Besides, self-esteem was found to play a significant mediating role in the relationships of attachment behavior with depression and marital quality. This finding is consistent with the research results of previous studies (13, 31). In this respect, it can be said that attachment behaviors affect interpersonal interactions. They arise from the relationships with the attached faces (i.e., parents, peers, and the partner) and significantly influence the performance and relationships of the individual (13). Accessibility, responsiveness, and involvement are the three aspects of attachment behaviors. Accessibility is a term used to describe a system that fosters contentment and security in a relationship and maintains a strong and secure bond. In fact, accessibility is assumed to be a key behavior which determines security or dissatisfaction in close relationships. Relaxation is a psychological consequence of accessibility, and trusting in one's self and others is a major characteristic of

accessibility. Self-trust enhances the ability to cope with stressful situations via the analysis of intrapsychic bases and provides psychological peace. Accessibility is an internal source which preserves psychological health in stress periods.

Accessibility involves a reflection of the extent to which an individual cares about others when they need support and access and represents the couple's view of marriage. According to Alder and co-workers, accessibility in attachment behaviors is a key characteristic that influences interpersonal interactions, especially in marital partnerships (15). It successfully enhances marital quality and preserves the couple's bond. Accessibility may boost self-esteem since it is a predictable habit. When the attachment form is accessible, an emotional sense of self-acceptance and self-worth appears; i.e., self-esteem enhances. Self-esteem acts in the form of positive self-evaluation and defense against psychological maladjustment, creating a sense of self-worth.

Concerning the relationship between self-esteem and depression, it can be said that an individual with high self-esteem has high assertiveness and a positive attitude. However, an individual with poor self-esteem avoids communities and is sensitive to criticism. For such an individual, offending others or aggressiveness is a defensive mechanism. It leads to depression over time (32). Therefore, it can be claimed that self-esteem can moderate the relationship between this dimension of attachment and depression. It may be claimed that women with greater levels of attachment behaviors get more love and a sense of value in their relationships and see an increase in their self-esteem. This is consistent with the mediation potential of self-esteem between accessibility and marital quality. Self-esteem is a crucial source to cope with personal changes or other stressful situations or experiences. It can improve the quality of life when a couple encounters a challenge.

Responsiveness is described as a key behavior in relationships that strongly determine security and anxiety. It refers to the fact that the partner is accessible when needed and responds in a relaxing manner. This would lead to positive participation in the couple relationship (33). The development and upkeep of intimate relationships throughout life are influenced by these inherent tendencies. A responsive person experiences happiness, optimism, and marital stability; responsiveness influences how people think about their marriage. These people evaluate their relationships more emotionally, which promotes marriage stability and great marital quality. Responsiveness is viewed as a key behavior in relationships that provides individuals with a sense of security and self-worth (15). Regarding the relationship among self-esteem, depression and strong attachment bonds, one dimension of which is responsiveness, contribute to the formation of safe and secure support and may enhance resistance to stress effects in doubts. They can provide enough confidence for risk-taking, learning, and adaptation to oneself, others, and the world. Responsiveness brings positive personal experiences that result in a positive and valuable self-attitude, with a wide range of positive outcomes, including reduced psychological disorders (e.g., depression). For the relationship between engagement and depression, it can be said that engagement arises from experiences of no loss or no change of accessibility. Depression is reduced by the accessibility of the interaction style. Additionally, those who are engaged with their relationships are linked to them and want high levels of care, closeness, acceptance, and response from them. These people have great degrees of self-confidence, trust, and positivity toward themselves and their partners. They also exhibit high levels of relaxation and calm in their relationships and have high levels of marital quality. Self-esteem is essential source to cope with personal changes or other stressful situations and experiences and may improve the quality of life when a couple encounters a challenge. Couples with high self-esteem have higher resilience under stresses in life and show high trust and understanding in their relationships (34). Couples with engagement seek high care, intimacy, acceptance, and responsiveness from their partners and are attached to them. These individuals can trust each other, have high positive attitudes toward themselves and their partners, and show high levels of relaxation and peace in

their relationships. This improves their self-esteem, particularly in their relationships, leading to higher happiness, intimacy, and satisfaction.

4.1. Limitations

This study encountered some limitations. The data were collected only through a questionnaire, which served as a self-report. As a result, biased responses would probably occur. The participants were females in Ahvaz, Iran with at least a high school education, therefore the results may not apply to married women in other locations with various education levels and varied personal characteristics. Hence, it is suggested that married women in other cities with different cultures be studied.

5. Conclusions

It was found that attachment behavior components, including accessibility, responsiveness, and engagement had direct effects on self-esteem, depression, and marital quality. In order to raise children with good self-esteem, decreased depression, and great marital quality in both the parent-child marriage and the children's future marriage, it is advised that parents get training in creating safe attachment connections. It is advised that workshops and seminars be done on the improvement of self-esteem and its beneficial effects as it was discovered that self-esteem influences depression and marital quality. Also, it is suggested that families be encouraged to enhance self-esteem in order to improve the psychological health of their children and enable them to have a high-quality marriage.

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Ethical Approval

The study was approved by the Ethical Committee of Islamic Azad University- Ahvaz Branch with the code of IR.IAU.AHVAZ.

REC.1400.113. Also, written informed consent was obtained from the participants.

Conflicts of Interest: None declared.

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