

**Université de Montréal**

**Romantic attachment and perception of partner support to explain psychological  
aggression perpetrated in couples seeking couples therapy**

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À Charles et grand-maman  
pour leur appui indéfectible

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## Résumé

Cette étude a examiné le rôle médiateur de la perception du soutien reçu du partenaire dans la relation unissant les insécurités d'attachement et la perpétration d'agression psychologique auprès de 210 couples qui consultent en thérapie conjugale. Après la première séance de thérapie, chaque partenaire a complété le Questionnaire de soutien conjugal, le Questionnaire sur les expériences d'attachement amoureux et la version française abrégée du *Revised Conflict Tactics Scale*, qui mesure la violence au sein du couple, individuellement. Tel que postulé, l'analyse acheminatoire basée sur le modèle d'interdépendance acteur-partenaire (APIM; Kenny, Kashy, & Cook, 2006) a révélé que les hommes et les femmes qui présentaient davantage d'évitement de l'intimité percevaient recevoir moins de soutien de leur partenaire. De plus, le fait de percevoir moins de soutien du partenaire était associé à une plus grande utilisation d'agression psychologique par l'individu et son partenaire. Cependant, les insécurités d'attachement n'étaient pas significativement liées à l'utilisation d'agression psychologique et par conséquent, la perception de soutien reçu ne peut être considérée comme variable médiatrice dans la relation unissant ces variables. Des réflexions méthodologiques et cliniques sont discutées.

Mots-clés : attachement amoureux, perception de soutien reçu, agression psychologique, couples, thérapie conjugale, psychologie clinique

**Romantic attachment and perception of partner support to explain psychological  
aggression perpetrated in couples seeking couples therapy**

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### Abstract

This study examined the mediational role of perceived partner support in the association between romantic attachment and the use of psychological aggression in 210 couples seeking couple therapy. Following the first therapy session, partners completed the Conjugal Support Questionnaire, the Experiences in Close Relationships and the Revised Conflict Tactics Scale individually. As expected, path analyses based on the Actor-Partner Interdependence Model (APIM; Kenny, Kashy, & Cook, 2006) revealed that, for both men and women, higher avoidance predicted their perception of lower partner support. Results also indicate that perception of lower partner support was related to more frequent use of psychological aggression in both the self and the partner. No significant association was found between attachment insecurities and the use of psychological aggression and, therefore, perceived partner support did not mediate this association. Methodological and clinical considerations of these results are discussed.

Key words: romantic attachment, perceived partner support, psychological partner aggression, couples, couples therapy, clinical psychology

Romantic attachment and conjugal support received to explain psychological aggression  
perpetrated in couples seeking couples therapy

Both physical and psychological forms of intimate partner violence are highly prevalent in North America, in both community-based and clinical populations (Jose & O'Leary, 2009). According to the 2009 General Social Survey on Victimization, 6% of Canadians reported being victims of physical or sexual violence in the five years preceding the survey, whereas 17% reported their partner was psychologically or financially abusive, mainly through name calling and put downs (Statistics Canada, 2011). Prevalence rates reported in empirical studies are even higher. For example, Straus and Sweet (1992) found that 74% of men and 75% of women from a representative community-based sample of 6,002 American couples reported using psychological aggression against their partner over the previous year, while a more recent study revealed that 83.5% of men and 89.2% of women from a Canadian community-based sample had used psychological aggression toward their partner at least once in the last year (Péloquin, Lafontaine, & Brassard, 2011). Studies that focused on clinical samples found equally high prevalence rates. For example, in a sample of 129 American couples seeking treatment for intimate partner violence, physical violence was perpetrated by both partners in 74% of couples (Madsen, Stith, Thomsen, & McCollum, 2012). Furthermore, an investigation of 273 couples participating in a study on marital therapy revealed that 94.9% of men and women reported having received psychological aggression from their spouse in the last 12 months (Simpson & Christensen, 2005).

Despite its high prevalence in couples, psychological aggression as a form of intimate partner violence has received much less attention than physical violence. This may be due to the perception that while physical violence is considered unacceptable in North America,



psychological aggression may be a more normative type of behavior in intimate relationships (Jose & O'Leary, 2009; O'Leary & Jouriles, 1994). Psychological partner aggression can also be perceived as having less severe consequences than physical violence (Arias & Pape, 1999). Yet, studies have revealed psychological aggression to be linked to many psychological, cognitive, and physical consequences, to be a possible precursor to physical violence (Murphy & O'Leary, 1989; O'Leary, Malone, & Tyree, 1994), and to have more significant effects on its victims than physical violence (Follingstad, Rutledge, Berg, Hause, & Polek, 1990; O'Leary & Jouriles, 1994). Some authors suggest that these negative consequences could be due to a higher frequency of acts of psychological abuse as compared to acts of physical violence, and the greater pervasiveness of psychological abuse that can erode victims' self-esteem and psychological well-being (Arias & Pape, 1999).

In light of its high prevalence in couples and the substantial repercussions it can have on the lives of its victims, psychological aggression merits further study to better understand this form of intimate partner violence and the mechanisms that can lead to its perpetration. Whereas several theoretical approaches can be used to this end, attachment theory (Bowlby, 1969; Mikulincer & Shaver, 2007) has the advantage of taking into consideration the dyadic nature of the relationship and of aggressive behaviors between partners (Bartholomew & Allison, 2006). In the current study, we sought to examine the association between romantic attachment, perceived partner support, and psychological aggression, both at the individual and the dyadic levels, in couples seeking therapy.

### **Psychological partner aggression**

Psychological partner aggression is defined as verbal and non-verbal behaviors intended to negatively affect the psychological well-being of a romantic partner (Straus & Sweet, 1992),

to belittle, to isolate, to control or to lower self-esteem by making the partner feel guilty or inadequate (Lawrence, Yoon, Langer, & Ro, 2009). These behaviors can include, but are not limited to, withholding affection (Péloquin et al., 2011), abusing, sulking, keeping a stony silence, smashing an object, slamming a door (Straus & Sweet, 1992) or falsely accusing a partner of having an affair (Doherty & Berglund, 2008). Several studies have revealed an association between psychological aggression and depression (Sackett & Saunders, 1999; Simonelli & Ingram, 1998; Taft et al., 2006), low self-esteem (Aguilar & Nightingale, 1994; Follingstad et al., 1990; Sackett & Saunders, 1999), fear (in women; Sackett & Saunders, 1999; Henning & Klesges, 2003), post-traumatic stress syndrome (Arias & Pape, 1999) and suicidal ideation (Marshall, 1999). Psychological aggression can also limit physical and cognitive functioning (Coker, Smith, Bethea, King, & McKeown, 2000; Straight, Harper, & Arias, 2003), and negatively impact the victim's ability to work (Coker et al., 2000).

The few studies that have primarily focused on psychological aggression mainly utilized samples of couples from the general population, limiting possible generalization of findings to couples in therapy. Since there seems to be a high prevalence of psychological aggression in couples seeking therapy (Jose & O'Leary, 2009; Straus & Sweet, 1992), additional studies focused on this population could contribute to improving our knowledge of the dynamics of intimate partner psychological aggression and allow therapists to better intervene with these couples. Furthermore, past studies have mainly targeted violence perpetrated by men or violence sustained by women rather than examining aggression from a dyadic perspective. Yet, partners' behaviors necessarily influence each other (Bartholomew & Allison, 2006) and both partners may at times use psychological aggression against one another, with women being just as likely

to be perpetrators as men<sup>1</sup> (Johnson, 1995; Jose & O'Leary, 2009; Straus & Sweet, 1992).

Accordingly, studies that restrict their scope to only one partner exclude the frequent presence of bilateral violence in intimate relationships and limit opportunities to understand the role of interpersonal factors in the use of aggression in couples, for which we still have little knowledge (Lawrence, Orengo-Aguayo, Langer, & Brock, 2012).

### **Attachment theory**

Attachment theory (Bowlby, 1969; Mikulincer & Shaver, 2007) provides a theoretical framework to study the use of aggressive behaviors by both partners in a romantic relationship (Bartholomew & Allison, 2006). It assumes that people have a set of innate behavioral systems that organize their behaviors to promote their survival (Bowlby, 1969; Mikulincer & Shaver, 2007). Two of these behavioral systems are relevant in the study of intimate partner violence: attachment and caregiving. Although each system plays a specific role, the attachment system seems central in ensuring all other systems function in an optimal manner (Shaver, Hazan, & Bradshaw, 1988).

**Attachment system.** In order to describe the infant-parent bond, Bowlby (1969) initially proposed that an attachment bond develops from the relationship between children and the individuals who provide the care needed for survival (i.e., attachment figures). When children feel threatened, whether the threat is real or perceived, they seek physical proximity to their attachment figure to obtain security and to be comforted. These repeated experiences with the attachment figure contribute to molding children's working internal models of self and others.

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<sup>1</sup> Aggression is perpetrated as often by men as by women for more "common" forms of couple violence, such as psychological aggression. However, "patriarchal terrorism", a more severe form of violence whereby men attempt to gain control over women, is almost exclusively perpetrated by men (Johnson, 1995).

For instance, when attachment figures are available and respond adequately and consistently to children's attachment needs, attachment security may form. This allows children to more freely explore their environment, become autonomous, and form positive images of self and of others. Conversely, when attachment figures are unavailable or their responses are inadequate, attachment insecurity may develop, leading to a negative image of the self, a sense of unworthiness, mistrust of others, and/or uncertainty as to the responsiveness of the attachment figure and of others in general. Internal working models of the self and others tend to be relatively stable over time, but can change in light of new positive (or negative) experiences (Bowlby, 1969, 1973).

Building on Bowlby's (1969) works, Hazan and Shaver (1987) hypothesized that attachment dynamics are also present in adult romantic relationships, in which the romantic partner often becomes the most important attachment figure (Hazan & Shaver, 1994). Similarly to childhood attachment, attachment to the partner develops over time and is influenced by the history of interactions, the perception of the self as deserving of love (working model of self) and the perception of the partner as available and willing to provide support (working model of others; Bowlby, 1973; Hazan & Shaver, 1987). However, adult attachment relationships are usually of a sexual nature and tend to be more reciprocal than the attachment relationship established between the parent and the child.

Bartholomew and Horowitz (1991) used these concepts of working models of self and others to propose a two-dimensional model of adult attachment. It was later suggested by Brennan, Clark, and Shaver (1998) that these two dimensions correspond to anxiety over abandonment and avoidance of intimacy. Anxiety over abandonment is characterized by a negative working model of self, whereby individuals feel undeserving of love, fear rejection or

abandonment, have low self-esteem and, consequently, constantly seek reassurance from their romantic partner (Collins & Read, 1990). Individuals with higher avoidance of intimacy have a negative model of others, perceiving them to be unavailable and untrustworthy, and tend to avoid closeness or relying on others, including their partner. Conversely, individuals who are securely attached (i.e. low anxiety and low avoidance) have a positive working model of self and of others, feel they are deserving of affection and support, view their partner as available and accessible, and rarely fear that their partner will abandon them (Bartholomew & Horowitz, 1991; Hazan & Shaver, 1987).

From a theoretical standpoint, it is suggested that insecure attachment is associated with intimate partner violence and can create an environment that is favorable to its perpetration (Roberts & Noller, 1998). Individuals high in attachment anxiety constantly seek proximity and comforting from their partner (Bowlby, 1973). When their attachment needs are not met or their attachment relationship is threatened (for example, a conflict with the partner), these individuals can often express anger or perpetrate aggressive behaviors (Mikulincer & Shaver, 2007) in order to attract the desired support and attention, and to re-establish intimacy with their partner (Bartholomew & Allison, 2006). Aggressive behaviors may also be used by individuals with higher avoidance of intimacy when their usual proximity-regulating strategies (for example, retreating) cease to be effective. Passive-aggressive violence (Mayseless, 1991) or anger (Mikulincer, 1998) may serve to maintain distance and emotional independence from the partner (Allison, Bartholomew, Mayseless, & Dutton, 2008; Roberts & Noller, 1998).

Recent literature reviews provide empirical support for the association between both types of attachment insecurities and psychological aggression used by men and women (Bartholomew & Allison, 2006; Gosselin, Lafontaine, & Bélanger, 2005). For example, studies

on community-based samples of Canadian heterosexual couples have found that attachment anxiety is associated with psychological aggression toward the partner (Lafontaine & Lussier, 2005; Péloquin et al., 2011). Consistent with theory, avoidance of intimacy appears less systematically associated with the use of psychological aggression. Some authors reported an association between avoidance of intimacy and perpetrated psychological aggression in men only (Lafontaine & Lussier, 2005), whereas others found this association in women only (Péloquin et al., 2011). No published study has investigated attachment insecurities and psychological aggression in a sample of couples undergoing therapy.

A limited number of studies to date have explored the mechanisms by which attachment insecurity and intimate partner violence relate in samples of romantic couples. To our knowledge, only two studies have looked at such processes for physical intimate partner violence in community-based samples. Roberts and Noller (1998) found that dysfunctional communication patterns mediated the link between anxiety over abandonment and the use of physical violence in a sample of Australian couples. Anger has also been found to play a mediating role between anxiety over abandonment and the perpetration of physical violence among Canadian couples (Lafontaine & Lussier, 2005). With respect to psychological aggression, Péloquin et al. (2011) observed that lower perspective taking mediated the association between insecure attachment (anxiety and avoidance) and psychological aggression perpetrated by women. Anger also mediated the association between attachment anxiety and psychological aggression in women, and between avoidance of intimacy and psychological aggression in men (Lafontaine & Lussier, 2005). No study examined similar mediational processes in clinical samples of couples in therapy. Furthermore, to our knowledge, no study

used a dyadic approach to examine associations between attachment and psychological aggression in couples seeking couple therapy.

**Caregiving system.** Whereas the attachment system serves to restore an individual's sense of felt security when confronted with real or perceived threats, the caregiving system serves to provide protection, security (Collins, Ford, & Feeney, 2011), reassurance, and comfort in a distressed significant other (Collins et al., 2006; Feeney & Collins, 2001; Mikulincer, 2006). These two systems are complementary (Collins et al., 2006; Mikulincer & Shaver, 2007). Stressful events activate the attachment system and motivate individuals to seek closeness and support from their partner, who is often the main source of support (Dakof & Taylor, 1990; Feeney & Collins, 2001). The partner's caregiving system is then activated to respond to the individual's expressed attachment needs. For effective relationship functioning, an individual's support behaviors need to be coordinated with the partner's attachment needs (Collins et al., 2011). The support given must be sensitive (listening to the partner's needs, interpreting them correctly, and responding to them promptly and appropriately) and make the partner feel loved and understood (Collins et al., 2006; Collins et al., 2011).

The perception of partner support is influenced by the recipient's working models of self and others (Hazan & Shaver, 1987). Individuals with high attachment anxiety who feel undeserving of love and who fear being rejected tend to be hypervigilant to any signs that their attachment relationship is threatened. They tend to be dissatisfied with the support they receive, as it does not entirely meet their often insatiable needs to be comforted (Bachman & Bippus, 2005; Simpson, Rholes, & Phillips, 1996). This can lead to resorting to emotion-based strategies to control their negative emotions (Mikulincer & Florian, 1998) in order to obtain the support they expect. Such strategies may include using anger, jealousy (Mikulincer & Shaver, 2007),

hostility or even aggression to communicate their needs to the partner (Bowlby, 1973). Individuals higher on avoidance of intimacy also tend to be dissatisfied with the support they receive from their partners who are perceived as untrustworthy, unavailable and unreliable to respond to their needs (Collins et al., 2011; Fraley & Shaver, 1998; Simpson, Rholes, & Nelligan, 1992). They also tend to denigrate the support received as it could suggest a form of dependency on the partner (Mikulincer & Shaver, 2007). Several studies showed that both types of attachment insecurities are indeed associated with perceiving low support from the partner (Coddington, 2007; Kane et al., 2007).

Since individuals higher in attachment insecurities (anxiety and avoidance) tend to perceive that their partner does not respond adequately to their needs and is less supportive, it could be suggested that they would be more likely to use psychological aggression against their partner (Bowlby, 1988). A study by Simpson et al. (1996) provides some empirical support. They observed that attachment anxiety was associated with a more negative perception of partner support, more anger, and more hostility in individuals involved in dating relationships.

It is important to draw a distinction between *received* and *perceived* support. A literature review revealed that perceived support contributes more to one's health and well-being than does the actual support received (Wethington & Kessler, 1986). The perception of receiving appropriate support may improve the well-being and security of both partners, reduce stress (psychological and physiological), increase one's capacity to face and resolve problems, and promote relationship security and confidence (Collins et al., 2006). In light of these findings, the current study specifically focused on *perception* of partner support.

Caregiving is also influenced by the attachment system. Optimal caregiving is only possible when the caregiver's own attachment system is deactivated and his/her attachment needs



are met (Bowlby, 1988). A securely attached individual feels secure, confident, and can be available to respond to others' needs (Collins et al., 2011). However, momentary or chronic activation of the attachment system may interfere with one's ability to respond adequately to a partner's support needs. In such situations, one's own attachment needs are prioritized, leaving fewer resources available to attend to the partner's needs (Mikulincer & Shaver, 2007). As such, support given by an individual presenting with attachment insecurities is more likely to be perceived as ineffective by the partner (Collins et al., 2006). Specifically, support offered by individuals higher on attachment anxiety may be perceived as intrusive, inappropriate, or ineffective by the partner, as this support may be offered partly for egoistic motives (e.g., to feel loved or to increase intimacy with the other; Collins et al., 2006). Studies using self-reports or conducted in a laboratory setting found that individuals perceived less support when their partner scored high on attachment anxiety (Collins & Feeney, 2000; Davila & Kashy, 2009). Individuals who score high on attachment avoidance tend to minimize their partner's preoccupations, may not notice their distress, or choose not to respond to their partner's needs so as to avoid activating their own attachment system and maintain emotional distance (Mikulincer & Shaver, 2007). For these reasons, the support they offer may often fail to adequately meet their partner's needs. Simpson et al. (1992) observed that women who were waiting to take part in an anxiety-provoking activity perceived less emotional support when their partner scored higher on attachment avoidance. Using self-reports, Kane et al. (2007) also found that both men and women with attachment avoidance were perceived as less supportive by their partner.

### **Proposed model and hypotheses**

In sum, few studies have explored the association between romantic attachment and psychological aggression in couples seeking therapy, the association between perception of

support and intimate partner violence, or the role of dyadic dynamics to explain the occurrence of psychological aggression. Furthermore, although existing evidence suggests a theoretical link between attachment insecurity, perceived partner support, and psychological aggression, no study had as yet verified this association. The current study used a dyadic perspective to examine the association between both partners' attachment insecurities (anxiety and avoidance), perception of partner support, and perpetration of psychological aggression in couples seeking therapy. We hypothesized that individuals' attachment insecurities would be related to their own and their partner's lower perception of support received, as well as to their own higher use of psychological partner aggression. We also expected that the link between individuals' attachment anxiety and perpetration of psychological aggression would be mediated by their perception of receiving less support from their partner. The same association was examined for individuals higher on attachment avoidance. However, due to inconsistencies in past results on the association between avoidant attachment and psychological aggression, it was unclear whether partner support would mediate this association.

## **Method**

### **Participants**

This investigation was part of a larger longitudinal research program on the effectiveness of couple therapy in a natural setting. The current study, however, focused on cross-sectional pre-treatment data only. The sample included 210 heterosexual Canadian couples beginning couple therapy at a private clinic in the province of Quebec. The mean age was 41 (ranging from 22 to 71) for women and 43 (ranging from 24 to 76) for men. On average, couples had been together for 14 years (ranging from 1 to 49 years), and 44.8% of couples were married, whereas 55.2% were cohabitating. Most couples (83%) had at least one child. The mean income was CAN \$85,000 for men and CAN \$55,000 for women. Most participants were francophone

(93.3% of men and 91% of women) and Caucasian (92.4% of men and 94.3% of women). The majority of participants had some college education (58% of men and 64% of women).

### **Procedures**

Couples were recruited during their first evaluation session. Psychologists explained the goals of the research program and the advantages associated with their participation (results were used to supplement therapists' evaluation and guide treatment). Participation was voluntary, however, and couples could withdraw from the study at any time. Interested couples signed a consent form and partners received a series of questionnaires to complete individually at home and return to their therapist by mail before their next session.

### **Measures**

**Demographic information.** Participants were asked to provide personal sociodemographic (e.g., age, income, education, ethnic background) and relationship information (e.g., marital status, number of children, duration of relationship).

**Romantic attachment.** The Experiences in Close Relationships (Brennan et al., 1998) is a measure of romantic attachment that comprises two 18-item subscales: anxiety over abandonment and avoidance of intimacy. Participants respond according to how they feel in general in their romantic relationships on a seven-point Likert scale ranging from 1 (*strongly disagree*) to 7 (*strongly agree*). Mean scores on each dimension range from 1 to 7, with higher scores reflecting higher levels of attachment anxiety or avoidance. The internal consistency was reported to be excellent on both subscales. The French version of the scale has shown excellent bifactorial validity and internal consistency ( $\alpha = .86$  and  $.88$  for men and women; Lafontaine & Lussier, 2003). The current study yielded alpha coefficients for both men and women of  $.89$  for attachment anxiety and  $.87$  for avoidance.

**Caregiving.** The Conjugal Support Questionnaire (Brassard, Houde, & Lussier, 2011) includes two four-item subscales assessing perception of received partner support and support given to the partner. Only the perception of received support subscale was used in the current study. Participants were asked to rate the frequency with which their partner provides support on items rated on a five-point Likert scale (1 = *never* to 5 = *always*). The mean score of items was compiled to form a global score, with higher scores reflecting a more favorable perception of partner support received. This questionnaire has shown good predictive validity with relationship satisfaction evaluated 12 months later (Brassard et al., 2011). Reliability estimates are good, with alpha coefficients for the received support subscale of .84 for men and .86 for women in a French-speaking sample (Brassard et al., 2011). In the current sample, alpha coefficients were .75 for men and .72 for women.

**Psychological aggression.** The French version of the Revised Conflict Tactics Scale (Lussier, 1997; Straus, Hamby, Boney-McCoy, & Sugarman, 1996) measures the frequency of violent acts received from a romantic partner in the past year. An abbreviated version was used for the study, comprising a list of 25 partner violence behaviors divided into four subscales: physical violence (12 items), psychological aggression (8 items), sexual coercion (3 items), and physical injury (2 items). The current study used the psychological aggression subscale only. Participants indicated the annual frequency at which the various behaviors were used by their partner on an eight-point Likert scale (0 = *this has never happened*, 7 = *not in the past year, but it happened before*, 1 = *once in the past year*, 2 = *twice in the past year*, 3 = *3 to 5 times in the past year*, 4 = *6 to 10 times in the past year*, 5 = *11 to 20 times in the past year*, 6 = *more than 20 times in the past year*). Responses are then recoded to the midpoint of the category (0, 0, 1, 2, 4, 8, 15, and 25, respectively). The total score ranges from 0 to 200, with higher scores indicating a

higher frequency of psychological aggression used by the partner against the participant. The psychological aggression scale previously demonstrated good internal consistency ( $\alpha = .79$ ; Straus et al., 1996). In the current study, alpha coefficients were .63 for men and .71 for women.

Participants were asked to provide information on aggression they received from their partner, whereas this study is concerned with perpetrated aggression. Therefore, the partner's score served as the index of the individual's aggressive behaviors. We believe this constitutes a methodological strength of the study, for a previous comparative study found that individuals tend to report committing fewer acts of aggression than their partner indicates receiving (Simpson & Christensen, 2005). Using scores of received aggression as indicators of aggression perpetrated by the partner may partially counter possible social desirability and recall biases, and prevent the underreporting of aggression.

## Results

**Preliminary analyses.** Data were first screened for missing data, multivariate outliers and normality. With less than 1% of the dataset missing, single imputation using expectation-maximization in SPSS 21.0 was used to replace the missing data. Nine cases of multivariate outliers were found using Cook's distance. Since these cases were mainly extreme due to high levels of psychological aggression, our main variable of interest, and that removing these would also require removing their partner, we decided to keep these cases in the main analyses. All variables were found to be normally distributed, except for psychological aggression which was positively skewed. A square root transformation corrected the non-normal distribution.

Preliminary correlations for both men and women were computed to identify potential control variables among sociodemographic data. Because studies have found associations between psychological aggression perpetration and alcohol use (Straus & Sweet, 1992; Testa &

Derrick, 2014) and depression (Kim & Capaldi, 2004), they were also inspected as potential control variables<sup>2</sup>. Analyses yielded weak associations between perception of partner support and age for both men ( $r = .09$ ) and women ( $r = -.13$ ), as well as between the use of psychological aggression and age ( $r = -.11$ ) and duration of the relationship ( $r = .10$ ) for women. Partner support was also found to be negligibly associated to alcohol use for men ( $r = -.08$ ) and women ( $r = -.08$ ) and to depression in both men ( $r = -.03$ ) and women ( $r = .02$ ). As well, associations were negligible between the use of psychological aggression and alcohol for men ( $r = .02$ ) and women ( $r = -.08$ ) and the presence of depression in men ( $r = -.01$ ) and in women ( $r = .02$ ). The small effect size of these correlations (Cohen, 1988) did not justify controlling for these variables.

Preliminary analyses showed that most men (74.8%) and women (80.5%) used psychological aggression toward their partner at least once in the past year. On average, men perpetrated 20 acts of psychological aggression against their partner, whereas women perpetrated 14 acts. This difference was statistically significant ( $t(209) = 3.733, p < 0.001, d = .26$ ).

Preliminary correlations between study variables are presented in Table 1. Men's and women's use of psychological aggression were positively and moderately correlated, which may reflect the bi-directionality of psychological aggression in couples. Partners' perceptions of support received were also positively, but weakly correlated. Men's attachment insecurity (anxiety and avoidance) and women's attachment avoidance were weakly and negatively correlated with their own perception of partner support. However, no significant association was

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<sup>2</sup> Among other measures, questionnaires to collect data on depression (Psychiatric Symptom Index; Ilfeld, 1976) and alcohol consumption (Alcohol Use Disorders Identification Test; Saunders, Aasland, Babor, De la Fuente, & Grant, 1993) were also included in the battery of questionnaires given to each participant.

found between attachment insecurity (anxiety and avoidance) and the use of psychological aggression for both men and women.

**Path analyses.** Although the preliminary correlations did not support the hypothesized mediational model (i.e., lack of association among attachment insecurities and psychological aggression), the proposed model was nevertheless tested to examine possible direct associations between attachment insecurity, perceived partner support, and psychological aggression, taking into account the couple as the unit of analysis. Path analyses based on the Actor-Partner Interdependence Model (Kenny, Kashy, & Cook, 2006) were used. This approach accounts for interdependence of observations found in dyadic data and provides statistical information for actor effects (i.e., how one person's outcome variable is predicted by their own independent variable) and partner effects (i.e., how one person's outcome variable is predicted by their partner's independent variable; Kenny et al., 2006). The model was tested using AMOS 19.0 with a maximum likelihood estimation and non-parametric bootstrapping method, specifying 1,000 randomly selected samples derived from our data. Correlations were specified between both partners' attachment variables as well as between partners' perceived support and psychological aggression variables. Direct paths were specified from individuals' attachment insecurities to their perceived partner support and use of psychological aggression (actor effects), as well as between their attachment insecurities and their partners' perception of partner support (partner effects). Indirect effects (mediation) were not tested due to the lack of a direct association between attachment insecurities and psychological aggression. Several indices were used to assess the model's goodness of fit: the goodness-of-fit index (GFI; values greater than .90 indicate good fit), the comparative fit index (CFI; values greater than .90 indicate a reasonable fit, whereas values equal to or greater than .95 indicate a good fit), the root mean

square error of approximation (RMSEA; values of .06 or less indicate a good fit; Hu & Bentler, 1999).

The initially proposed model did not fit the data well, as reflected by poor fit indexes ( $\chi^2(6, N = 210) = 25.826, p = .000$ ; GFI = .971; CFI = .861; RMSEA = .126, 90% CI [.078 - .177]). Examination of modification indices led us to specify two additional partner effects between perception of support and the partner's use of psychological aggression, for both men and women. Although not initially hypothesized, these additional associations appeared theoretically meaningful (as will be presented in the discussion), hence our decision to test these two additional direct paths.

The final model is presented in Figure 1. Goodness-of-fit statistics were found to be much improved ( $\chi^2(4, N = 210) = 1.839, p = .765$ ; GFI = .998; CFI = 1.000; RMSEA = .000, 90% CI [.000 - .071]). This model explained 6.9% of the variance in women's use of psychological aggression and 11.9% of the variance in men's use of psychological aggression.

Results indicated that both men's and women's higher attachment avoidance predicted their own perception of receiving less support from their partner, but not their use of psychological aggression. Men's and women's attachment anxiety did not predict their perception of partner support or use of psychological aggression. Significant actor and partner effects were found, with men's and women's low perception of support being directly linked to both their own (actor effect) and their partner's (partner effect) higher use of psychological aggression.

## Discussion

Using a dyadic approach, this study examined the association between attachment insecurity, perceived partner support and the use of psychological aggression in a large sample of



couples seeking couple therapy. We aimed to extend knowledge of the mechanisms underlying the association between attachment and psychological aggression by examining the possible mediating role of perception of support received from the romantic partner.

### **Attachment insecurity and use of psychological aggression**

Contrary to expectation, we did not find an association between men's and women's attachment insecurities (anxiety and avoidance) and their use of psychological aggression toward their romantic partner. For individuals higher on attachment anxiety, this absence of association is difficult to comprehend and goes counter to previous findings conducted in community-based samples of couples (Bartholomew & Allison, 2006; Lafontaine & Lussier, 2005; Péroquin et al., 2011). Methodological considerations may have contributed to these findings. In particular, a concern for social desirability may have been heightened in our participants since individuals' responses to questionnaires were not provided entirely anonymously – they were used by their psychologist in the course of therapy. Participants may have been hesitant to reveal psychological partner aggression in their relationships to their therapist before a solid working alliance was established, resulting in underreporting of aggression by participants. Additional studies where responses remain confidential would be necessary to corroborate our findings in clinical samples and determine the impact our research design may have had on individuals' willingness to divulge aggressive behaviors.

The lack of association between attachment avoidance and psychological aggression perpetration appears more in line with previous research showing that these two variables are less consistently associated (Lafontaine & Lussier, 2005; Péroquin et al., 2011). Theoretically, our findings are also coherent with the view that individuals higher on attachment avoidance tend to use aggressive behaviors only as a last resort to regulate closeness to their romantic partner

(Bartholomew & Allison, 2006; Mikulincer & Shaver, 2007). These individuals are more likely to withdraw from interpersonal conflicts and suppress overt expressions of anger and hostility, and thus less likely to use outright aggression toward their romantic partner (Bartholomew & Allison, 2006). Because the use of psychological aggression can provoke conflict or encourage retaliation from the partner, it would follow that higher avoidance would be less likely to be related to increased use of psychological partner aggression.

It is worthwhile to note that in this study, participants actually provided information on the frequency of psychological aggression *received* from their partner, and not on their own use of aggression. This information served to infer psychological aggression perpetration by the partner. Therefore, when interpreting results from this study, what appears as an “actor” effect (an association between an individual’s perception of partner support and use of psychological aggression) is in fact a “partner” effect (one person’s psychological aggression use is predicted by their partner’s perception of support received). This could also partially explain the lack of observed associations between attachment insecurities and psychological aggression. We postulated that individuals with attachment insecurities would use more psychological aggression toward their partner, but whether the partner actually perceives these aggressive behaviors may be a different story, especially in conflictual couples where both partners may resort to screaming, blaming, and criticizing to express discontentment and relationship dissatisfaction on a continual basis.

### **Attachment insecurity and perception of partner support**

Although perceived partner support was not found to mediate the link between attachment insecurity and the use of psychological aggression, several interesting direct links were observed and are worthy of mention. With respect to the association between higher

attachment insecurity and perception of lower partner support, our hypotheses were partially supported. Men and women high on attachment avoidance perceived lower support from their romantic partner. One possible explanation resides in the interdependence of support seeking (attachment) and support giving (caregiving) behaviors (Collins et al., 2011). When individuals are faced with a stressful situation, they may seek support and reassurance from their partner, who may then provide sensitive and appropriate care (Dakof & Taylor, 1990; Feeney & Collins, 2001). However, willingness and ability to reach out to the partner may differ based on a person's attachment profile and needs. Individuals high on avoidance tend to use less effective and more indirect strategies to request support (e.g., hinting, sulking; Collins & Feeney, 2000), are less likely to turn to their partner when they are upset (Rholes, Simpson, & Stevens, 1998), minimize their distress, and limit expression of their emotions (Mikulincer & Shaver, 2007). These behaviors provide ambiguous information about their needs and make it more difficult for their partner to provide them with the appropriate level of sensitive support (Collins & Feeney, 2000; Collins, Ford, & Feeney, 2011). This may explain why individuals high on avoidance report receiving less partner support (Collins & Feeney, 2004). Alternatively, individuals high on avoidance view others as unavailable (Mikulincer & Shaver, 2007). When their attachment system is activated, they tend to deny or suppress their distress to avoid intimacy and dependency on their partner, as well as possible frustration caused by the perceived lack of partner support (Mikulincer & Shaver, 2007). However, these strategies concomitantly taint their perception of others as unsupportive (Mikulincer & Shaver, 2007) and may contribute to their underestimation of the support offered by their partner.

Unexpectedly, no association was found between attachment anxiety and perception of partner support. This finding is surprising, as previous studies using general population samples

have found a negative association between attachment anxiety and perception of partner support (e.g., Collins & Feeney, 2004). It is possible that the lack of anonymity of participants' responses may provide some explanation for these results. Because individuals higher on attachment anxiety fear being rejected and abandoned (Collins & Read, 1990), they may prefer to conceal their perception of receiving low partner support (Shaver & Mikulincer, 2006) knowing that their responses will be shared with their therapist and their partner. This may have contributed to obscuring the potential and expected link between attachment anxiety and perception of partner support in our sample.

### **Perception of partner support and use of psychological aggression**

As predicted, our findings revealed that men's and women's low perception of partner support was linked to their greater use of psychological aggression. People who perceive low partner support could act out by insulting or denigrating their partner as a way of making their unmet needs heard and express their dissatisfaction with the support received in their romantic relationship (Bowlby, 1988).

Interestingly, our analyses also led us to consider initially unanticipated partner effects between perceived support and use of psychological aggression for both men and women. This addition appeared logical when considering the source of the data. The reader may recall that each individual provided information on their own perception of partner support as well as on their partner's (not their own) use of psychological aggression. Hence, individuals who perceived receiving low support from their partner also reported that their partner used more aggression. It is possible that individuals perceive low partner support because their partner is perpetrating psychological aggression against them in their relationship, consequently highlighting a bidirectional association between support dynamics and aggressive behaviors in couples.

## Limitations

Several limitations to this study should be mentioned. First, although we proposed a theoretical model suggesting directionality between variables, our data are correlational and cannot be used to infer causality. A longitudinal design would be necessary to investigate the temporal associations among romantic attachment, perceived partner support, and psychological aggression perpetration.

Second, only self-report questionnaires were used to assess each of the three constructs. Recall errors should be considered, in particular with the measure of psychological aggression that requires participants to report on the occurrences of aggression over the past year. Moreover, a concern for social desirability may have been heightened, because participants were informed that their responses would be shared with their therapists and potentially discussed in therapy with their partner. Future research may benefit from maintaining complete confidentiality of the answers provided to limit potential biases.

Third, the Revised Conflicts Tactics Scale (CTS2) is a widely used measure that assesses various forms of intimate partner violence, but it has several limitations. The scope of behaviors assessed is limited and items do not reflect all aspects of psychological aggression. For instance, there is no item pertaining to isolating or controlling the partner. Consequently, some forms of psychological aggression may have been experienced but not reported by participants, and thus not taken into account in this study. Additionally, some items (“my partner stomped out of the room or house or yard during a disagreement”) may be assessing poor communication skills rather than actual psychological aggression (Lawrence et al., 2012). Furthermore, the CTS2 does not provide information on the context in which acts of psychological aggression were committed, on what may have motivated such behaviors or on its consequences on the romantic

relationship (Murphy & O'Leary, 1989). Hence, it is not possible to determine if psychological aggression was used to fulfil an unmet need (as we hypothesized) or if it served some other purpose. Last, as mentioned above, individuals' perpetration of psychological aggression was inferred through their partner's reported receipt of such behaviors. On the one hand, inferring from partner data can be viewed as a strength of this study, as it may reduce individuals' tendency to underreport their own use of aggression (Simpson & Christensen, 2005). On the other hand, the use of an indirect measure may result in finding fewer significant associations between attachment insecurities, perception of partner support, and the use of psychological aggression. Future studies should consider using more comprehensive measures of psychological aggression, and do so by gathering both direct (self-reported) and indirect (via the partner) data about participants' use of psychological aggression, which would include information about both its occurrence and its context (e.g., motives, situational events) to better understand the mechanisms underlying psychological aggression in distressed couples.

Finally, participants were dyads beginning couple therapy at a specific private clinic, which limits variability within the sample (primarily Caucasian, well educated, and employed). Future studies should include couples from various settings to increase sociodemographic diversity and improve generalizability of findings.

### **Clinical implications**

In conclusion, results of this study highlight the importance of attachment avoidance on the perception of partner support, as well as the relevance of the perception of partner support for psychological aggression. Individuals' avoidance of relying on others, including a romantic partner, can predispose them to having a more negative perception of partner support (Mikulincer & Shaver, 2007). Furthermore, perceiving that one's partner is unresponsive or

provides poor support when needed may contribute to using non-optimal strategies to notify one's dissatisfaction with the level of support received or to communicate one's unfulfilled needs to the partner. These strategies may include psychological aggression (e.g., screaming, insulting, threatening). An individual's use of psychological aggression may also result in their partner perceiving less support within the romantic relationship. From a clinical standpoint, interventions aimed at improving supportive behaviors between partners could be useful to reduce the prevalence of psychological partner aggression in couples seeking therapy. Working with both partners to improve mutual understanding of each other's needs regarding support and encouraging the expression of these needs in a constructive and open manner could improve communication between partners and lessen the need to resort to psychological aggression to regulate closeness in their romantic relationship.

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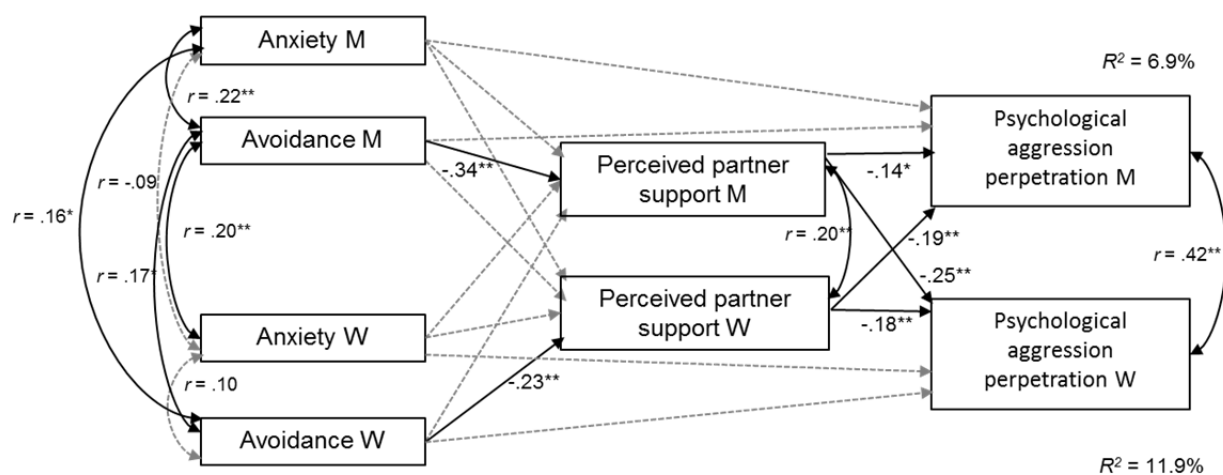


Figure 1. Path analyses showing romantic attachment predicting perceived partner support and use of psychological aggression ( $N = 210$  couples). Only significant standardized path coefficients are shown. Dashed lines represent non-significant paths. M=Men and W=Women. \*  $p < .05$  \*\*  $p < .01$ .

Table 1. *Correlations, Means, and Standard Deviations for Attachment, Perceived Partner Support, and Psychological aggression among Men and Women (N = 210 couples)*

Variables	1	2	3	4 <sup>a</sup>	5	6	7	8 <sup>a</sup>
1. Anxiety M		.22**	-.19**	.05	-.09	.16*	-.04	.09
2. Avoidance M			-.35**	.06	.20**	-.17*	.03	.09
3. Perceived partner support M				-.18**	-.03	-.01	.16*	-.29**
4. Psychological aggression M					-.01	.11	-.22**	.46**
5. Anxiety W						.10	.09	.08
6. Avoidance W							-.22**	.01
7. Perceived partner support W								-.20**
8. Psychological aggression W								
<i>M</i>	3.48	2.92	3.79	19.98	3.70	2.68	3.71	14.10
<i>SD</i>	.98	.84	.57	24.15	1.04	.89	.52	18.02

*Note.* M = Men; W = Women. <sup>a</sup> A square root transformation was performed for psychological aggression due to significant positive skew; untransformed means and standard deviations are presented here. \* $p < .05$ . \*\* $p < .01$ .