Attachment Behaviors as Mediators Between Family-of-Origin Quality and Couple Communication Quality in Marriage: Implications for Couples Therapy

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Attachment Behaviors as Mediators Between Family-of-Origin Quality and Couple Communication Quality in Marriage: Clinical Implications for Couples Therapy

Darin Knapp

A thesis submitted to the faculty of
Brigham Young University
in partial fulfillment of the requirements for the

Master of Science

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ABSTRACT

Attachment Behaviors as Mediators Between Family-of-Origin Quality and Couple Communication Quality in Marriage: Clinical Implications for Couples Therapy

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This study examined the mediating impact of couples’ attachment behaviors on the relationship between poor quality family-of-origin experiences and marital communication quality. The couple data for this study was collected from the Relationship Evaluation (RELATE) database (see www.relate-institute.org). An Actor Partner Interdependence Model using structural equation modeling was used to evaluate 261 marriage relationships. Results indicated that the relationships between family-of-origin experiences and communication quality are significantly related, with more family-of-origin problems associated with poorer positive communication skills. When attachment behaviors (accessibility, responsiveness, and engagement) were added to the model, it significantly mediated the relationship. Implications for clinicians treating couples who present with communication problems are discussed, as are directions for future research.

Keywords: family-of-origin, communication, attachment, couple therapy
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Introduction

Family-of-origin experiences have a profound influence on individuals’ lives. Experiences in one’s family system are formative, contributing to a person’s life course in many distinct ways, particularly in regards to their adult romantic relationships and marriages (Busby, Gardner, & Taniguchi, 2005; Holman et al., 2001; Whitton et al., 2008). Consequences associated with poor family-of-origin experience are great in both number and variety. Negative family-of-origin experiences including high family conflict, violence, hostility, and parental divorce detrimentally contribute to later couple communication patterns (Levy, Wamboldt, & Fiese, 1997), physical aggression (Busby, Holman, & Walker, 2008), negative self and partner attributions (Gardner, Busby, Burr, & Lyon, 2011), divorce and marital discord (Amato, 1996; Amato & Booth, 2001; Story, Karney, Lawrence, & Bradbury, 2004), and marital hostility (Whitton et al., 2008). In relationships where any one of these negative outcomes exists, couples may trace certain negative issues back to family-of-origin influences.

One important aspect of family-of-origin influence in couple relationships is the impact that family-of-origin experiences have on couple communication skills (Levy et al., 1997). Communication is a key component of marital success; positive communication within couples is strongly associated with marital satisfaction (Rehman & Holtzworth-Munroe, 2007). In contrast, negative communication in the couple context is predictive of divorce and marital discontent over time (Gottman, Coan, Carrere, & Swanson, 1998; Markman, Rhoades, Stanley, Ragan, & Whitton, 2010). With divorce rates and their accompanying costs increasing, analysis of negative communication variables in couple relationships is important to clinical practice and education programs.
Divorce is expensive in both its emotional toll and economic demand, but marital therapy could help to reduce the occurrence of divorce with its associated costs (Caldwell, Woolley, & Caldwell, 2007). As marital therapy and education become more effective in preventing divorce, the costs associated with divorce—economic, personal, and emotional—can be avoided.

Communication is only one facet of healthy couple interaction. Many other factors contribute to positive marital outcomes and functioning relationships. Attachment, one integral aspect of healthy couple relationships, has been a central focus in recent marriage research (Sandberg, Busby, Johnson, & Yoshida, 2012). Couples reporting healthy attachment behaviors are happier, friendlier, more supportive (Hazan & Shaver, 1987), more satisfied (Alexandrov, Cowan, & Cowan, 2005), more committed (Kirkpatrick & Davis, 1994), more intimate (Ng & Smith, 2006), and more trusting (Mikulincer, 1998) in their relationships than are couples who experience insecure attachment.

Because attachment behaviors contribute so greatly to marital health, expanding knowledge about attachment is an important addition to the marital health field. As family-of-origin experiences, communication styles, and couple attachment are studied, connections between these variables may help educators and therapists more fully understand variables that contribute to couple health. The present study aims to augment marital health literature by analyzing the role of attachment behaviors as a mediator between family-of-origin experiences and couple communication. If attachment behaviors can act as a vehicle for healing marital problems stemming from family-of-origin or communication quality, many powerful implications refuting fatalistic views
about the “doomed” fate of individuals from low-quality backgrounds would arise, thus impacting clinicians and those personally impacted by negative family-of-origin experiences.

**Review of Literature**

**Family-of-Origin and Couple Communication**

Many factors contribute to couples’ communication abilities and patterns, including family-of-origin experiences (Holman et al., 2001; Roberto-Forman, 2008), which act as particularly salient contributors to communication in couple relationships. Negative family-of-origin experiences influence individuals’ perceptions of conflict, which in turn can lead to negative communication cycles (Levy et al., 1997; Topham, Larson, & Holman, 2005), increased contempt, dyadic anger (Story et al., 2004), and hostility during conflict in the relationship (Whitton et al., 2008). In one longitudinal study (Whitton et al., 2008), researchers collected data in two waves, the first in adolescence and the second in adulthood after participants were married. Forty-seven individuals reported data at both collection points. At each point, participants reported information about family background hostility and interactions. In the second wave, participants also reported information about their marital interaction patterns and adjustment, and adult psychopathology. Results from this study suggest that family conflict patterns in adolescence predict adulthood marital conflict interactions; specifically, participants who experienced more hostility in family interaction patterns during adolescence reported more hostility experienced in their current couple relationships. These findings indicate that negative family-of-origin experiences may lead to detrimental effects on marital communication.
Negative communication patterns and styles within the family of origin are also predictive of marital discord and adverse marital outcomes over time (Holman et al., 2001), even within the first five years of marriage (Markman et al., 2010). In particular, hostility during conflict in family-of-origin negatively impacts couple relationships cyclically: children from openly hostile family-of-origin environments are more likely to have difficulty communicating effectively with future romantic partners. This can perpetuate a multigenerational cycle of negative family-of-origin experiences leading to adverse couple communication outcomes, with negative family-of-origin experiences for their children, and so on (Whitton et al., 2008).

Not only do family-of-origin experiences directly affect communication styles, but they also impact an individual’s attributions of his/her spouse’s communication style. In turn, the attributions made by one partner concerning the other partner’s communication styles impacts overall communication patterns in a relationship. In one study, females reported that their partners were not as clear or empathic in communication when in a defensive or contemptuous state. Both genders reported noticing more contempt and defensiveness in their partners if they themselves noticed those same communication styles in their own behaviors (Gardner et al., 2011).

Coming to terms with family-of-origin issues can potentially decrease negative communication and increase overall relationship satisfaction; this holds true for couples coming from both more negative family environments as well as those coming from positive family-of-origin backgrounds who are coming to terms with less severe issues (Fackrell, Poulsen, Busby, & Dollahite, 2011).
Family-of-Origin and Attachment

Family-of-origin experiences are a foundation for an individual’s attachment formation as well (Bowlby, 1958). As Bowlby (1958) found, a healthy attachment style within a family context influences interpersonal relationship formation and success throughout individual development. The type of family-of-origin environment experienced by an individual is theoretically seen as indicative of future relationship attachments made by that individual (Bowlby, 1958). In family-of-origin systems, parents have particularly high influence on their children’s attachment formation and its implications for future relationships. Also, parental marital quality is highly predictive of their adult children’s attitudes about romantic relationships (Busby et al., 2005), and positive parent-child relationships and parenting practices in adolescence are predictive of secure attachment formations (Dinero, Conger, Shaver, Widaman, & Larsen-Rife, 2008) and increased relational competence including more warmth and supportiveness between partners at later ages (Conger, Ming, Bryant, & Elder, 2001).

Other aspects of family-of-origin experiences contribute to attachment behavior development in significant ways: even sibling interactions are indicative of attachment-related behaviors in romantic relationships later in life because those interactions build interpersonal interaction skills (Conger et al., 2000). Family-of-origin rules have a significant effect on relationship development in young adulthood, with dysfunctional rules leading to less self-disclosure, lower self-esteem, and higher anxiety in romantic relationships (Larson, Taggart-Reedy, & Wilson, 2001), each of which may detract from secure attachment formation. Researchers have also found that the level of emotional expressiveness in the family-of-origin atmosphere is correlated with secure attachment
formation in later life. In one study (Smith & Ng, 2009), data was collected from 279 individuals (about half of the participants were currently married), analyzing participants’ current attachment types and the self-perceived expressive atmosphere in their respective families-of-origin. Individuals with secure attachments reported higher levels of emotional expression in their families-of-origin than individuals of other attachment types, suggesting that emotional expressiveness in family-of-origin environments is highly related to secure attachment behaviors in relationships. Overall, family-of-origin experiences, particularly those from premarital life, influence later marital quality, particularly in areas of attachment formation.

**Earned Attachment**

One form of attachment particularly salient to the present study is that of *earned attachment*. This type of attachment is typical for individuals who have been through difficult family-of-origin experiences that may have been debilitating to attachment formation skills, but have been able to demonstrate healthy attachment behaviors in their current romantic relationships. Those people who experience earned attachment can develop secure, healthy attachment behaviors in their romantic relationships along the same lines as those who developed healthy attachments in their families-of-origin (Paley, Cox, Burchinal, & Payne, 1999). Even after a relationship trauma has occurred, individuals categorized as having earned secure attachment experience the trauma similarly to those who have had continuous attachment, and experience less distress than those who are categorized as insecurely attached (Moller, McCarthy, & Fouladi, 2002).

The importance of earned attachment speaks loudest to those who have come from families of high conflict, abuse of any kind, or other family traumas that do not
foster healthy attachment development. The idea that healthy attachment can be created and shared despite background helps remedy the false conclusion that negative family-of-origin experiences are deterministic and/or permanently damaging. The present study hopes to further this idea by analyzing attachment behaviors’ impact on marital communication quality that has been negatively influenced by poor family-of-origin quality.

**Influence of Attachment on Marital Processes**

Attachment theory suggests that attachment security or lack thereof influences relationship history throughout development (Bowlby, 1958). As the postulations from this theory imply, attachment behaviors thus become an integral component of all interpersonal relationships. Attachment is also associated with certain physiological outcomes. Neural pathways, including the anterior cingulate cortex, are activated with feelings of physical pain; these same areas have shown activation coincident to feelings of relationship separation or rejection, associating emotional attachment needs with physiological brain functioning (Eisenberger, Lieberman, & Williams, 2003).

Aside from the physiological aspects of attachment theory, current research has focused heavily on attachment behaviors’ central role in relationship formation and success, especially within married couples and romantic partnerships. In particular, Emotionally Focused Therapy (EFT) for couples ties attachment theory to relational health and provides an attachment-themed modality for treatment of couple problems (Johnson, 2004). As EFT has become a more prominent and increasingly empirically supported treatment modality, attachment security in couple relationships has become
more emphasized as a central tenet of relationship functioning and marital health (Feeney, 2002; Mehta, Cowan, & Cowan, 2009).

Couples who exhibit secure attachment behaviors—accessibility, responsiveness, and engagement between one another—report many benefits to their relationships. These secure relationships are more enduring, happier, friendlier, more trusting (Feeney, 2008; Hazan & Shaver, 1987), more satisfied, and more committed than are relationships characterized by other, less healthy attachment types (Alexandrov et al., 2005; Kirkpatrick & Davis, 1994). Individuals experiencing secure attachment through these behaviors have more readily available memories of trust and validation from their partners, making them able to highlight and recall positive aspects of their couple relationships (Mikulincer, 1998).

In addition, secure attachment behaviors play an integral role in couple healing. One study of married heterosexual partnerships used inpatient group couple therapy on 36 dyads to demonstrate that securely attached couples are significantly more likely to respond positively to couple therapy than are insecurely attached couples (Conradi, Jonge, Neeleman, Simons, & Sytema, 2011). Secure attachment behaviors also mediate the relationship between mindfulness—defined as intrapersonal and interpersonal responsiveness and perception—and marital satisfaction. Researchers suggest that secure attachment behaviors act as the pathway through which one spouse experiences these perceptions and responses of the other (Jones, Welton, Oliver, & Thoburn, 2011), indicating that attachment plays an integral role in expression between spouses.

Couples experiencing insecure or avoidant attachments encounter fears of closeness, frequent emotional roller-coaster rides, feelings of jealousy (Hazan & Shaver,
attitudes of distrust (Mikulincer, 1998), low levels of intimacy (Ng & Smith, 2006) and heightened overall relational distress (Mondor, McDuff, Lussier, & Wright, 2011). Insecurely attached couples are less likely to benefit from couples therapy and associated treatments (Conradi et al., 2011), and are more likely to remember incidents of trust violation from their partners, leading toward the development of distrust and disconnect in the couple relationship (Mikulincer, 1998). Secure attachment behaviors enhance relationships in many ways, and are a significant part of couple relationships and clinical work within couple context.

**Consequences of Damaged or Unhealthy Attachment**

Despite the positive impact associated with secure attachment behaviors in couple relationships, even securely attached couples are bound to face instances where attachment expectations are not met. Johnson (1998) coined the term *attachment injuries* to characterize such instances. More precisely, these attachment injuries can be described as perceived abandonment, neglect, betrayal, disloyalty or breach of trust during an important time of need or specific moment of desire for support from attachment figures (Johnson, Makinen, & Millikin, 2001).

When attachment injuries occur in relationship contexts, couples experience different emotional effects. One of the most damaging consequences of these effects is when couples begin to distrust their partner’s accessibility, responsiveness, and engagement, and subsequently disconnect from each other. These distancing behaviors are associated with the weakening or loss of the relationship, particularly when active, intentional separation or withdrawing behaviors occur; instances like these often only further exacerbate partner fear and anxiety, potentially initiating destructive downward
spirals of interactions. Distancing behaviors can also increase the likelihood of more serious attachment injuries in the future, leading to heightened feelings of anger in partners who experience the injury. Overall, a sense of suffering was the predominant report in open-ended partner accounts of attachment injuries (Feeney, 2005), implying that individuals experience deep hurt when their spouses’ attachment behaviors are not exhibiting tangible/detected secure attachment.

After reviewing current research demonstrating that couple attachment behaviors significantly impact marital processes and well-being, a question arises whether attachment behaviors may be able to mediate the effects that certain other negative variables, e.g. communication, have on marital health (Coan, Schaefer, & Davidson, 2006; Sandberg, Harper, Miller et al., 2009). If attachment behaviors were shown to be significant mediators between negative family-of-origin variables and poor couple communication, then treating couple attachment may become a viable and effective therapeutic option for reducing negative communication and thereby ameliorating the potential for negative impact on the couple relationship from family-of-origin experiences and social learning. This would also provide a hopeful outlook for individuals coming from negative family backgrounds, demonstrating that poor family-of-origin quality may not predetermine poor marital quality.

**Summary**

Family-of-origin influences are highly salient predictors of adult romantic relationships, specifically in the areas of communication styles/abilities and formation of secure attachment behaviors. As the relationships between these variables are more closely examined, it remains important to assess for a potential mediating effect of
attachment behaviors between family background variables and communication in couple relationships. The potential mediating influence of attachment could imply direction for clinical intervention capable of altering negative destructive family-of-origin or communication patterns. The current study hypothesizes the following relationships to be similar for husbands and wives, including both self and spouse effects:

H1: Poor family-of-origin quality will be positively associated with more negative couple communication.

H2: Poor family-of-origin quality will be positively associated with decreased couple attachment behaviors.

H3: Attachment behaviors will be positively associated with couple communication.

H4: Attachment behaviors will mediate the relationship between family-of-origin quality and couple communication.

Methods

Participants

This study analyzes data from the RELATionship Evaluation (RELATE) data set (see www.relate-institute.org), using responses of 261 couples with matched-pair data. Among male participants, the average age was 32.59 years old (SD = 9.03, Range = 18-63). The mean age of female participants was 30.79 (SD = 8.44, Range 19-63). The length of marriage for the couples samples was varied, with 18% married for 6-10 years, 17% married for 1-2 years, 15% for 7-12 months, 12% for 3-5 years, 12% 0-3 months, 7% for 11-15 years, 7% for 16-20 years, 4% for 21-30 years, 3% for 31-40 years, 3% for 4-6 months, and 1% married more than 40 years. On average, the couples had less than
one child (.56). By far the majority of participants (94%) were from the United States or
Canada. Ethnicities represented among the male sample included 81.2% Caucasian,
5.4% African, 3.8% Asian, 3.8% Latino, 3.4% Mixed/Biracial, and 0.4% Native
American. Female participant ethnicities included 79.7% Caucasian, 5.4% African, 4.6%
Asian, 4.2% Latino, and 2.7% Mixed/Biracial. Religious trends among participants of
both genders were similar, with the male participants reporting 23.0% LDS, 23.8%
Protestant, 28.7% No Religion, 14.2% Catholic, and 3.1% Jewish, and females reporting
23.4% LDS, 25.7% Protestant, 24.1% No Religion, 11.9% Catholic, 2.3% Jewish, and
1.9% Buddhist. The majority of participants from both male and female samples reported
at least some form of higher education completion. Of males, 16.1% were currently
enrolled in college at data collection, with 5.7% having earned an associate degree,
30.3% a bachelor’s degree, and 25.7% a graduate or professional degree. Educational
trends among females were similar in terms of enrollment, with 20.3% currently enrolled
(at the time of data collection), and degrees earned including 6.1% associate degrees,
28.0% bachelor’s degrees, and 26.4% graduate/professional degrees. This sample
represents a highly educated and religious group that may include potential unknown
systematic differences and effects from a more generalized population.

**Procedure**

The RELATE questionnaire, which contains over 300 items, was developed in
1997 (Holman, Busby, Doxey, Klein, & Loyer-Carlson, 1997), and data has been
gathered using this instrument since then. Couples complete the questionnaire online and
pay $40.00 to view the results, which are an evaluation and summary of relationship
characteristics according to their responses. Each couple receives a 13 page self-
interpretative report, which they can use as an assessment of relationship quality. Couples are evaluated in four main contexts: individual, couple, family, and social. Participants answer questions about themselves regarding these four contexts, and also report perceptions of their spouses in the same four areas. RELATE participants are often recruited from college courses or websites. Data for this study was drawn from RELATE over a two-year period, from 2009-2011.

The RELATE questionnaire has undergone rigorous validity and reliability testing, proving to have good test-retest and internal consistent reliability and content, construct, and concurrent validity (Busby, Holman, & Taniguchi, 2001). For internal consistency and 2 test-retest samples, reliability coefficients for most measures scored between .70 and .90. Examination of construct validity showed that 92% of the items loaded in the correct subscale and while testing for overlap, appropriate correlations for similar items emerged (range between .45 and .65). Measures of RELATE were also compared with scales from the Revised Dyadic Adjustment Scale (RDAS) (Busby, Christensen, Crane, & Larson, 1995) to measure concurrent validity, revealing strong correlations in the appropriate direction with every subscale that was tested.

Measures

This study will focus on the RELATE items that measure family-of-origin characteristics, communication and conflict styles, and relationship attachment behaviors within the couple context. The RELATE scales measuring family-of-origin variables assess family quality (male Cronbach’s alpha = .839; female Cronbach’s alpha = .896), family influence (male Cronbach’s alpha = .818; female Cronbach’s alpha = .834), and perceived parents’ marital quality (male Cronbach’s alpha = .938; female Cronbach’s
alpha = .925). Participants evaluate statements from three subscales (family quality, family influence, and parents’ marital quality) that pertain to the topic of assessment; on these subscales, they respond by selecting an option from six-point Likert scales according to how much they agree with each statement. Responses on those scales range from “Strongly Disagree” to “Strongly Agree.” Some sample items from these scales are as follows: “We had a loving atmosphere in our family,” “There are matters from my family experience that I’m still having trouble dealing with or coming to terms with”, and “I would like my marriage to be like my parents’ marriage.” Together the three subscales for the latent variable family of origin quality held together well with factor loadings for the sample items ranging from .74 to .93 for the women and .66 to .92 for the men.

Communication quality has been measured in previous studies by the Communication Danger Signs Scale (Markman, Stanley, & Blumberg, 2010) and Communication Skills Test (Floyd & Markman, 1984), which, similar to the scales from RELATE used in the present study, assess self and partner communication traits that lead to conflict resolution. The current study measures communication with the RELATE Effective Communication Scale. This scale measures participant empathy—understanding each other when communicating (male Cronbach’s alpha = .854; female Cronbach’s alpha = .781), love—expressions of affection and inclusion between spouses (male Cronbach’s alpha = .792; female Cronbach’s alpha = .851), and clear sending—ability to adequately explain oneself to spouse (male Cronbach’s alpha = .832; female Cronbach’s alpha = .832) in communication processes. In this measure, participants respond to questions assessing how often they exhibit particular communication-related traits by selecting an option from five-point Likert scales, with responses ranging from
“Never” to “Very Often.” Some sample items from these subscales are, “I understand my partner’s feelings,” “I include my partner in my life,” and “I discuss my personal problems with my partner.” The Effective Communication Scale demonstrates strong reliability (Cronbach’s alpha = 0.73). Together the three subscales for the latent variable \textit{communication} held together well with factor loadings ranging from .77 to .79 for the women and .78 to .85 for the men.

Researchers have used measures of attachment such as the Experiences in Close Relationships Scale (Brennan, Clark, & Shaver, 1998), the Adult Attachment Interview (George, Kaplan, & Main, 1985), and the Couple Attachment Interview (Silver & Cohn, 1992) which measure aspects of attachment such as avoidance, anxiety, experience in relationships, and working models of attachment in romantic relationships (Mehta, Cowan, & Cowan, 2009). The present study uses RELATE to measure attachment behaviors in relationships; this assessment uses the Brief Accessibility, Responsiveness, and Engagement Scale, referred to as the BARE (Sandberg et al., 2012). Accessibility (physical and emotional availability of self/spouse to the other), responsiveness (attentiveness and listening between spouses), and engagement (feelings of connectedness in the marriage) are the three qualities analyzed in this scale, and combined scores in each domain comprise attachment behaviors within the couple context. Higher scores on the BARE demonstrate more secure attachment between spouses.

Participants read statements pertaining to each of these three attachment behaviors, and select responses from five-point Likert scales indicating how true each statement is to them as individuals. Possible responses range from “Never True” to
“Always True.” Three sample statements from this scale include, “My partner listens when I share my deepest feelings,” “It is hard for me to confide in my partner,” and “It is hard for my partner to get my attention.” The sum of BARE scores was used as the measurement for attachment in the current study (Cronbach’s alpha for males was .826, and for females was .819), and it measures both self and partner attachment behaviors. The BARE shows high reliability, with test-retest scores ranging from .60 to .75 for this scale. This is consistent with the phenomenon of attachment, which is quite stable over time. The range of reported BARE scores was from 13 to 30 for men, and from 16 to 30 for women.

**Analysis**

Basic statistical methods were utilized to provide mean and standard deviation scores on all key variables (see Table 1). The primary analysis was conducted using the Actor Partner Interdependence Model (APIM). APIM uses Structural Equation Modeling (SEM) techniques to account for the relatedness of couple scores by using the couple as the unit of analysis (Kenny, Kashy, & Cook, 2006). In this case, we examined the relationship between female predictor variables (family-of-origin experiences) to female outcome variables (communication quality) as mediated by couple attachment behaviors (BARE scores); male predictor variables to male outcome variables; female predictors to male outcomes; and male predictors to female outcomes (see Figure 1). The multivariate correlation procedure, SEM, was used because of its ability to test both direct and indirect relationships among several different variables that may be correlated using the AMOS (Analysis of Moment Structures) program (Kline, 2005). Standardized coefficients and
Goodness of Fit indices are reported to help identify relationships among variables and the appropriateness of the presented model.

**Results**

**Model Fit**

Goodness of fit indices suggest the model was a good fit for the data. The CFI for the model was .967, the TLI was .952, and the RMSEA was .065, with a chi-square of 131.575 (df = 63, \( p = .000 \)). CFI and TLI values of above .95 (Byrne, 2001) and an RMSEA value of below .05 indicates adequate model fit. The overall variance (R square) explained in the model for female spouses was 80%, with the R square for males at 81%. Initially, the analysis controlled for age and length of relationship of these married couples; however, controlling for these variables did not alter the significance of the pathways in the model.

**Direct Paths**

To test for the direct effect without attachment behaviors as a mediator, an APIM was run with only family of origin as a predictor and communication as the outcome. In the model, wife family of origin was a significant predictor of both wife (\( \beta = -.41; \ p < .001 \)) and husband (\( \beta = -.22; \ p < .001 \)) negative communication. Similarly, husband family of origin was a significant predictor of both wife (\( \beta = -.36; \ p < .001 \)) and husband (\( \beta = -.23; \ p < .001 \)) negative communication. Therefore, the results suggest negative family-of-origin experiences were significantly associated with poorer couple communication for all direct paths. However, when the variable (couple attachment behaviors) was added to the APIM to test mediation within the model, family-of-origin score no longer predicted communication for either spouse, suggesting mediation (see
Table 2 and Table 3). These tables show significant bivariate correlations for the variables used in the model. In the table explaining husband variables (Table 2), no variables correlated at higher than .7 except attachment behaviors with love (.774), and attachment behaviors with clear sending (.707). This makes sense, given the operational definitions of love and clear sending and their connections to secure attachment behaviors. For wife bivariate correlations (Table 3), no variables correlated at higher than .7 except two sets: first family influence and family quality (.735), which makes sense given that both are measuring family-of-origin experience; second, attachment behaviors and clear sending (.738), which, similar to husband variables, demonstrates a link between clear sending and secure attachment behaviors.

Further, a series of Sobel tests were run. In the first, wives’ family-of-origin quality was found to be significantly related to communication quality through the mediator of the wives’ attachment behaviors for both women (Sobel = -7.15, p < .000) and men (Sobel = -6.75, p < .000). Wives’ family-of-origin quality was also significantly associated with communication quality through the husbands’ attachment behaviors for both women (Sobel = -2.80, p < .005) and men (Sobel = -2.83, p < .005). Husbands’ family-of-origin quality was also significantly related to communication quality as mediated by the wives’ attachment behaviors for both women (Sobel = -2.19, p < .05) and men (Sobel = -2.18, p < .05). Husbands’ family-of-origin was also significant on impact of communication quality when mediated by the husbands’ attachment for both women (Sobel = -5.49, p < .000) and men (Sobel = -5.74, p < .000). The results of Sobel tests suggest that attachment fully mediated the relationship between family-of-origin and communication for both self and spouse paths.
**Indirect Paths**

As noted, the direct effect of family of origin experiences on positive communication was mediated by attachment. Specifically, wife family of origin was significantly and negatively associated with both wife ($\beta = -.43; p < .001$) and husband ($\beta = -.18; p = .003$) attachment behaviors. Because wife attachment was also significantly and positively associated with wife ($\beta = .83; p < .001$) and husband ($\beta = .14; p = .002$) positive communication, it appears that attachment is the mechanism through which family-of-origin impacted communication. In addition, husband family of origin was significantly and negatively associated with both wife ($\beta = -.16; p = .007$) and husband ($\beta = -.46; p < .001$) attachment behaviors. Husband attachment is also significantly and positively associated with wife ($\beta = .11; p < .05$) and husband ($\beta = .85; p < .001$) positive communication, and as with the wives, attachment again is the pathway through which family-of-origin impacted communication for husbands as well.

**Overall Model**

The R square coefficient for the full model was strong for both men (.80) and women (.81), meaning over 80% of the variance in positive communication for men and women was explained in the model. Originally, the model was analyzed without attachment behaviors inserted as a mediator. When attachment behaviors were removed, the pathways between family-of-origin and communication were significant at the .001 level, and both R square coefficients fell below .25. This contrasts starkly against the model’s extreme significance once attachment behaviors were added. Attachment behaviors seem to be a significant predictor of positive communication for both spouses.
Finally, no major gender differences among the direct and indirect paths in the model were found at any stage of the analysis for both self and partner.

**Discussion**

The presented model demonstrates that negative family-of-origin experiences do in fact contribute to negative couple communication quality. This supports previous research that indicates the positive correlation between family background and marital communication (Levy et al., 1997; Topham et al., 2005; Whitton et al., 2008). This could be explained by negative family-of-origin patterns impacting current relationship practices (Busby et al., 2005; Whitton et al., 2008). As Bandura (1977) originally hypothesized, social learning creates powerful blueprints from which individuals build personal experiences; family-of-origin may be one of the most influential social learning environments used as blueprint material for later behaviors. It may be that hurtful or damaging experiences, such as high conflict, abuse, lack of emotional safety, etc., when in one’s family-of-origin spill out into interactional patterns with one’s spouse (Roberto-Forman, 2008), an experience often described in therapy.

The model also shows that family of origin significantly contributes to attachment behaviors. This is true for both self and spousal attachment behaviors. Family background has been shown to impact attachment behaviors (Dinero et al., 2008; Smith & Ng, 2009) in previous studies. One possible explanation could be that because family-of-origin relationships are the original model and blueprint for attachment formation, those experiences provide models for future relationship attachment behaviors, as Bowlby (1958) originally hypothesized in his foundational research on attachment.
Positive relationships between attachment behaviors and communication quality were also discovered in the present study. This finding substantiates results from previous research indicating that healthy spousal attachment behaviors are strongly associated with better marital communication, and unhealthy marital attachment behaviors are associated with poorer communication quality (Domingue & Mollen, 2009).

As some of the main tenets of healthy attachment include responsiveness, engagement, and accessibility of each spouse to the other (Sandberg et al., 2012) it seems reasonable that attachment is linked to communication quality. For couples who experience relationships as secure, where partners are easily accessed, highly responsive, and intently engaged, communication is likely to be more positive because the connection of the couple invites healthy communication. The inverse is likely true as well, with insecurely attached couples experiencing unresponsiveness, disengagement, and inaccessibility, all of which are likely to inhibit positive communication and foster negative patterns.

The main objective of this study was to determine the effectiveness of attachment behaviors as a mediator between negative family-of-origin experiences and couple communication quality. Results indicate that healthy attachment behaviors do act as a powerful mediator between family background problems and marital communication. Conceptually this fits with research that shows the many benefits healthy attachment and its associated behaviors brings to marriage including more happiness, stronger sense of friendship, higher degree of trust (Feeney, 2008; Hazan & Shaver, 1987), and overall more marital satisfaction and commitment than relationships experiencing unhealthy attachment styles and behaviors (Alexandrov et al., 2005; Kirkpatrick & Davis, 1994).
Because of the positive relationship attributes encouraged and maintained in healthy attachment situations, it makes sense that negative family-of-origin experiences would be less impactful in the context of safe, secure relationships with one’s spouse. In spite of negative communication patterns learned in family-of-origin experiences by one or both spouses, secure attachment significantly decreases the likelihood of poor communication in the marital relationship. Our findings indicate that attachment is the vehicle for overcoming the apparent determinism of family-of-origin experiences on adult marital relationships. This provides an optimistic view of marriage for those who come from negative family backgrounds, allowing an “escape route” from perpetuating or reliving negative family experiences in their own marriages. These findings will be of interest to clinicians who work to help couples overcome family-of-origin issues and improve communication.

One particularly salient finding of this study is its support for a systemic perspective. Results indicated that spousal and individual variables predict outcomes in couple communication. For example, both partners’ family-of-origin significantly impacted their own as well as their partner’s communication quality. The attachment behavior variables yielded similar outcomes, with wife attachment behavior impacting husband communication quality, and husband attachment behavior affecting wife communication quality. Because partner variables were shown to predict outcomes for both self and spouse, the relational significance of this model demonstrates the importance of a systemic lens when researching marriage.
Implications for Clinicians

Many couples want to work on marital communication issues when they begin therapy. Often, negative family-of-origin experiences have contributed to negative communication issues (Whitton et al., 2008), and clinicians try to resolve those problems to enhance marital communication patterns and routines. The model demonstrates that working to resolve family-of-origin issues may be one way to improve communication in a marital context. This finding supports previous theories and research showing that working through past difficulties with family can be helpful in dealing with present issues in a marriage relationship (Framo, 1976). Clinicians may wish to follow transgenerational therapy modalities that focus on assessing negative family-of-origin patterns that may be presently occurring in clients’ own marriages, and use interventions aimed at changing those patterns and empowering clients to change their own systems for the better (Roberto-Forman, 2008).

The results also suggest attachment behaviors can mediate negative influences of family-of-origin; as a result, clinicians may wish to utilize attachment based approaches in therapy. One of the most prominent couple therapy modalities based on improving martial attachment is Emotionally Focused Therapy (Johnson, 2004). Therapy fitting this modality works to create bonding moments between partners during which core emotional needs of both partners (attachment-based needs such as safety, security, and connection to other) are met by each other. In this model, the fundamental approach to fulfilling attachment needs is through accessing primary emotion. Clinicians help couples identify, acknowledge, and express root emotions that underlie negative interactional patterns (Johnson, 2004). When a spouse can understand and explain
his/her emotional experience and articulate personal attachment needs, the clinician assists that spouse in asking his/her partner to fill those needs through connecting emotionally in some way. Once the partner is able to respond to the attachment needs, a bonding moment has occurred for the couple (Johnson, 2002).

The goals and methods of EFT fit well with addressing communication issues in a couple relationship. As bonding moments happen more frequently, attachment needs are expressed, and partners respond to those needs in healthy ways, partners are practicing positive interactional patterns of communication (Johnson, 2004). The core principles of identifying negative emotions, expressing them, and asking for partner help in remedying them demonstrate healthy communication patterns between partners. Although EFT focuses specifically on emotional work, the patterns learned and the attachment strengthening that occurs likely carry over into the communication domain in general. Partners know how to express to each other, and trust that the other will respond, both of which are foundational aspects to healthy communication. Thus, using EFT in couples therapy may help not only by strengthening and increasing attachment behaviors between partners, but also by implicitly addressing principles of communication into the emotional work at its core focus.

Overall, one of the highlights of this study is its emphasis that negative family-of-origin may not always predict negative marital outcomes. Clinicians may be able to use these findings to help clients coming from negative family backgrounds realize that their own marriages can still be positive experiences, particularly if attachment behaviors are improved and used to strengthen attachment and increase positive communication. Clients who experience this attitude (and associated treatment) from their therapists may
feel more like change is possible, even when coming from poor quality family environments. Realizing that clients are not “doomed” to strained marital relationships because of family-of-origin quality is empowering not only for the clinicians who work with them, but also for the clients themselves.

**Directions for Future Research**

The current study contains certain limitations that highlight the need for future research. First, the sample in the study is a self-selected group of motivated couples who sought out the RELATE as a paid-for, online tool to use in benefitting their marriage. Because of the sampling methods, many low-income couples, couples without access to online resources, and highly distressed or hopeless couples were likely precluded from the considered sample. Also, the couples from this sample are of relatively high socioeconomic status; a population sampled from lower economic groups may yield different results due to lack of resources. The population sampled also has a disproportionate number of Latter-day Saint participants in the religious domain, which also limits its applicability to a more diverse sample. This makes generalizing the findings to a widespread population difficult. Another sampling limitation in this study is that most of the respondents are Caucasian, which does not allow appropriate ethnic representation or generalization of the results. Data from this study were cross-sectional, which prevents causal or directional explanations over time from being inferred.

Future pathways for this research may wish to include wider parameters in sampling, to collect data from a more ethnically diverse sample as well as from a clinical sample of distressed couples. Also, longitudinal research drawing upon actual observed, coded behavior would help to understand which behaviors result in improved attachment.
One of the most interesting and clinically relevant future study directions would be to examine whether family-of-origin or attachment approaches in therapy work more quickly to resolve communication issues, and which modality provides the most lasting impact for spouses.

**Conclusion**

The present study has examined attachment behaviors as a mediator between family-of-origin experiences and couple communication quality. Overall, the analyzed model highlighted significant links between family-of-origin and communication, as well as suggesting a significant and highly clinically relevant mediating impact of attachment behaviors. The mediating influence of attachment behaviors is of interest to clinicians, indicating that attachment security in a marital context contributes to overcoming communication difficulties stemming from family-of-origin experiences for both spouses. These results suggest that strengthening attachment between spouses through attachment-based therapy (such as EFT) may help address communication problems between spouses, and in turn, help address issues stemming from negative family-of-origin experiences and/or negative outcomes of poor communication. Most importantly, our findings imply that people can change their own behaviors even if they come from a poor background—individuals can choose a different relationship pathway than what they have known from past experience.
References


### List of Tables

**Table 1.** Descriptive Statistics of Variables in Model

<table>
<thead>
<tr>
<th>Variables</th>
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**Table 2.** Husbands- Bivariate Correlations for variables in SEM model.

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Notes: p ≤ .05,* p ≤ .01,**
Table 3. Wives- Bivariate Correlations for variables in SEM model.

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Note: p ≤ .05, * p ≤ .01, **
Figure 1. Actor Partner Independence Model

Note: * $p < .05$, ** $p < .01$, *** $p < .001$; Standardized values in parentheses