Partner Attachment and the Parental Alliance

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ABSTRACT

Partner Attachment and the Parental Alliance

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Previous research has demonstrated that cooperation and support between parents, called the parental alliance, is an important predictor of parent and child well-being. Consequently, it is important to understand what factors promote the formation of a strong parental alliance. Because of research on the impact of attachment security on individuals' abilities to depend and rely on others and to appropriately manage conflict, partner attachment is a potential predictor of the parental alliance, with insecure attachment negatively weakening the parental alliance. This study analyzed data from 321 couples to examine the relationship between partner attachment and the parental alliance. Using the Actor Partner Interdependence Model, results indicated that attachment was significantly associated with parental alliance scores for both husbands and wives; specifically, higher anxious attachment for wives and for husbands significantly predicted decreased parental cooperation and increased triangulation and conflict. Likewise, avoidant attachment for wives and for husbands was significantly predictive of decreased cooperation and increased triangulation and conflict. These findings point to the utility of marital therapy focusing on increasing attachment as a way to strengthen parental attachment.

Keywords: attachment, parental alliance, coparenting, triangulation, cooperation, conflict
ACKNOWLEDGMENTS

My warmest thanks and appreciation go to my selfless advisor Rick Miller. I could not have done this without him. Thanks to Bryan and Li Ping for their statistical help and friendship, and to my Mom and Dad, for their endless prayers and encouragement. I cannot believe I made it.
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Partner Attachment and the Parental Alliance

There is substantial evidence that the level of cooperation and support between parents is a significant predictor of the well-being of family members. The cooperation between parents has been called the parental alliance, and it refers to parental partners acknowledging, respecting and valuing each other in their parental roles and tasks (Cohen & Weissman, 1984). When the parental alliance is strong, this relationship of mutual support is an important predictor of both positive parent and child outcomes. Parental alliance predicts children’s somatic symptoms and behavioral difficulties (Johnston, 1990), academic competence, and psychosocial adjustment (Brody & Flor, 1996), children's positive adjustment and boys adaptive psychological functioning (Jouriles, & LeCompte, 1991), behavioral difficulties (Bearss & Eyberg, 1998), externalizing and internalizing behaviors (McHale & Rasmussen, 1998; Schoppe-Sullivan, Mangelsdorf, Frosch & McHale, 2004), and preschoolers effortful control, the ability to self-regulate impulses (Karreman, van Tuijl, van Aken & Deković, 2008).

A strong parental alliance is also beneficial for adults. Parenting is an opportunity for adult development (Palkovitz, 1996). The support-giving and cooperation required to make the parental alliance work particularly fosters psychological development (Cohen & Weissman, 1984). It is not surprising that a strong parental alliance is associated with decreased levels of parenting stress (Abidin & Brunner, 1995). The supportive nature of mothers, in particular, may account for the finding that parental alliance is linked to greater paternal involvement (McBride & Rane, 1998; Brody & Flor, 1996). Brown, Schoppe-Sullivan, Mangelsdorf, and Neff’s (2010) finding of a more secure infant-father bond in the context of a strong parental alliance held even after controlling for paternal sensitivity. Thus, the parental alliance may prompt men’s growth and rewards that can only come from parenting and take stress off of over-worked mothers.
Recognizing the positive consequences of a strong parental alliance, it is important to understand the parental alliance and what factors predict it. Belsky, Crnic, and Gable (1995) found that the more similar spouses are in terms of personality, demographics, and child-rearing attitudes, the more likely they are to show supportive co-parenting. Satisfaction with the parenting partnership and the amount of work done by one’s spouse are important factors in a strong alliance for parents of children with disabilities (Abdo & Fischer, 2003). Adaptive traits of spouses are other predictors, including paternal flexibility and maternal self-control (Talbot & McHale, 2004). Not surprisingly, depression (Hughes, Gordon & Gaertner, 2004) and violence are linked with weak parental alliance (Katz & Low, 2004), which serves as a mediator between marital violence and children’s negative outcomes (Kan, Feinberg, & Solmeyer, 2012).

Although the spousal relationship represents a separate subsystem than the parental subsystem (Minuchin, 1974), it plays a key role in the formation of a parental alliance (Cohen & Weissman, 1984). In the case where parents are married to each other, marital consensus, marital adjustment, and ratings of relationship quality are strong predictors of parental alliance and positive parenting behaviors (Belsky, 1984; Bonds & Gondoli, 2007; Floyd, Gilliom & Costigan, 1998; Hughes, et al., 2004).

It is plausible that attachment may provide valuable insight into the concept of parental alliance for several reasons. Engaging in the parental alliance requires cooperation and the ability to support one’s partner in parenting tasks. One’s attachment is a key determinant in one’s ability to effectively show support without becoming emotionally over-involved, or flooded, or intrusive (Bosquet & Egeland, 2001; Mikulincer & Shaver, 2007) and in one’s willingness to be interdependent (Feeney, 1999). Furthermore, less security in the relationship may correlate with
interpersonal hostility and undermining behaviors that destroy the parental alliance (Van Egeren & Hawkins, 2004).

In addition to attachment’s influence on the ability to work with and rely on a partner, attachment experiences may influence an adult’s ability to feel comfortable in the caretaking processes. First, adult’s schemas of early experiences with caregivers can serve as guides for future parenting (George & Solomon, 1999). If adults grow up with negative experiences, they are more likely to fear parenting and show less interest in becoming parents (Rholes, Simpson, Blakely, Lanigan, & Allen, 1997). This reluctance could likely impact the parental alliance, particularly if one parent’s insecure attachment leads him or her to withhold engagement in the parenting process, leaving one parent with more of the burden.

Despite the plausible theoretical link between partner attachment and the parental alliance, little research has addressed this association. Therefore, the purpose of this study was to examine the effect of partner attachment on parental alliance.

**Literature Review**

**Parental Alliance**

The parental alliance stemmed from researchers’ (Cohen & Weissman, 1984) attempts to understand the finding that inter-parental conflict is a strong risk factor for negative child outcomes (Emery & O’Leary, 1982; Emery, Weintraub & Neale, 1982). They surmised that one reason children do poorly when there is high marital conflict is due to ineffective, conflictual parenting. Erel and Burman’s 1995 meta-analysis found support for this idea, which is termed the spillover hypothesis. It states that negative interactions in the marital dyad transfer into the parent-child interactions through various mechanisms, including scapegoating and triangulation of children into marital conflicts; parental modeling of dysfunction to children; decreased
parental emotional energy and attention given to children; and inconsistent and ineffective parenting strategies resulting from frequent disputes over parenting tasks (Easterbrooks & Emde, 1988; Emery, 1982; Margolin, Christensen & John, 1996).

The parental alliance is similar to other parenting arrangements and constructs such as “shared parenting” that implies men and women’s gender does not designate their role as primary caretaker (Deutsch, 2001), “parenting partnership” (Floyd & Zmich, 1991) and the coparental relationship, which is often denoted in cases of continued parenting after the dissolution of a marital relationship (Whiteside, 1998), but can be used synonymously with the parental alliance to refer to intact marriages, as well. For the purpose of consistency, we have chosen to use the term parental alliance in place of the term co-parenting throughout this paper.

Our choice of definition of the parental alliance is based on Margolin, Gordis and John’s (2001) conceptualization, who separate the parental alliance into triangulation attempts, levels of parental conflict surrounding parenting, and displays of cooperation. From their overview of co-parenting literature, Margolin and associates (2001) separated the parental alliance into the following three scales: conflict, cooperation and triangulation. Conflict refers to the amount of conflict between parents surrounding parenting issues, specifically, how often the parents argue or disagree about the child or rules, the level of hostility present, and how much each parent undermines the other's parenting. Cooperation refers to the extent to which mothers and fathers support, value, and respect each other as parents and the degree to which they ease one another's parenting burden. Triangulation reflects the extent to which parents distort parent-child boundaries by trying to form a coalition with the child that undermines or excludes the other parent.
**Background on Attachment**

Attachment theory is based on the pioneering work of John Bowlby (1969/1982), who conceptualized the quality of the parent-child relationship as crucial to a child's well-being. He explained the attachment-system as a species-universal set of behaviors that increase a child’s chance of survival. It is triggered by danger of the loss of an attachment figure and ends when a child feels secure again. Seeking the proximity of an attachment figure and displaying negative emotions to elicit comfort are the primary strategies for attaining security. When a child is consistently effective using primary strategies, he or she develops a secure attachment (for a thorough review see Mikulincer and Shaver, 2007). In other words, in a secure attachment relationship, a parent or caregiver is consistently available, warm, and responsive to his or her child's needs and serves as the child's safe haven and secure base. (Ainsworth, Blehar, Waters & Wall, 1978) This quality caretaking provides the child with the knowledge the caregiver will be available and nurturing in times of need. Children are then free to explore their environment and take risks, knowing they can return to the caregiver for help when the world presents challenges they cannot handle alone (Bowlby, 1973). The attachment relationship sets the foundation for children's emotional regulation, healthy viewing of self and others, and of the world as a safe place to explore. It also affects children's ability to form other relationships, and to effectively assume the role as a caregiver for future children (Mikulincer, Florian, Cowan & Cowan, 2002, p. 406)

**Attachment Styles**

Mary Ainsworth operationalized attachment styles in her classic experiment, the Strange Situation, which involved observing infants' reactions to their mothers in the laboratory before and after a short separation (Ainsworth et al., 1978). Children were separated into three
categories according to their use of strategies of felt-security, or physiological soothing in
response to the situation. Hyperactivators of the attachment system were characterized as
anxiously attachment, and deactivators as avoidantly attached (Ainsworth, et al. 1978;
Mikulincer & Shaver, 2007). These styles have since been empirically validated (Bartholomew
& Shaver, 1998; Hazan & Shaver, 1987)

Similarly to the mother-infant bond, romantic love can be characterized as an attachment
process (Hazan & Shaver, 1987). It follows a similar pattern of physical bonding processes
(nuzzling, eye-gazing, touching, holding) and intense yearning (Aron, Fisher, Mashek, Strong, &
Brown, 2005), separation anxiety, feelings of happiness and security in the presence of one’s
romantic partner and the time-period required to form a strong bond.

Anxiously-attached individuals fear being abandoned and may over-invest and cling to
attachment figures in their eagerness for love. They report desire for more intense involvement in
relationships that their partners are often unable to give. They report more relationships over the
course of their lifetime; however, these generally do not last as long or lead to long-term
commitment as often (Hill, Young & Nord, 1994). They are more likely to rely on sexual
intimacy as a route to meeting attachment needs and as a relationship barometer that can lead to
disappointment and risky sexual behaviors (Birnbaum, Reis, Mikulincer, Gillath, & Orpaz, 2006;
Davis, 2006) Their hunger to meet attachment needs and feel validated by a romantic partner can
promote co-dependence and relationship strain.

Avoidantly-attached individuals fear intimacy and reliance on others (Collins & Feeney,
2004). They distance themselves emotionally from meaningful relationships and report
involvement in shorter, less stable relationships, often fleeing at the first sign of relational
distress (Kirkpatrick & Hazan, 1994). They avoid intimacy, not necessarily because they view
themselves negatively, but because they tend to view others negatively. In fact, they may use strategies of self-enhancement to counter threats of low self-esteem (Mikulincer & Shaver, 2005). They may express less commitment to a partner and prefer casual, non-committed sexual relationships instead (Davis, 2006; Stephan & Bachman, 1999). Their fears of intimacy keep them from investing and gaining the benefits of a stable relationship.

**Partner Attachment and Relationship Outcomes**

Attachment experiences create schemas that are linked to future symptoms of psychopathology that may be detrimental to a stable relationship (Bosmans, Braet, Van Vlierberghe, 2010; Mikulincer & Shaver 2007, p. 378; Safford, Alloy, Crossfield, Morocco, and Wang, 2004) and relationship quality and satisfaction (Alexandrov, Cowan, & Cowan, 2005; Collins & Read, 1990; Cummings-Robertau 2010; Marchand, 2004; Treboux, Crowell & Waters, 2004). Attachment style can affect sexual functioning (Davis, Ace & Andra, 2002; Davis, Shaver, Widaman, Vernon, Follette & Beitz, 2006; Impett & Peplau, 2002), emotional intimacy (Campbell, Simpson, Kashy & Rholes, 2001; Clark & Brissette, 2003; Collins & Feeney, 2004), commitment to a relationship (Keelan, Dion & Dion, 1994), and relationship worries (Kobak, Ruckdeschel & Hazan, 1994). The well-established finding that relationship quality is predicted by partner attachment may be explained by securely-attached individuals’ more frequent reports of using positive strategies to maintain relationships, such as appropriate conflict management, interpersonal skills, and high-quality daily interactions, (Campbell, Simpson, Boldry, & Kashy, 2005; Mikulincer & Shaver, 2007, p. 302; Noller & Feeney, 2002). For example, secure individuals do not frequently get caught in demand-withdrawal patterns in arguments (Fitzpatrick, Fey, Segrin & Schiff, 1993), they show more conversational involvement and attentiveness (Feeney, Noller & Callan, 1994; Geurrero, 1996), and they are more affectionate in
conversation to romantic partners (Feeney, 1995). They are also more likely to be interdependent, meaning they are comfortable seeking and giving support in a relationship (Collins & Feeney, 2004).

Attachment styles are the theoretical basis for research regarding attachment within the couple relationship; however, most research does not use a categorical, or typological conceptualization to assess attachment in romantic relationships. Rather, attachment is viewed as behaviors that are measured along a continuum of anxious attachment and a continuum of avoidant attachment (Mikulincer & Shaver, 2007). Research has demonstrated that adult attachment is best characterized as reflecting individuals’ location on the continuous dimensions of anxious and avoidant attachment (Fraley & Waller, 1998). Consistent with this research, common measures of adult attachment, such as the Revised Experiences in Close Relationships Questionnaire (Fraley, Waller, & Brennan, 2000) and the Measure of Attachment Qualities (Carver, 1997), conceptualize anxious and avoidant attachment as behaviors that are measured on continuous scales, rather than placing an individual within a specific attachment style.

**Partner Attachment and Parental Alliance**

Very little research has directly examined attachment as a predictor of the parental alliance, although there is much research on attachment as a relevant factor to parenting quality, with secure attachment promoting better parenting outcomes. Cohn, Cowan, Cowan, and Pearson’s (1992) observed parenting behaviors of 27 families with preschool-aged children in mother-child and father-child play sessions, and measured partner attachment styles of the mothers and fathers. Those families in which both partners were insecurely attached were at greatest risk for less competent parenting. However, insecure mothers married to secure fathers
showed more warmth to their children. This finding points to the possibility of spousal attachment being an important indicator of the quality of parenting interactions.

The only study that could be found that directly examined the association between attachment and parental alliance was published by Belsky, Crnic, and Gable (1995). They examined parenting interactions of mothers and fathers of 15-month old, firstborn male toddlers. They explored the impact of parental differences in personality, child-rearing attitudes, and attachment styles on parental support and cooperation among 69 married couples that had a 15-month old, firstborn male child. They found that greater differences between spouses on extraversion, interpersonal affect, and anxious attachment predicted more frequent unsupportive emotional parenting interactions between partners. Greater differences in attachment anxiety, in particular, predicted fewer supportive parenting events, which they suggest may occur because anxiety may lead one spouse to withdraw from the other in parenting domains in order to not spark marital conflict, whereas more secure spouses may be able to handle parenting differences more easily.

Although the study by Belsky and associates (1995) examined the association between partner attachment and the parental alliance, its sample was limited to parents with only a young child. Research has shown that the parental alliance shifts as parental demands change with the developmental changes associated with children growing older (Margolin et al., 2001), which limits the generalizability of the Belsky and associates’ study (1995). More importantly, its focus was on assessing differences in attachment between partners, rather than examining the effects of partner attachment, as measured by anxious and avoidant attachment on the parental alliance. The current study expanded on Belsky and associates’ study (1995) by using a large study of
married couples and their adolescent child to examine the effect of partner attachment on the parental alliance.

**Method**

**Participants and Procedures**

For this study we analyzed participant data from Wave III of the Flourishing Families Project, a longitudinal study based in a large northwestern city. The project was designed to examine how family processes influence the positive social development of young adults from grade-school to early adulthood.

Families were primarily recruited using a purchased national telephone survey database (Polk Directories/InfoUSA). This database claimed to contain 82 million households across the United States and had detailed information about each household, including presence and age of children. Families identified using the Polk Directory were randomly selected from targeted census tracts that mirrored the socio-economic and racial stratification of reports of local school districts. All families with a child between the ages of 10 and 14 living within target census tracts were deemed eligible to participate in the FFP. Of the 692 eligible families contacted, 423 agreed to participate, resulting in a 61% response rate. However, the Polk Directory national database was generated using telephone, magazine, and internet subscription reports; so families of lower socio-economic status were under-represented. Therefore, in an attempt to more closely mirror the demographics of the local area, a limited number of families were recruited into the study through other means (e.g., referrals, fliers; \( n = 77, 15\% \)). By broadening the approach, the social-economic and ethnic diversity of the sample was increased.

All families were contacted directly using a multi-stage recruitment protocol. First, a letter of introduction was sent to potentially eligible families (this step was skipped for the 15
families who responded to fliers). Second, interviewers made home visits and phone calls to confirm eligibility and willingness to participate in the study. Once eligibility and consent were established, interviewers made an appointment to come to the family’s home to conduct an assessment interview that included video-taped interactions, as well as questionnaires that were completed in the home. The most frequent reasons cited by families for not wanting to participate in the study were lack of time and concerns about privacy. It is important to note that there were very little missing data. As interviewers collected each segment of the in-home interview, questionnaires were screened for missing answers and double marking. Subsequently, families were interviewed at yearly intervals for a second (2008), third (2009), fourth (2010), and fifth time (2011).

For this study, we analyzed data from Wave III because that was a wave in which adult attachment and parental alliance variables were included in the questionnaire. Also, because we were interested in examining the effect of adult attachment on the parental alliance, single parent families were excluded from analysis.

Wave III Sample Demographics

During Wave III, 321 two-parent families participated in the study. Just under ninety-five percent were currently married and had never been divorced. The average age of the women was 42.9 (SD = 5.40); for the men it was 44.72 (SD = 5.82). The ethnic majority was European American, which included 86.6% of fathers, 80.7% of mothers, and 77.9% of children. The remaining 5.4% of fathers, 5.9% of mothers, and 5.4% of children were African American, with 8.0% of fathers, 13.5% of mothers, and 16.7% of children identified as another ethnic group or multiethnic. The majority of mothers (68.6%), and fathers (70.9%) had a bachelor’s degree or higher. Income ranged from 15.8% of families making less than $59,000 per year, 33.7% making
between $60,000 and $99,000 a year, and 33.3% making between $100,000 and $149,000, with the remaining 17.2% making more than $150,000. The couples had an average of 2.44 ($SD = 1.02) children.

Measures

**Partner attachment.** Partner attachment was measured at the third wave of data collection using eight self-report items from the Revised Experiences in Close Relationships Questionnaire (Fraley, et al., 2000). This instrument assessed aspects related to anxious and avoidant attachment. The 7-point Likert response scale ranged from 1 (strongly disagree) to 7 (strongly agree). Sample questions include, “I often worry that my partner will not want to stay with me” and “I feel comfortable sharing my private thoughts and feelings with my partner.” Fraley and associates (2000) found the reliability to be .91 for the anxiety subscale and .90 for the avoidance subscale. The anxious attachment scale was created by summing the first four items and dividing by four to reflect the number of items in the scale. Higher scores indicated higher levels of anxious attachment. Similarly, the last four items were summed and divided by four to create the avoidant attachment scale, with higher scores indicating higher levels of avoidant attachment.

**Parental alliance.** Parental alliance was measured at Wave III using the 14-item Co-parenting Questionnaire (Margolin, Gordis, & John, 2001). Factor analysis conducted by the creators of the scale indicated that the scale consisted of three distinct factors. Consequently, the scale was separated into three subscales: cooperation, triangulation and conflict. Parents answered questions about how often they perceived certain parenting behaviors in their partner. Responses ranged from 1 (never) to 5 (always). The cooperation subscale included the following five items: “My partner tells me lots of things about this child”; “My partner fills me in on what
happens during this child’s day”; “My partner says nice things to me about this child”; “My partner asks my opinion on issues related to parenting”; and, “My partner shares the burden of discipline”. The triangulation subscale included the following items: “My partner says cruel or hurtful things about me in front of this child; “My partner uses this child to get back at me”; “My partner tries to get this child to take sides when we argue”; and “My partner delivers messages to me through this child rather than say them to me.” The conflict subscale included the following items: My partner and I have different rules regarding food, chores, bedtime or homework; “My partner and I have different standards for this child’s behavior”; “My partner argues with me about this child”; “My partner supports my discipline decisions”; and, “My partner undermines my parenting”. The cooperation, triangulation and conflict subscales were created by adding their respective items together and dividing by the number of items.

Cronbach’s Alpha coefficient for this measure, including all subscales, was previously found to be between .69 and .87 (Margolin, et al., 2001). For this sample, Cronbach’s Alpha coefficients were found to be .81 and .82 for the cooperation subscale, .83 and .78 for the triangulation subscale, and .79 and .82 for the conflict subscale at Wave III, for mothers and fathers, respectively. Although the overall scale has strong psychometric properties, Margolin and associates (2001) analyzed the three subscales separately because they reflected different dimensions of the parental alliance. Consistent with their use of the Co-parenting Scale, we divided the scale into the three subscales and did separate analysis for each subscale.

**Control Variables**

Parental education, parental race, length of marital relationship, and number of children were included in the analysis as control variables. Parental education was measured using categories for high school degree, attended some college, completed an Associates degrees,
completed a Master’s degree, and completed an advanced degree (PsyD, JD, PH.D., etc.). Race was collapsed into a dichotomous variable, with White being the reference category.

______________________________
Figure 1 about here

Analysis

Because the study included responses from both married partners, the Actor-Partner Interdependence Model (APIM) was used to capitalize on the dyadic data, where actor and partner effects were assessed (Kenny, Kashy, & Cook, 2006). (See figure 1 for a generic illustration of the model.) Another advantage of using the APIM statistical approach is that it accounts for the non-independence of the husbands’ and wives’ responses (Kenny et al., 2006). The statistical program Mplus was employed to test the model using structural equation modeling (Muthén, & Muthén, 2012). Full information maximum likelihood methods in the Mplus software accounted for missing data across variables. Separate models were run for anxious and avoidant attachment, and the subscales of parental cooperation, triangulation, and parental conflict were assessed separately as dependent variables (Margolin et al., 2001). Consequently, six separate models were run, three with anxious attachment as the independent variable and three with avoidant attachment as the independent variable.

Results

______________________________
Table 1 about here
Preliminary Results

As shown in Table 1, the respective mean scores for parental alliance cooperation, triangulation, and conflict for wives were 4.14 ($SD = .57$), 1.29 ($SD = .50$), 1.96 ($SD = .65$); and for husbands were 3.74 ($SD = .73$), and 1.21 ($SD = .42$), and 1.88 ($SD = .60$). The respective mean scores of anxiety and avoidance for wives were 2.11 ($SD = 1.26$) and 2.46 ($SD = 1.12$); and for husbands were 1.90 ($SD = 1.15$) and 2.37 ($SD = 1.23$).

The correlation analysis results indicated attachment was significantly correlated with all of the parental alliance subscales, for both wives and husbands. Anxious and avoidant attachment was significantly inversely correlated with cooperation for both husbands and wives, while they were positively correlated with triangulation and conflict. For example, the respective correlations of wife anxiety and wife and husband cooperation, and husband anxiety and wife and husband cooperation were -.25 ($p = .00$), -.23 ($p = .00$), -.18 ($p = .00$), and -.27 ($p = .00$).

Similarly, the respective correlations of wife avoidance and wife and husband cooperation, and husband avoidance and wife and husband cooperation were -.34 ($p = .00$), -.19 ($p = .00$), -.26, ($p = .00$), and -.39 ($p = .00$).

Path Model Results

Avoidant attachment. The goodness of fit analysis of the structural equation model using avoidant attachment indicated an adequate of goodness of fit. The chi-square was 1113.10, and the degrees of freedom were 775 ($p < .00$), which is an acceptable ratio ($\chi^2/df = 1.44$). The Tucker Lewis Index (TLI) and the Comparative Fit Index (CFI) were .91 and .92, respectively. The Root Mean Square Error of Approximation (RMSEA) was .040 and the Standardized Root Mean Square Residual (SRMR) was .058.
Results of the actor effects for the avoidant attachment model indicated that the only significant relationship was between wife avoidant attachment and wife conflict, with a standardized coefficient of .16 ($p = .01$). The relationship between avoidance and conflict was not significant for husbands .00 ($p = .98$). (See Table 2.) The association between avoidant attachment and cooperation was not significant for husbands -.10 ($p = .32$) and wives -.12 ($p = .23$). Similarly, the association between avoidant attachment and triangulation was not significant, with standardized coefficients of .00 ($p = .99$) for husbands and .14 ($p = .16$) for wives. These results held constant when controlling for ethnicity, education, length of relationship, and number of children.

All of the partner effects for the avoidant attachment model were significant, as indicated in Table 2. The relationships between husband avoidant attachment and wife cooperation, wife triangulation, and wife conflict were significant, with the respective standardized coefficients of -.41 ($p = .00$), .49 ($p = .00$) and .05 ($p = .00$). Similarly the relationships between wife avoidant attachment and husband cooperation, husband triangulation and husband conflict were significant, with the respective standardized coefficients of -.44, ($p = .00$), .62, ($p = .00$), and .62 ($p = .00$).

**Anxious attachment.** The goodness of fit analyss of the structural equation model using anxious attachment indicated an adequate goodness of fit. The chi-square was 1171.81, and the degrees of freedom were 776 ($p < .00$), which is an acceptable ratio ($\chi^2/df = 1.51$). The TLI and
the CFI were .92 and .93, respectively. The RMSEA was below .05, with a score of .044. The SRMR was .060.

Results of the actor effects for the anxious attachment model indicated that there was a significant relationship between anxious attachment and triangulation among the husbands .19 (p = .02); however, the relationship was not significant for wives .05 (p = .50). The association between anxious attachment and cooperation was not significant for husbands -.14 (p = .11) and wives -.06 (p = .49), and the relationship was not significant between anxious attachment and conflict, with standardized coefficients of .12 (p = .14) for husbands and .06 (p = .42) for wives. These results held constant when controlling for ethnicity, education, length of relationship, and number of children.

All of the partner effects for the anxious attachment model were significant, as indicated in Table 3. The relationships between husband anxious attachment and wife cooperation, wife triangulation, and wife conflict were significant, with the respective standardized coefficients of -.27 (p = .00), .57 (p = .00), and .64 (p = .00). Similarly the relationships between wife anxious attachment and husband cooperation, husband triangulation and husband conflict were significant, with the respective standardized coefficients of -29 (p = .00), .42 (p = .00), and .52 (p = .00).

Discussion

This study used data from families with children in early adolescence to examine the research question, “Does anxious and avoidant attachment predict parental alliance scores?” We
hypothesized that attachment would influence the parental alliance, with insecure attachment styles leading to a weaker parental alliance, specifically predicting that insecurely attached partners would experience increased triangulation and conflict and decreased cooperation.

Consistent with our expectations, those participants who reported higher levels of avoidant or anxious attachment were more likely to report lower levels of parental cooperation and higher levels of triangulation and conflict. However, the association between attachment and the parental alliance was primary in regards to participants’ perception of their spouses’ level of parental cooperation, triangulation, and conflict. In other words, levels of avoidant and anxious attachment were predictive of their spouses’ level of the three dimensions of parental alliance. This was true even though the zero-order correlations between attachment and their own parental alliance behaviors were significantly correlated. However, when both partners’ attachment scores were included in the Actor-Partner Interdependence Model, as well as the control variables, the association between attachment and one’s own parental alliance behaviors became nonsignificant, while the association between attachment and spouses’ parental alliance behaviors remained significant.

**Attachment and Triangulation**

The results of the study found evidence that insecure attachment is predictive of triangulation. Kerr and Bowen’s (1988) and Minuchin’s (1974) description of triangulation sheds light on why attachment insecurity could lead to triangulation. According to Bowen Family Systems Theory, triangulation occurs when one or both spouses experience anxiety, and they stabilize their relationship through the addition of a third member, such as a child. The involvement of another displaces the conflict and obscures its resolution often at the expense of parent-child relationships or child outcomes (Buehler & Welsh, 2009; Vetere, 2001). Minuchin
(1974) conceptualized different types of triangles, such as a rigid triangle in which parents attempt to enlist the child to join their side, or detouring triangles in which parents use their child as a way to distract from their problems (Kerig, 1995).

Literature regarding conflict and individuals with insecure attachment styles shows that their appraisal of it is generally more distressing than secure individuals. They also perceive their partner’s intentions in more hostile terms and they lack skills in conflict management, tending towards poorer strategies like coercion that escalate instead of resolve arguments (Mikulincer & Shaver, 2007, p. 268). Under this framework, the use of a triangle would both help to diffuse anxiety, and fall in line with negative patterns surrounding hostility. For example, the items we used for assessing triangulation regarding taking sides, saying cruel or hurtful things, or using the child as a tool for revenge falls in line with rigid triangulation, while the item assessing whether a partner used a child to deliver messages falls in line with detouring. The varying appeals of both types of triangles could help explain why anxiously attached men are more likely to triangulate their wives or why men might triangulate avoidant women and anxious women.

**Attachment and Parental Cooperation and Conflict**

This study’s findings of significant associations between attachment and parental cooperation and conflict is consistent with research suggesting that insecure attachment can impede cooperation and reliance on others, as well as healthy conflict management. Mikulincer and Shaver (2007) found that participants who were asked to promote closeness and cooperation on a team who were anxiously or avoidantly attached were less effective in fulfilling the objective compared to those who were secure (p.271). They suggest that insecurity promotes over-focus on one’s needs to avoid intimacy and closeness, for those with high avoidance, and to avoid rejection, for those with high anxiety. These worries may prevent them from effectively
coordinating interpersonal cooperation. Similarly, Lynch’s study (2013) on attachment, autonomy, and emotional reliance found that young adults who had avoidant partners were less willing to turn to them for help.

Based on this perspective, in parenting situations regarding cooperation with one’s spouse, a partner’s avoidance and lack of emotional closeness may train the other to stop relying and asking for help regarding parenting issues. On the other hand, anxious attachment may hinder an individuals’ inability to effectively manage the conflict and coordination required to depend on his or her partner in the demanding task of parenting. This could occur by either over-dependence on his or her spouse or because of fears of engaging his or her spouse in the parental subsystem because it could spark conflict and jeopardize the wellbeing of the couple relationship.

In insecurely attached individuals are not as well equipped to handle conflict for a variety of reasons. For example, those who are insecurely attached are less likely to show affection and warmth during conflictual discussions (Feeney, 1998), and they are more likely to show rejection in their facial expressions toward their spouses during a disagreement (Kobak & Hazan, 1991). They also report more frequent conflicts with their partners (Campbell et al., 2005) and are more likely to use negative strategies that escalate conflict, such as coercion (Marchand, 2004). Because the task of coordinating ideas about how to raise and discipline children and how to enforce rules poses ample opportunity for conflict between parents, the tendency of insecurely attached individuals towards poorer conflict management fits with this study’s finding of significant effects for increased conflict, with increased anxiety and avoidance, for both husbands and wives.
Limitations and Directions for Future Research

Limitations that may have impacted our outcomes was the stage in the life course of our participants. In one respect, our study added to the research by contributing new information about the parental alliance during the adolescent years of a child. However, much of the literature on the parental alliance examines earlier infancy and childhood, giving this study less context for interpretation. Using data from a longer time span of early childhood or infancy to the current time frame may have provided a broader framework for studying the relationship between partner attachment and the parental alliance.

Clinical Implications

This study points to the importance of assessing for the parental alliance when treating maritally distressed couples, because insecure attachment could be indicative of triangulation. Salvador Minuchin's seminal efforts in family therapy emphasizes the importance of the marital and parental subsystems as the foundation of the family system (Minuchin, 1974). In line with our findings, his empirically validated model of Structural Family Therapy focuses on strengthening subsystems one at a time by maintaining appropriate boundaries between children and parents in order to avoid inappropriate enmeshment of systems, such as through the use of triangulation (Minuchin, 1974; Vetere, 2001).

Triangulation has long been emphasized as an obstacle to healthy family functioning in Family Systems Theory (Kerr & Bowen, 1988). Wang’s and Crane’s (2001) findings support the detrimental effect of triangles on children and illustrate the assumption that marital problems can spill over into other subsystems. Their study examined the links between marital satisfaction, marital stability, triangulation and childhood depression. They found that when fathers reported low marital satisfaction and perceived family triangulation was occurring, their children had the
highest depression scores of the children in the sample. This study, in combination with our findings further suggests that problems in the couple relationship may place children at risk via negative interaction patterns such as triangulation.

In addition to focusing on interactions between subsystems as in Structural Family Therapy (Minuchin, 1974), the results of this study also suggest that modifying the attachment behaviors in therapy via couples therapy that focuses on attachment, such as Emotionally Focused Couples Therapy, may have the added benefit of improving the parental alliance. Decreasing the anxiety and negative patterns among insecurely attached partners could be done in therapy through softening of hostility and anger to the primary emotions of sadness and processing of attachment injuries to promote the open expression of needs (Johnson, 1996). This new way of interacting could help to bypass the need for triangulation and may increase parental cooperation and reduce conflict.
References


Davis, D., Shaver, P. R., Widaman, K. F., Vernon, M. L., Follette, W. C., & Beitz, K. (2006). 'I can't get no satisfaction': Insecure attachment, inhibited sexual communication, and


Figure 1. Structural Model for Husbands’ and Wives’ Partner Attachment and Parental Alliance, Controlling for Education and Ethnicity
Table 1

Correlations for Parental Cooperation, Conflict, Triangulation, Attachment Avoidance and Anxiety, Number of Children, Relationship Length, Education, and Ethnicity

<table>
<thead>
<tr>
<th></th>
<th>Mean (SD)</th>
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<th>3</th>
<th>4</th>
<th>5</th>
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<th>13</th>
<th>14</th>
<th>15</th>
<th>16</th>
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<tbody>
<tr>
<td>1. Wife Coop. (^a)</td>
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<tr>
<td>2. Wife Triang. (^a)</td>
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<tr>
<td>3. Wife Conflict (^d)</td>
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<td>.65**</td>
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<td>4. Hus. Coop. (^b)</td>
<td>3.74 (.73)</td>
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<td>.25**</td>
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<td>7. Wife Anxiety</td>
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<td>8. Wife Avoid.</td>
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<td>.29**</td>
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<td>11. Wife Edu.</td>
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<td>-.11**</td>
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<td>12. Hus. Edu.</td>
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<td>14. Hus. Ethnicity</td>
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<td>-.04**</td>
<td>-.06**</td>
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</table>

Note: Coop.: Cooperation, Triang.: Triangulation, Avoid.: Avoidance, Edu.: Education, Hus: Husband, Rel: Relationship : *p<.05; **p<.01., a: As reported by Husband, b: As reported by Wife
Table 2

*The Effect of Avoidant Attachment on Parental Alliance*

<table>
<thead>
<tr>
<th>Effect</th>
<th>Standardized Coefficients</th>
<th>P</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Actor Effects</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Husband Avoidant Attachment → Husband Cooperation&lt;sup&gt;a&lt;/sup&gt;</td>
<td>-.10</td>
<td>.32</td>
</tr>
<tr>
<td>Wife Avoidant Attachment → Wife Cooperation&lt;sup&gt;b&lt;/sup&gt;</td>
<td>-.12</td>
<td>.23</td>
</tr>
<tr>
<td>Husband Avoidant Attachment → Husband Triangulation&lt;sup&gt;a&lt;/sup&gt;</td>
<td>.00</td>
<td>.99</td>
</tr>
<tr>
<td>Wife Avoidant Attachment → Wife Triangulation&lt;sup&gt;b&lt;/sup&gt;</td>
<td>.14</td>
<td>.16</td>
</tr>
<tr>
<td>Husband Avoidant Attachment → Husband Conflict&lt;sup&gt;a&lt;/sup&gt;</td>
<td>.00</td>
<td>.98</td>
</tr>
<tr>
<td>Wife Avoidant Attachment → Wife Conflict&lt;sup&gt;b&lt;/sup&gt;</td>
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<td>.01</td>
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<td><strong>Partner Effects</strong></td>
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<td></td>
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</tr>
<tr>
<td>Wife Avoidant Attachment → Husband Cooperation&lt;sup&gt;a&lt;/sup&gt;</td>
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<td>.00</td>
</tr>
<tr>
<td>Husband Avoidant Attachment → Wife Triangulation&lt;sup&gt;b&lt;/sup&gt;</td>
<td>.49</td>
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<tr>
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<td>Husband Avoidant Attachment → Husband Conflict&lt;sup&gt;b&lt;/sup&gt;</td>
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<td>.00</td>
</tr>
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</table>

Model Fit: Chi-square = 1113.10 (df = 775); RMSEA = .040; SRMR = .058; CFI = .92; TLI = .91. *Note.* a: As reported by wives b: As reported by husbands
Table 3

*The Effect of Anxious Attachment on the Parental Alliance*

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<tr>
<th>Actor Effects</th>
<th>Standardized Coefficients</th>
<th>P</th>
</tr>
</thead>
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<tr>
<td>Husband Anxious Attachment → Husband Cooperation(^a)</td>
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</tr>
<tr>
<td>Wife Anxious Attachment → Wife Cooperation(^b)</td>
<td>-0.06</td>
<td>0.49</td>
</tr>
<tr>
<td>Husband Anxious Attachment → Husband Triangulation(^a)</td>
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<td>0.02</td>
</tr>
<tr>
<td>Wife Anxious Attachment → Wife Triangulation(^b)</td>
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<td>0.50</td>
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<td>Husband Anxious Attachment → Husband Conflict(^a)</td>
<td>0.12</td>
<td>0.14</td>
</tr>
<tr>
<td>Wife Anxious Attachment → Wife Conflict(^b)</td>
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<td>0.42</td>
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</table>

<table>
<thead>
<tr>
<th>Partner Effects</th>
<th>Standardized Coefficients</th>
<th>P</th>
</tr>
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<tr>
<td>Husband Anxious Attachment → Wife Cooperation(^b)</td>
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<tr>
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<td>Husband Anxious Attachment → Wife Triangulation(^b)</td>
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<tr>
<td>Husband Anxious Attachment → Wife Conflict(^b)</td>
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<tr>
<td>Wife Anxious Attachment → Husband Conflict(^a)</td>
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<td>0.00</td>
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</tbody>
</table>

Model Fit: Chi-square = 1171.81 (df = 776); RMSEA = .044; SRMR = .060; CFI = .93; TLI = .92. *Note.* \(^a\): As reported by wives; \(^b\): As reported by husbands.