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# Mutual Influences in Adult Romantic Attachment, Religious Coping, and Marital Adjustment

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In this study, we examined associations among romantic attachment anxiety and avoidance, positive and negative religious coping, and marital adjustment in a community sample of 81 heterosexual couples. Multilevel modeling (MLM) for the Actor-Partner Interdependence Model (APIM; Cook & Kenny, 2005) was used to analyze data from both spouses. Romantic attachment avoidance was associated with less positive religious coping, and romantic attachment anxiety was associated with more negative religious coping. Findings are discussed in light of Hall, Fujikawa, Halcrow, Hill, and Delaney's (2009) Implicit Internal Working Model Correspondence framework. We also found support for Sullivan's (2001) compensation model for attachment avoidance but not for attachment anxiety. That is, positive religious coping buffered the deleterious relationship between attachment avoidance and marital adjustment. However, positive religious coping did not attenuate the negative impact of attachment anxiety on marital adjustment and was associated with higher marital adjustment only for those individuals with low attachment anxiety. Surprisingly, negative religious coping reduced the negative impact of the partner's attachment anxiety on respondents' marital adjustment. Results suggest that attachment theory is one useful approach to conceptualizing religious coping, highlight the complexity of these associations, and point to future research directions. Findings also support the consideration of both attachment dimensions and religious coping in research and applied work with adults and couples.

*Keywords:* romantic attachment, religious coping, marital adjustment, correspondence, compensation



The attachment system has been conceptualized as an evolved strategy for coping with stress by turning to others for security and support (Kobak, Cassidy, Lyons-Ruth, & Ziv, 2000). Many individuals also turn to religion during times of stress and use religious coping strategies to regulate affect (Pargament, 1997). Two separate literatures connect marital functioning to both attachment processes and religiosity, yet little has been done to integrate them. New research suggests that attachment and religiosity may interact to influence marital adjustment. For example, researchers have found that religious commitment attenuates the negative impact of attachment avoidance on marital adjustment (Lopez, Riggs, Pollard, & Hook, 2011). Given established associations of adult attachment to various coping strategies and other religious constructs, we hypothesized that religious coping may be related to attachment patterns. Grounded in the Implicit Internal Working Model Correspondence framework (Hall, Fujikawa, Halcrow, Hill, & Delaney, 2009), we tested associations between romantic attachment and both positive and negative religious coping strategies. We then tested religious coping as a potential buffer in the relationships between attachment dimensions and marital adjustment.

## Attachment, Coping, and Relational Functioning

Bowlby (1969/1982) proposed that interactions between infants and caregivers are stored in internal working models (IWMs) of self and other, which contribute to a consistent attachment strategy that persists into adulthood. IWMs may be understood as implicit relational memories that give individuals a "gut" sense of how to be with others affectively, cognitively, and behaviorally (Mikulincer & Shaver, 2007; Schore, 2000). Attachment figures are distinguished from other relationship partners by the search for security and comfort in the relationship (Ainsworth, 1991). Adults may use friends, therapists, and clergy for attachment functions (Ainsworth, 1991), but the romantic pair bond is the prototype adult attachment relationship (Bowlby, 1969/1982). Much has been debated regarding multiple conceptualizations of attachment, the measurement of attachment, and the relationship between childhood attachment and self-report measures of adult attachment. Two major lines of adult attachment research have emerged over the last two decades. The developmental tradition focuses on the parent–child relationship and measures unconscious states of mind with regard to early attachment experiences, typically using the Adult Attachment Interview (AAI), whereas the social/person-

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ality psychology tradition is interested in current relationships, particularly romantic attachments, and uses self-report measures of attachment as "convenient surface indicators of differences in attachment-related cognitions, emotions, and behavioral tendencies which are partially unconscious" (Shaver & Mikulincer, 2002, p. 137).

Evidence from both research lines support the assumption that adult attachment is related to the same innate system and rooted in parent–child attachment. Longitudinal studies indicate that infant attachment is related to adult attachment assessed by the AAI (Grossman, Grossman, & Waters, 2005). Retrospective research suggests that perceptions of early parent–child relationships are also associated with self-reported adult attachment style (Bringle & Bagby, 1992; Priel & Besser, 2000). Furthermore, longitudinal studies show significant associations between early parent–child relationships measured by the Strange Situation or an observational measure of maternal caregiving and adult romantic relationships assessed with an interview or romantic attachment questionnaire, respectively (Roisman, Collins, Sroufe, & Egeland, 2005; Zayas, Mischel, Shoda, & Aber, 2011). However, attachment scholars have also suggested that adult attachment is influenced by later experiences and current attachment relationships, in addition to early relationship experiences (Kobak, 1999; Sroufe, Carlson, Levy, & Egeland, 1999; Zayas et al., 2011).

Bartholomew and Horowitz (1991) discussed adult attachment in terms of positive or negative self and other models, with various combinations of self/other models resulting in four attachment styles. Research suggests that two dimensions underlie adult attachment style (e.g., Simpson, Rholes, & Nelligan, 1992). These "factors can be viewed in terms of either their affective-behavioral names, 'anxiety' and 'avoidance,' or their cognitive/representational (working-model-related) names, 'model of self' and 'model of other'" (Crowell, Fraley, & Shaver, 2008, p. 617). *Attachment anxiety* represents a negative model of self, fear of rejection or abandonment, and strong desire for closeness. *Attachment avoidance* represents a negative model of the other and discomfort with and devaluation of closeness, self-disclosure, and dependence (Mikulincer & Shaver, 2007). Low anxiety and avoidance characterize attachment security, which is related to more adaptive coping and relational functioning (Mikulincer & Shaver, 2007). High attachment anxiety and avoidance are risk factors for psychopathology, ineffective coping, and marital dysfunction (Onishi, Gjerde, & Block, 2001; Riggs, 2010).

The attachment system has been conceptualized as an emotion regulation system, with each attachment pattern associated with different approaches to coping with stress (Ein-Dor, Mikulincer, & Shaver, 2011; Schore, 2000). Attachment behaviors (e.g., crying) function to gain proximity to and protection from a caregiver when triggered by perceived threat. Ideally, once comforted, the attachment system deactivates (e.g., crying stops), and the individual explores independently. Securely attached individuals tend to be comfortable communicating their distress, appraise events positively, seek support from others, and have high coping self-efficacy (Larose, Boivin, & Doyle, 2001; Mikulincer & Shaver, 2007; Schottenbauer et al., 2006). In contrast, high attachment avoidance is associated with deactivation of the attachment system in stressful situations, which might include minimization of distress and a preference for self-reliance (Larose et al., 2001; Mikulincer & Shaver, 2007; Schottenbauer et al., 2006). On the other hand, individuals with high attachment anxiety tend to respond to threats with hyperactivation of the attachment system, which manifests in clinging behavior. These individuals tend to exaggerate threat and their inability to cope, and thus fear abandonment by the attachment figure.

A large body of research connects attachment security and positive romantic relationship adjustment (e.g., Banse, 2004; Jarnecke & South, 2013), and proposed mechanisms include affect regulation, emotional resilience when disappointed, and forgiveness (Davila, Bradbury, & Fincham, 1998; Feeney, 2005; Kachadourian, Fincham, & Davila, 2004). From an attachment perspective, relationship satisfaction depends on both partners' ability to meet the other's security needs. Attachment insecurity interferes with this, with attachment avoidance promoting unavailability and attachment anxiety promoting intrusiveness (Feeney, 2005). Most studies show that partners of secure individuals are more satisfied than partners of insecure individuals, most often supporting the path leading from one partner's insecurity to the other's dissatisfaction rather than vice versa (Mikulincer & Shaver, 2007).

## Religious Coping and Marital Adjustment

Sullivan's (2001) compensation model posits that religiosity moderates the relationship between marital vulnerabilities and marital satisfaction. Religiosity is a multifaceted construct that includes religious affiliation, beliefs, and practices. The effects of any one facet can be misrepresented when religiosity is broadly assessed. One study found that religious commitment (i.e., the integration of religion in daily life) buffered the negative impact of attachment avoidance but exacerbated the impact of attachment anxiety on marital adjustment (Lopez et al., 2011). We hypothesized that religious coping may reduce the impact of attachment insecurity on marital adjustment by providing another resource for dealing with stress. Pargament (1997; Pargament, Smith, Koenig, & Perez, 1998) defined religious coping as the use of religion to find meaning and comfort when faced with stressful events. He conceptualized religious coping as the mediator between religiousness and mental health outcomes, and he noted that it can include positive or negative religious appraisals of events and religious behaviors.

Research has shown that religious coping moderates links between stressors and better mental, physical, and spiritual well-being (Pargament, 1997). In particular, religious coping influences personal adjustment to negative marital events (Krumrei, Mahoney, & Pargament, 2011). A few studies have found associations between religious coping and marital satisfaction (e.g., Tremblay, Sabourin, Lessard, & Normandin, 2002), but religious coping has never been tested as a moderator of the links between attachment dimensions and marital adjustment. The Brief RCOPE (Pargament et al., 1988) assesses positive as well as negative forms of religious coping, and its wording is broadly applicable. Pargament et al. distinguished between positive and negative religious coping strategies, based on their associated outcomes. While positive religious coping strategies (e.g., seeking spiritual connection and positive religious appraisals) predict better mental, physical, and spiritual health, negative religious coping strategies (e.g., doubting God, negative religious appraisals) are linked to more psychological distress (Ano & Vasconcelles, 2005). Further inquiry is needed to

understand the impact of each type of religious coping on marital outcomes.

## Attachment and Religious Coping

Two decades of research on attachment and religiosity have tested various theories, with numerous studies comparing Kirkpatrick and Shaver's (1992) correspondence and compensation hypotheses. The compensation hypothesis predicted that individuals with insecure human attachments use God as the ideal surrogate attachment figure in effortful attempts to regulate distress. The correspondence hypothesis suggested that individuals project their working models of human relationships onto God. According to the latter hypothesis, secure individuals feel comfortable seeking closeness to God, those with high attachment avoidance deny or keep God at a distance, and those with high attachment anxiety feel ambivalent and highly emotional about God. Findings have been mixed with regard to the match between human attachment and engagement in religious behaviors that suggest the use of God as a surrogate attachment figure (Birgegard & Granqvist, 2004; Granqvist & Hagekull, 2003; Kirkpatrick, 2005; Reinert, 2005).

Hall and colleagues (2009) proposed an alternative framework, Implicit Internal Working Model Correspondence, reconceptualizing the link between attachment and religion as one of correspondence. To account for divergent findings, they distinguished between measures of implicit versus explicit religious/spiritual functioning. Measures of implicit religious/spiritual functioning (e.g., meaning in life, spiritual friendship, disappointment with God or perceived instability in one's relationship with God) tap aspects of religious/spiritual experience that are based on gut-level, affective, implicit memories about how to be in relationships, including appraisals and behaviors. In contrast, measures of explicit religious/spiritual functioning (i.e., theological beliefs, service attendance) are more influenced by parental religiosity and effortful control. This difference parallels the difference between implicit procedural knowing on one hand, and explicit, verbal, and rational knowing on the other hand, discussed in the information processing and neurobiology literatures (e.g., Schore, 2000).

Hall et al. theorized and found empirical evidence that implicit, but not explicit religious behaviors are related to differences in adult attachment. Religious commitment (an explicit construct) was unrelated to attachment, but purpose in life, forgiving others, and experiencing supportive relationships within a spiritual community (implicit constructs) were all directly related to attachment security. Hall et al. asserted that implicit relational knowing about relationships in general underlies appraisals and ways of being in relationship with God and spiritual community. Religious coping includes religious appraisals of stressors as well as seeking comfort from God or spiritual community, so we hypothesized that religious coping may be related to attachment strategies. Hall et al. also speculated that insecurely attached individuals were less forgiving because they become overwhelmed with affect when wronged. We thought that positive religious coping might help such individuals manage negative affect and maintain positive marital adjustment despite the inevitable relational injuries that occur in marriage.

Research has suggested that insecurely attached individuals more often use religion to regulate emotion than do securely attached individuals (Hall et al., 2009). Whereas some researchers took such findings as evidence of compensation (Granqvist & Hagekull, 2003), Hall et al. argued that such behavior is an expression of the correspondence between human attachment and relationship to God and spiritual community. Byrd and Boe (2001) found that attachment anxiety was related to clinging to God, which may be viewed as a way to cope with fears of rejection and a sign of a hyperactivated attachment system. Other than that study, most of the research in this area has not examined attachment anxiety and attachment avoidance separately, instead testing differences between secure versus insecure attachment. Research linking the attachment and religious coping literatures is in its infancy. Granqvist (2005) conducted the first study to link religious coping to human attachment. Perceived insecure attachment history was related to involving God in coping. Other researchers found that secure attachment qualities predicted more positive religious coping, whereas avoidant attachment qualities predicted more negative religious coping (Schottenbauer et al., 2006). Avoidant attachment to God has been linked to more negative religious coping and less positive religious coping, whereas attachment anxiety has been linked to higher levels of both positive and negative religious coping (Davis, Hook, & Worthington, 2008). Given the dearth of research linking human attachment and religious coping, we aimed to test the Implicit IWM Correspondence model in relation to romantic attachment dimensions and religious coping.

## The Current Study

The current study had two primary aims. First, we aimed to test the Implicit IWM Correspondence model of attachment and religiosity by investigating associations between the romantic attachment strategies of both members of married couples and their use of both positive and negative religious coping. Most of the research in this area has used samples that have been heterogeneous with regard to relationship status and drawn from religious communities or universities. The current study extends this line of research by (a) using a community sample of married couples, and (b) examining the links between each romantic attachment dimension (i.e., anxiety and avoidance) with each positive and negative religious coping. We assessed attachment dimensionally rather than categorically for increased precision and power. Second, we aimed to examine the potential of religious coping to moderate the effects of attachment vulnerabilities on marital functioning. We used dyadic data analysis techniques to account for the interdependence of data from both spouses and explore sex, partner, and interaction effects.

We had four primary hypotheses. First, we hypothesized that both partners' attachment avoidance and anxiety would be negatively associated with marital adjustment. Second, drawing from Hall et al.'s (2009) speculation that individuals with attachment anxiety would exhibit clingy religious behavior, and their sensitivity to rejection and tendency to hyperactivate attachment behaviors, we hypothesized that romantic attachment anxiety would be associated with more frequent use of positive and negative religious coping strategies. Third, based on prior findings linking attachment avoidance to agnosticism, minimization of threats and distress, and self-reliance in coping (Kirkpatrick, 2005; Mikulincer & Shaver, 2007), we hypothesized that attachment avoidance would be associated with lower levels of both forms of religious

coping. Fourth, we hypothesized that positive religious coping would buffer the deleterious relationship between attachment anxiety/avoidance and marital adjustment, and negative religious coping would exacerbate the deleterious relationship between attachment anxiety/avoidance and marital adjustment.

## Method

### Participants

This study was part of a larger project examining attachment and family functioning. Heterosexual married couples ($N = 86$) with at least one child 8 to 11 years of age were recruited via flyers and announcements from schools, churches, community groups, businesses, health care provider offices, and nonprofit organizations in suburban communities surrounding a large metropolitan area in the southern United States. Incomplete data for five couples yielded an $N = 81$ couples (162 individuals) for the present study. Seventy-two of the couples were in the first marriage for both spouses, and in the other couples, both spouses had been divorced.

The mean age for husbands was 38.5 years ($SD = 5.6$; range: 26–51), and the mean age for wives was 36.6 ($SD = 5.2$; range: 26–50). The majority of participants (127) identified themselves as White/European American. Fourteen self-identified as Hispanic/Latino/Mexican American, 13 as African American, 3 as Asian, and 3 as Bi-/Multiracial. The sample was highly educated, with 93 participants reporting a bachelor's or graduate degree and another 49 had some college or a 2-year technical degree. Over half of all spouses (87) worked full-time, 28 worked part-time, while 34 were unemployed, and 7 were students.

Only 79% of participants responded to background questions about religion. The most common religious affiliation was Baptist (23); 18 reported other Protestant denominations, 24 self-identified as Christian, 11 as Catholic, 9 as spiritual but not religious, 9 as no religious affiliation, 6 as Bible Church/Nondenominational/Interdenominational, 6 as Mormon, 6 as Jehovah's Witness, 2 as Hindu, 1 as Atheist, and 13 as Other religious affiliation without specification. Sixty-nine participants rated their families of origin as fairly or very religious, 41 as a little or somewhat religious, and 13 as not at all religious. With regard to their current families, most (87) described them as fairly or very religious, whereas 30 described them as a little or somewhat religious and 10 described them as not at all religious.

### Measures

**Religious coping.** The Brief RCOPE (Pargament et al., 1998b) is a brief measure of positive and negative religious/spiritual coping methods, modified from the original 100-item RCOPE (Pargament et al., 1988). Participants indicate on a 4-point Likert scale how much they use each of 14 strategies in coping with a negative event. Factor analysis of the Brief RCOPE yielded two factors: (a) the positive religious coping subscale (7 items) assesses spiritual connection, seeking spiritual support, religious forgiveness, collaborative religious coping, benevolent religious reappraisal, religious purification, and religious focus, and (b) the negative religious coping subscale (7 items) assesses spiritual discontent, punishing God reappraisal, interpersonal religious discontent, demonic reappraisal, and reappraisal of God's power. Sample items include: "Sought God's love and care" (positive scale) and "Wondered whether God had abandoned me" (negative scale). Research has established criterion and discriminant validity as well as moderate to high internal consistency for each scale (Pargament et al., 1998). In the present study, the αs were .99 for both the positive and the negative scales.

**Romantic attachment.** The Experiences in Close Relationships Scale (ECR; Brennan et al., 1998) is a 36-item self-report assessment of adult romantic attachment. The ECR has two scales, attachment avoidance and attachment anxiety, with 18 seven-point Likert items each. Sample items on the attachment avoidance factor are: "It helps to turn to my romantic partners in times of need" (reverse scored) and "I prefer not to show a partner how I feel deep down." Sample items on the attachment anxiety factor are: "I worry about being abandoned" and "If I can't get my partner to show interest in me, I get upset or angry." The ECR has high construct, concurrent, predictive, and discriminant validity (Brennan et al., 1998; Crowell, Fraley, & Shaver, 2008). The αs in the present sample were .90 for avoidance and .89 for anxiety.

**Marital adjustment.** The Dyadic Adjustment Scale (DAS; Spanier, 1976) is a 32-item self-report measure of marital quality with 4- and 5-point Likert scale questions and two dichotomous questions. The DAS yields a Total Dyadic Adjustment score and four subscales. Spanier reported significant relationships between the DAS and other criteria of dyadic satisfaction as well as good test–retest (.96) and internal consistency reliability (.90). We used the Total Dyadic Adjustment scale ($\alpha = .80$). $t$ scores below 30 on the Total Dyadic Adjustment scale are conventionally interpreted as indicating clinically significant marital dysfunction.

### Procedures

This study was approved by the researchers' university Institutional Review Board. We complied with all American Psychological Association ethical standards. Volunteer families (i.e., the couple and all children in the home) came to a lab on the university campus. A research assistant (RA) described the study to the family and obtained both spouses' written consent. After the family participated in interaction tasks, RAs administered an interview (reported elsewhere) and questionnaires to each spouse in a separate room. After completing all questionnaires, each family received a $30–40 money order and coupons and tickets for restaurants and recreational activities.

Undergraduate RAs double entered data into SPSS, and Graduate RAs compared and examined for them missing data. No variables were missing more than 2% of data on the ECR or Brief RCOPE, so we used case mean replacement for missing values for those two measures. The DAS Total Adjustment Scale was missing 6.5%, including two participants for whom the entire instrument was missing. However, Little's MCAR test for the DAS was nonsignificant indicating that data were missing completely at random, so the Expectation-Maximization algorithm generated imputed DAS values. Five univariate outliers were pulled in to 3 $SD$ from the mean. All variables met assumptions of normality (skew $< 1$) and homoscedasticity, except for Negative Religious Coping, which we transformed using the natural log to correct for a mild positive skew. To allow for dyadic analyses, we organized the data in pairwise structure, such that each row contained the respondents' scores, as well as their partners' scores. We centered

all predictor variables on the grand sample mean (Aiken & West, 1991).

Traditional statistics that assume independence are unable to accurately estimate statistical significance when used with married couples, because spouses influence one another (Cook & Kenny, 2005). The Actor-Partner Interdependence Model (APIM; Cook & Kenny, 2005; Kashy & Kenny, 2000; Kenny, Kashy, & Cook, 2006) may be used with nonindependent, dyadic data. MLM APIM techniques used in this study assume one level of data (each spouse's responses) is nested within a second level (the couple) and can account for error variance both between and within couples. APIM facilitates consideration of *actor effects* (e.g., the effect of the respondent's attachment anxiety on their own marital adjustment), *partner effects* (e.g., the effect of their spouse's attachment anxiety on the respondent's marital adjustment), and *interaction effects* both within and between actor and partner variables (e.g., the interaction of the spouse's attachment avoidance and the respondent's religious coping on the respondent's marital adjustment). We used the APIM for distinguishable dyads because the members of heterosexual couples are distinguished by sex.

## Results

Table 1 contains the means, *SD*s, and intercorrelations within each sex and within dyads for all variables. In this sample, six individuals (3.7%) reported marital dysfunction in the clinically significant range on the DAS, whereas the majority reported marital functioning in the typical range. The measure of nonindependence for distinguishable dyads—the Pearson product–moment correlation of the two spouses' DAS Total scores—was significant ($r = .58$, $p < .001$), indicating that the data were nonindependent. Spouses' positive religious coping scales were also significantly correlated, perhaps because of a shared perspective on the importance of religion and joint involvement in religious practices, whereas their negative religious coping scales (that assessed more private, internal events such as appraisals and emotions that might be shared less often) were unrelated. The majority of the participants denied most negative religious coping strategies. Paired samples *t* tests yielded no sex differences in dyadic adjustment or positive religious coping, but women reported significantly more negative religious coping, higher attachment anxiety, and lower attachment avoidance than men. No differences between White and non-White participants emerged for any study variables. Family of-origin religiosity was also unrelated to all study measures. Higher current family religiosity was related to higher use of positive religious coping but unrelated to negative religious coping.

Participants with a prior history of divorce had lower current marital adjustment compared with participants in their first marriage but were not significantly different on other study variables. Because of this difference, analyses that included marital adjustment controlled for prior divorce status. Four multilevel models for distinguishable dyadic data using the SPSS Mixed Models procedure were conducted. We initially entered all interactions in a full model, as recommended by Cook and Kenny (2005). In the first two full MLMs, we examined the interaction of all pairs of attachment dimensions and between each attachment dimension and sex. Full MLMs 3 and 4 included the aforementioned interactions as well as the interactions between each attachment dimension and the given religious coping scale. We only included direct and significant interaction effects in the final trimmed models (i.e., we excluded all nonsignificant interaction terms), following Cook and Kenny's convention. We used Mod-Graphs and simple slopes analyses (Aiken & West, 1991) to interpret significant interactions. Values in the tables are unstandardized regression coefficients.

In the first two models we tested associations between attachment and religious coping (see Table 2). We hypothesized that attachment avoidance would be inversely related to both religious coping scales and that attachment anxiety would be directly related to both religious coping scales. In each analysis, sex was the within-dyad distinguishing variable, while actor attachment anxiety, actor attachment avoidance, partner attachment anxiety, and partner attachment avoidance were the independent variables (IVs). We initially included all interaction terms; all interactions were nonsignificant, so we ran trimmed models without the interactions.

In the first MLM, positive religious coping was the dependent variable (DV). As hypothesized, attachment avoidance was inversely related to positive religious coping. Contrary to our hypothesis, attachment anxiety was unrelated to positive religious coping. No partner variables were significant. The pseudo $R^2$ calculated according to Kenny et al.'s (2006) method indicated that this model accounted for 4.65% of the variance in positive religious coping.

In the second MLM, negative religious coping was the DV. Female sex was associated with higher negative religious coping. In addition, as expected, actor and partner attachment anxiety were

Table 1
*Correlations Between Husbands and Wives for All Variables*

| | Attachment avoidance | Attachment anxiety | Positive RCOPE | Negative RCOPE | Dyadic adjustment |
|---|---|---|---|---|---|
| Attachment avoidance | **.206** | .449** | −.174 | .059 | −.548** |
| Attachment anxiety | .441** | **.027** | −.051 | .222* | −.437** |
| Positive RCOPE | −.243* | −.038 | **.491**** | .119 | .109 |
| Negative RCOPE | .113 | .319* | .143 | **.056** | −.043 |
| Dyadic adjustment | −.516** | −.379** | .358** | −.135 | **.587**** |
| Means (*SD*) total | 42.35 (19.29) | 52.10 (18.69) | 20.05 (6.47) | 9.11 (2.71) | 44.33 (6.80) |
| Husbands | 45.91 (20.60) | 49.07 (18.13) | 19.35 (6.79) | 8.74 (2.83) | 44.20 (6.80) |
| Wives | 38.78 (17.29) | 55.13 (18.85) | 20.74 (6.08) | 9.47 (2.54) | 44.46 (6.85) |

*Note.* Correlations for husbands appear below the diagonal; correlations for wives appear above the diagonal. Bolded correlations along the diagonal are between dyad members.

Table 2
*Final Models in Associations With Positive and Negative Religious Coping*

| | |
|---|---|
| Estimates of fixed effects (*SE*) in associations with positive religious coping | |
| Sex | −.5237 (.39) |
| Actor attachment avoidance | −.0836 (.03)*** |
| Partner attachment avoidance | −.0143 (.03) |
| Actor attachment anxiety | .0246 (.03) |
| Partner attachment anxiety | .0493 (.03) |
| Estimates of fixed effects (*SE*) in associations with negative religious coping | |
| Sex | −.0490 (.02)** |
| Actor attachment avoidance | −.0003 (.00) |
| Partner attachment avoidance | −.0032 (.00)*** |
| Actor attachment anxiety | .0043 (.00)*** |
| Partner attachment anxiety | .0023 (.00)* |

*Note.* We coded male sex as 1 and female sex as −1 following Cook and Kenny's (2005) convention.
* $p < .10$. ** $p < .05$. *** $p < .01$.

Table 3
*Moderation Models in Associations With Marital Adjustment*

| | |
|---|---|
| Estimates of fixed effects (*SE*) with positive religious coping as moderator | |
| Sex | .36 (.31) |
| Previously divorced status | −2.90 (1.61) |
| Actor attachment avoidance | −.12 (.03)*** |
| Partner attachment avoidance | −.04 (.03) |
| Actor attachment anxiety | −.07 (.03)*** |
| Partner attachment anxiety | −.05 (.03) |
| Actor positive religious coping | .20 (.07)*** |
| Partner positive religious coping | −.07 (.07) |
| Actor attachment avoidance*actor positive religious coping | .01 (.00)** |
| Actor attachment anxiety*actor positive religious coping | −.01 (.00)** |
| Estimates of fixed effects (*SE*) with negative religious coping as moderator | |
| Sex | .06 (.86) |
| Previously divorced status | −2.13 (.20) |
| Actor attachment avoidance | −.14 (.00)*** |
| Partner attachment avoidance | −.04 (.15) |
| Actor attachment anxiety | −.08 (.00)*** |
| Partner attachment anxiety | −.04 (.14) |
| Actor negative religious coping | .28 (.86) |
| Partner negative religious coping | .28 (.86) |
| Partner attachment anxiety*actor negative religious coping | .20 (.02)** |

*Note.* We coded male sex as 1 and female sex as −1 following Cook and Kenny's (2005) convention.
* $p < .10$. ** $p < .05$. *** $p < .01$.

positively associated with negative religious coping. Contrary to our hypothesis, actor attachment avoidance was unrelated to negative religious coping. In addition, partner attachment avoidance was inversely related to negative religious coping. The pseudo $R^2$ indicated that this model accounted for 14.61% of the variance in negative religious coping.

In the third and fourth MLMs, we examined the associations between attachment, religious coping, and marital adjustment. We hypothesized that attachment avoidance and anxiety would be negatively associated with marital adjustment, but that these relationships would be moderated by positive and negative religious coping. Generally, the results supported the hypothesized direct negative associations between attachment avoidance/anxiety and marital adjustment. In Model 3, actor positive religious coping was the moderator, whereas actor negative religious coping was the moderator in Model 4 (see Table 3). As in the previous MLMs, sex was the within-dyad distinguishing variable, and the four actor/partner attachment variables were the IVs. We included all interactions initially but retained only those with a $p$ value $< .10$ in the trimmed models, which we report below.

In the third MLM, there was a significant interaction between actor positive religious coping and both actor attachment avoidance and actor attachment anxiety. Tests of simple slopes (Aiken & West, 1991) revealed that the relationship between actor attachment avoidance and marital adjustment was weaker at high levels of actor positive religious coping (1 *SD*, $\beta = -.07$, $p = .031$) relative to low levels of actor positive religious coping (−1 *SD*, $\beta = -.17$, $p < .001$). Consistent with our hypothesis, actor positive religious coping buffered the deleterious relationship between actor attachment avoidance and marital adjustment (see Figure 1). However, the direction of the interaction between actor positive religious coping and actor attachment anxiety was not in the hypothesized direction. Tests of simple slopes indicated that the relationship between actor attachment anxiety and marital adjustment was stronger at high levels of actor positive religious coping (1 *SD*, $\beta = -.127$, $p < .001$) than at low levels of actor positive religious coping (−1 *SD*, $\beta = -.02$, $p = .464$). As shown in Figure 2, marital adjustment was highest in the context of both low attachment anxiety and high positive religious coping. Positive religious coping had no impact on marital adjustment when attachment anxiety was high; however, when attachment anxiety was low, higher positive religious coping was associated with higher marital adjustment. The pseudo $R^2$ was .39.

In the fourth MLM, there was a significant interaction between actor negative religious coping and partner attachment anxiety. However, the direction of this interaction was not in the hypothesized direction (see Figure 3). According to tests of simple slopes, partner attachment anxiety was directly related to higher marital adjustment in the context of high actor negative religious coping, although this relationship was not significant (1 *SD*, $\beta = -.05$, $p = .118$). At low levels of actor negative religious coping, there was an inverse relationship between partner attachment anxiety and marital adjustment, although this relationship was not signif-

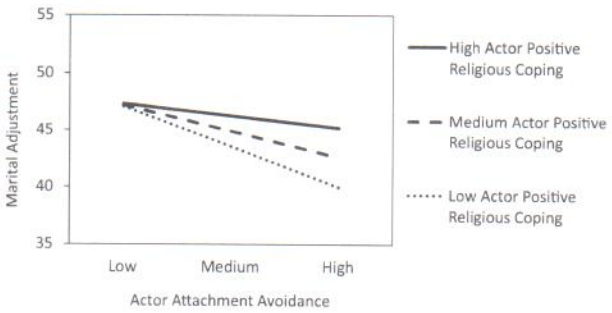


*Figure 1.* Moderation effect of actor positive religious coping on the relationship between actor attachment avoidance and marital adjustment.

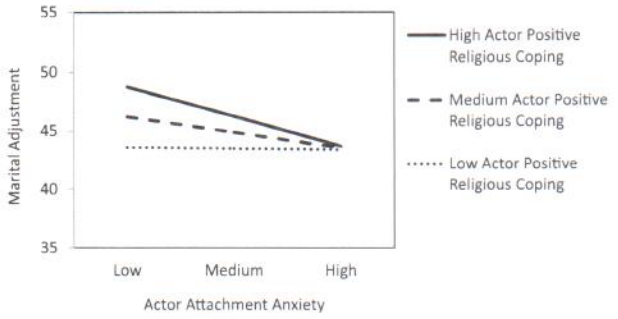


*Figure 2.* Moderation effect of actor positive religious coping on the relationship between actor attachment anxiety and marital adjustment.

icant (−1 *SD*, β = −.04, $p$ = .217). The pseudo $R^2$ for MLM 4 was .36.

## Discussion

In the present study, we tested the correspondence between romantic attachment dimensions and religious coping, as well as the moderating effect of religious coping on the associations between attachment dimensions and marital functioning. Regarding the correspondence between attachment and religious coping, the findings partially supported our hypotheses and were consistent with Hall et al. (2009)'s Implicit IWM Correspondence framework. First, higher levels of attachment avoidance were associated with less positive religious coping, which corresponds with their general discomfort with depending on others. The finding of no relationship between attachment avoidance and negative religious coping was unexpected and diverges from prior findings of a direct relationship (Schottenbauer et al., 2006). This may be because of the restricted range of negative religious coping in our sample or methodological differences between the two studies. Their sample was predominately female. Additionally, Schottenbauer et al. (2006) used the Measure of Attachment Qualities (MAQ; Carver, 1997) and asked about coping with a specific event, whereas we asked about coping in general. This difference may also indicate that individuals with high attachment avoidance do not use negative religious coping in a consistent way. Research has shown that these individuals tend to minimize threat, deny distress, and prefer self-reliance when possible, but that these defensive strategies break down in the context of undeniable stress, so the use of religious coping may depend on the stressor (Schottenbauer et al., 2006). Future research is needed to elucidate the impact of stressor type on coping strategies used by individuals with high attachment avoidance, and to examine the role of religious coping in the context of nonreligious coping strategies.

Second, as expected, high attachment anxiety was associated with more negative religious coping, which may be explained by the exaggerated appraisals of threat, fears of abandonment, low coping self-efficacy, and hyperactivation of the attachment system associated with attachment anxiety (Mikulincer & Shaver, 2007). Contrary to our hypothesis, attachment anxiety was unassociated with positive religious coping. Although individuals with high attachment anxiety may reach out more to God and spiritual community, they may experience these resources as more unsupportive than supportive and may even experience abandonment or punishment as a projection of their attachment models. Prior research has found negatively biased perceptions of support among individuals with high attachment anxiety (Campbell, Simpson, Boldry, & Kashy, 2005). These findings also may be understood as consistent with Hall et al.'s predictions that attachment anxiety would be related to inconsistent religious/spiritual experiences. Their fears of rejection could hinder relating to the divine and the faith community in a trusting way. Research has shown that secure attachment predicts the most positive relationships with faith communities (Hall et al., 2009). Indeed, the inconsistent relationship between attachment anxiety and positive religious coping parallels inconsistencies in prior research on attachment anxiety and support seeking in general (e.g., Vogel & Wei, 2005).

These results are similar to prior findings that avoidant attachment *to God* was related to lower positive religious coping, whereas anxious attachment to God was linked to higher levels of negative religious coping (Davis, Hook, & Worthington, 2008). Current results also offer an interesting comparison with findings among newlyweds (Lopez et al., 2011) that higher religious commitment was negatively associated with romantic attachment avoidance but unrelated to romantic attachment anxiety. Taken together, these findings seem to convey that attachment avoidance is most strongly linked to the lack of a secure, positive relationship to God, whereas attachment anxiety is more linked to ambivalence and inconsistency in one's relationship to God. It is worth noting that in the current study attachment anxiety and attachment avoidance were positively correlated with one another and that some individuals have high levels of both attachment dimensions. Though we speculate that these individuals may experience unique struggles in relating to the sacred, we did not find a significant interaction between attachment anxiety and attachment avoidance in this study.

As predicted in the third model, actor positive religious coping buffered the relationship between attachment avoidance and marital adjustment, such that attachment avoidance was less detrimental to marital functioning when the individual used more positive religious coping strategies. Positive religious coping is known to be associated with better personal adjustment (Pargament et al., 1998). The current finding indicates that positive religious coping strategies such as benevolent reappraisal of negative events and finding meaning in trials may help avoidantly attached individuals remain satisfied with their marriage over time. Positive religious

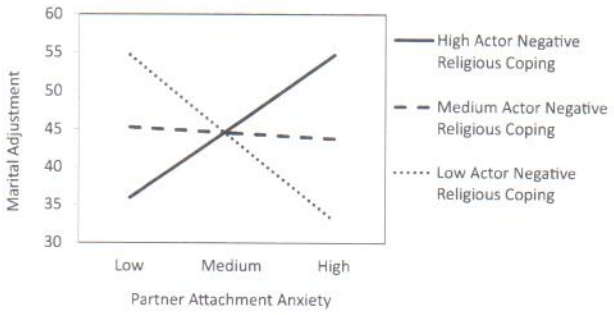


*Figure 3.* Moderator effect of actor negative religious coping on the relationship between partner attachment anxiety and marital adjustment.

coping may increase feelings of calm and hopefulness, which may allow them to be more forgiving, optimistic, and altruistic during marital conflicts. This finding partially supports Sullivan's compensation model and suggests that positive religious coping can decrease the impact of some marital vulnerabilities on marital adjustment. Thus, positive religious coping strategies merit exploration in work with couples when attachment avoidance is a concern.

Regarding the moderating effect of positive religious coping on the relationship between actor attachment anxiety and marital adjustment, positive religious coping was only helpful for those individuals low in attachment anxiety. This finding is similar to Sullivan's (2001) finding that religiosity has its most positive impact on marriages in the context of low neuroticism. That positive religious coping more clearly buffered attachment avoidance than attachment anxiety is consistent with the results of a prior study showing a similar effect for religious commitment (Lopez et al., 2011). In each study, religion was unable to buffer the couple from the negative impact of attachment anxiety on their relational functioning.

Surprisingly, partner attachment anxiety appears to be more detrimental to marital adjustment when negative religious coping is low. In contrast, higher negative religious coping somehow limits the influence of partner attachment anxiety. Considering that attachment anxiety and negative religious coping were correlated in this study, perhaps when the partner has high attachment anxiety, using negative religious coping strategies is aligned with the attachment strategies and worries of the partner, and this mirroring increases marital adjustment.

There are several limitations in the present study. First, the generalizability of these findings is limited to similar populations. Furthermore, given that the effects of religious coping on personal adjustment are strongest among those for whom religion is a salient part of identity (Pargament, 1997), results might differ in samples with different levels and expressions of religiosity. We recommend that further research be conducted with ethnic and religious minority couples and that research explore religious coping in the context of more general coping strategies such as support from friends or family and exercise.

Second, the study used a cross-sectional, correlational design, so causal conclusions should not be made. Longitudinal research could be used to discern the direction of the relationships between romantic attachment and religious coping variables and the impact of other contextual variables on the continuity of attachment strategies across the life span and different attachment figures. Furthermore, we used only self-report measures and quantitative analyses. Self-report measures have several limitations, including social desirability and common method variance. In particular, self-report measures of attachment have limited stability and are influenced by the current romantic relationship. Use of observational or interview measures of adult attachment and marital interactions could address such concerns, and future research should also incorporate qualitative as well as quantitative data.

Third, the present findings do not provide definitive evidence for the theorized mechanisms, and alternatives should be explored. For example, attachment is only one of many evolved psychological systems, and the study of religion may benefit from a broader evolutionary perspective (Kirkpatrick, 2012). As another alternative to an attachment conceptualization, positive and negative religious coping strategies may be rooted in more general positive and negative stances associated with other personality differences such as negative affectivity, depressive symptoms, and pessimism. Future research should explore the relative developmental trajectories of attachment to God and romantic attachment and the impact of other developmental antecedents such as parent–child attachment, traumatic experiences, and couple interactions on religiosity. Studies using more implicit measures of spirituality and linking them explicitly to early relational experiences with longitudinal methodologies are lacking and would be compelling. Despite these limitations, the present research is an important extension of prior work and identifies several avenues for future study.

In conclusion, the present findings offer some support for the correspondence of romantic attachment and religious coping strategies. Support for Sullivan's compensation model was mixed in that positive religious coping buffered the effects of attachment avoidance—but not attachment anxiety—on marital adjustment. These findings point to positive religious coping as a potential resource that educators and practitioners may wish to harness in scholarly and applied work with adults and couples, particularly in the context of attachment avoidance. Positive religious coping strategies may help individuals maintain more positive marital quality despite attachment avoidance. However, the benefits of positive religious coping on marital adjustment are limited in the context of attachment anxiety. Finally, although most researchers and clinicians likely would not support the use of negative religious coping strategies, the results from our study suggest that, when a partner has high attachment anxiety, such strategies may be linked to higher marital adjustment. Thus, the relationships among religious coping, attachment, and marital adjustment are complex and warrant further investigation.

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