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# The Relationships between Attachment Style and Boundary Thickness

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ATTACHMENT & BOUNDARIES

The Relationships between Attachment Style and Boundary Thickness

A dissertation submitted

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by

DORE LAVERING

to

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in partial fulfillment of  
the requirements for the  
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in

CLINICAL PSYCHOLOGY

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## ATTACHMENT & BOUNDARIES

### Abstract

Despite the multitudes of research on attachment and many different aspects of relational structures, only one study to date has researched the relationship of adult attachment to boundary thickness. The possible benefits to understanding this relationship would provide therapists and clients a better conceptualization of individual's internal working model of attachment. This study investigated the relationship between the Hartmann Boundary Questionnaire (HBQ), a measure of boundary thickness, and an adult romantic attachment measure, the Experiences in Close Relationships Inventory-Revised (ECR-R) two dimensions of attachment. This study theorized that attachment anxiety would be related to thinner boundaries and conversely attachment avoidance would be related to thicker boundaries. Subjects were 89 mostly college educated adults with an average age of 42 who were recruited through Facebook and email. All of the participants completed a demographic questionnaire, the ECR-R, and the HBQ (self-report questionnaires) and given an option for debriefing via the website SurveyMonkey. My hypothesis was not supported having weak correlations between attachment anxiety to boundaries ( $r$  of .264) and attachment avoidance to boundaries ( $r$  of .077). However, upon analyzing the subscales of the HBQ with both attachment anxiety and avoidance a moderate correlation was found between attachment anxiety and unusual experiences on the HBQ ( $r$  of .4). This correlation

## ATTACHMENT & BOUNDARIES

may have greater implications for exploring self and identity within an attachment perspective and further our understanding of attachment. It would be useful to pursue this avenue of research in the future in better understand the reasons for this correlation.

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### **Introduction**

Is there a relationship between adult attachment and interpersonal and/or intrapersonal boundaries? While there have been a number of studies on the relationship between adult attachment on various other relational and internal variables like intimacy, relationship satisfaction, and self-esteem ( e.g. Major, 2003; Impett, Gordon, Strachman, 2008; Butzer & Campbell, 2008; Brassard, Shaver, Lussier, 2007; Bartholomew & Horowitz, 1991; Mickelson, Kessler, & Shaver, 1997), only one study to date has researched the impact of adult attachment on boundary setting (Zborowski, Hartmann, Newsom, & Banar, 2003).

This inquiry is significant because in finding a link between attachment and boundaries we might better understand the nature of attachments internal working model. For example, finding this connection might indicate that boundaries are observable manifestations of an individual attachment style/internal working model. The importance of understanding more fully about the attachment internal working model is evident in all the important correlates of attachment. For example, securely attached individuals were found to have a greater degree of intimacy, relationship satisfaction and higher amounts of self-esteem than those who were anxiously or avoidantly attached (e.g. Major, 2003; Impett, et al., 2008; Butzer & Campbell, 2008; Brassard et al., 2007;

Bartholomew & Horowitz, 1991; Mickelson et al., 1997). Given these correlates to attachment and its' wide ranging reach on multiple life variables (self-esteem, relationship quality, & intimacy) it would be especially significant if therapists had a means to identifying the attachment system (boundaries) more readily. Understanding more fully what components make up an individual's attachment internal working model is an important step in understanding the mechanisms that enact and maintain an attachment internal working model. Discovering these components is also the first step in devising a standardized theory and treatment protocol for those who are insecurely attached.

Based on previous research (Zborowski, Hartmann, Newsom, & Banar, 2003), which found boundary thinness was related to insecure anxious attachment, I would expect the boundary for those with an anxious/ambivalent attachment (Brennan, Clark, & Shaver, 1998) would be thinner (Hartmann, 1976, 1984, 1989, 1991) than that of a securely attached individual. In addition, I would also expect those with an avoidant attachment style will have thicker boundaries than those who are securely attached.

My personal and professional observations of dating individuals and couples were the catalyst for me investigating attachment style and boundaries together. What I observed anecdotally in some (thinner/porous boundaried) individuals was a tendency toward to very early on become over-involved in

relationships (e.g. sharing life stories right away, texting and calling all the time, becoming sexually involved very quickly). Conversely, I noticed in other (thicker/rigid boundaried) individuals a marked separateness and under-involvement with the other (e.g. being very private, keeping personal and professional life completely separate). The commonality that I noticed with both of these types of individuals was that their approach to romantic relationships was too similar to their other relationships (friendships, workmates etc.). There appeared to be a common pattern in what they expected from others and themselves in a relationship e.g. attachment style. This pattern in our mind could be observed by how they set boundaries in their relationships. Eventually, through my research on attachment I began to theorize that each individual's attachment system (internal working model) influences the way in which they set boundaries. All of these interpersonal experiences/types of boundaries I hypothesized to be connected to an internal working model of attachment. Those with the more porous boundaries reminded me of the how insecure anxious/ambivalently attachment is characterized e.g. amount of proximity seeking through involvement. Those with more rigid boundaries reminded me of the insecure avoidant type of attachment e.g. lack of proximity seeking behavior/under-involvement. After developing this initial theory, I began to observe those with these relational patterns as having primary relationships (i.e. mother and/or father) as being characterized by some lack of consistency in their responsiveness to

them. These observations eventually led me to my current inquiry in order to see if in fact attachment style is related to how each individual habitually demonstrates boundaries in all their relationships.

### **Definition of Terms**

The following definitions are provided to ensure uniformity and understanding of these terms throughout the study.

*Attachment:* Our biological need for social connection which protects us from danger by ensuring that one maintains proximity to caring and supportive others (Bowlby, 1969/1982).

*Attachment style:* is the relatively stable individual differences of each person's internal working model developed from how responsive and available they perceived their caregivers to be (Bowlby, 1969/1982, 1973, 1980).

Attachment is either categorized as secure or insecure. Insecure adult attachment has two types anxious or avoidant.

Note: The following definitions are in reference to adult attachment and are taken from Fraley and Waller's (1998) dimensional representation of attachment which are more accurate than categorical representations. The definition being used is from the social psychological tradition vs. the developmental one because of the

measure being used in this study. More explanation as to this choice will be detailed in the instrumentation section in research design methods.

*Anxious attachment (initially based on Ainsworth's et al.s (1978) infant attachment category referred to as Anxious-ambivalent):* is characterized by a person's strong desire for closeness and protection, intense worries about partner availability and one's own value to the partner, and the use of hyper-activating strategies for dealing with insecurity and distress (Fraley & Waller, 1998).

*Avoidant Attachment (initially based on Ainsworth's et al.'s (1978) infant attachment category also referred to as Anxious Avoidant):* is characterized by a persons concerned with discomfort with closeness and dependence on relationship partners, preference for emotional distance and self-reliance, and the use of deactivating strategies to deal with insecurity and distress (Fraley & Waller, 1998).

*Secure attachment (initially based on Ainsworth's et als (1978) infant attachment category):* Those who are classified as securely attached tend to trust in partners, expecting their partners to be available and responsive. Also they tend to find comfort in closeness and interdependence. Lastly they tend to have constructive ways of coping with threats and stressors (Fraley & Waller, 1998).

*Boundary:* the demarcation/separation between the person and their external environment, as well as among the person's own internal mental

territories i.e. id, ego, superego (Landis, 1970). There are two types of boundaries: intrapersonal boundaries (intrapsychic or subjective reality where behavior is a privately perceived experience e.g. internal mental boundary) and interpersonal boundaries (boundaries between self and other e.g. external observable boundaries) (Lewin, 1935, 1936, 1938, 1951).

*Intrapersonal boundaries:* intrapsychic or subjective reality where behavior is a privately perceived experience e.g. internal mental boundary.

*Interpersonal boundaries:* boundaries between self and other e.g. external observable boundaries.

*Thickness of boundaries* (Hartmann, 1991): The idea that the separation/boundary between parts of a person either internal or external are not absolute but vary on a continuum from relatively thick or solid to relatively thin or permeable. At the thin end of the continuum, increased connection occur between these parts and at the thick end there is greater separation between these parts.

*Thick Boundary:* Those with thick boundaries are characterized by a separateness and rigidity in their thinking and between relational states personal professional.

*Thin Boundary:* Those with very thin boundaries are characterized by over connectedness e.g. a tendency to fuse thoughts and merge oneself in relationships.

## **Chapter 1: Review of the Literature**

The overall goal of this review is to provide both a theoretical and empirical basis for linking attachment style and boundary thickness. Specifically, the importance and implications of both attachment style and boundary thickness will be explored through theory, and research. Lastly, the ground will be laid for my present study e.g. what is currently know about attachment style and how it relates to boundary setting and the important implications this relationship would imply.

### **Attachment**

Attachment will be defined according to Bowlby's theoretical conclusion (1969/1982, 1973, 1980) that a person's fundamental sense of safety, self-worth, coping and efficacy, and well-being rests on the quality of their social interaction within close relationships, beginning with primary caregivers in infancy. If an individual does not have reliable, trustworthy, supportive relationships with close others, personality development is changed in ways that have serious negative consequences. To better understand the implications of this connection this review will briefly explore the literature on the origin of the attachment construct,

attachment style, the stability of attachment and what research says on important correlates to attachment.

### **Attachment Theory**

#### ***Internal Working Model of Attachment***

John Bowlby first described and developed attachment theory through his work with maladaptive, delinquent, and orphaned children. He believed that attachment theory is based on two basic assumptions. The first being to suppose that humans evolved behavioral and motivational systems that allowed us to survive and reproduce. The second assumption is based on the knowledge that humans take a long time to reach maturity and therefore need protection and cooperation from others. Therefore, considering these assumptions, reaching out to my social connections during times of stress is essential to my survival. These social connections or attachment systems serve a biological function to protect a person from danger by assuring that he or she maintains proximity to caring and supportive others (Bowlby, 1969/1982).

Bowlby (1969/1982, 1973, 1980) goes on to theorize that infants who perceive their caregivers as “responsive” and “available” feel confident to stray from them exploring their environment develop a sense of a "secure base." Conversely, when infants perceive their caregivers as unavailable or unresponsive their behavioral system is triggered to enact attachment behaviors to restore



proximity between infant and caregiver. Over a series of these interactions infants begin developing expectations about their caregiver's responsiveness and dependability (Bowlby, 1969/1982, 1973, 1980). These expectations formed from their experiences in close relationships shape their attachment system. This attachment system becomes their internal working model of self, partners, and relationships (Bowlby, 1988a). Bowlby proposed that these internal models eventually become relatively stable personality patterns with increasing age (Bowlby, 1973).

### *Attachment Style*

Attachment style can be characterized as the relatively stable individual differences of each person's internal working model (Bowlby, 1969/1982, 1973, 1980). These individual differences are established as a result of the individual's history of attachment experiences; consistent working models result. These stable individual differences have been examined empirically and measured through a construct called attachment style- a person's characteristic pattern of expectations, needs, emotions, and behavior in social interactions and close relationships (Hazan & Shaver, 1987). Attachment style can characterize the way people behave in a particular relationship or across relationships whether in relation to caregivers, family, friends, or romantic relationships. For example, while you may have a one attachment style which in general characterizes most of your relationships, there can also be exceptions to the rule in individual relationships.

The concept of Attachment style was initially proposed and measured by Ainsworth for infant attachment (1967). However, in the 1980's, researchers from different psychological fields (developmental, clinical, personality, and social psychology) constructed new measures of attachment style in order to extend the attachment research into adolescence and adulthood. Two main types of measure were constructed from these researches a structure interview type coming from the developmental school (e.g. Adult Attachment Inventory- George, Kaplan, and Main, 1985) and self-report measures coming from the social psychology field (e.g. Experiences in Close Relationships Inventory - Brennan et al., 1998).

### *Infant Attachment Style*

Mary Ainsworth, a student and colleague of John Bowlby, was one of the first researchers test the attachment construct (Ainsworth, Blehar, Waters, & Wall, 1978). In Uganda and then in Baltimore, Ainsworth observed mothers and babies at home over the first year of life. She watched the process of attachment unfold as the babies came to recognize, prefer, seek out, and become attached to their primary caregiver. These observations enabled Ainsworth to make a critical discovery: A baby's sense of security depends on how his attachment figure cares for him. To test whether her secure base theory exist in North America, she developed The Strange Situation, a test that allowed, observers to study responses of infants to being separated from and reunited with their primary caregiver (e.g. mother) (Ainsworth et al., 1978).

The experiment had the following sequence of events happen in order. In a playroom, the parent twice left and twice returned to their child. A stranger twice entered the room. The infant was once left once alone with a stranger and once left entirely alone. The whole procedure was recorded on film and lasted 20 minutes. Ainsworth expected to find that the test would demonstrate universal attachment behavior expecting the infants to cry when their parents left and run to them to be comforted upon their return (Ainsworth et al., 1978). However, instead they found 3 distinct types of responses to the leaving and reuniting from the infants characterizing the quality of their particular relationship with the caregiver.

These types of responses were characterized as secure or insecure. In those infants whose responses were insecure Ainsworth et al. (1978) noticed two different responses which was later categorized as anxious-avoidant and anxious-ambivalent. Ainsworth observed that the secure infants cried in protest at being left and ran to be comforted by their caregiver upon return. Anxious-avoidant infants showed little or no distress at being left alone with a stranger, and ignored or avoided their parents when they returned to the room. Anxious-ambivalent infants responded with a mixture of anxiety and anger, clinging ambivalently to the caregiver on her return but unable to engage in exploratory play even when she was present (Ainsworth et al., 1978). A fourth attachment pattern known as disorganized attachment was later identified and is characterized by infants who

develop no organized strategy for achieving proximity to their caregivers or gaining care or protections (Main & Solomon, 1986).

### *Adult Attachment*

While Bowlby's (1969/1982, 1973, 1980) was primarily focused on comprehending the dynamics of the infant-caregiver relationship, he believed that attachment characterized human experience from "the cradle to the grave." However, it wasn't until the mid-1980's that researchers began investigate how attachment processes may play out in adulthood. Hazan and Shaver (1987) were two of the first researchers to explore Bowlby's theories in the context of romantic relationships. Hazan and Shaver(1987) theorized that the emotional bond that develops between adult romantic partners is coming from the same motivational system that gives rise to the emotional bond between infants and their caregivers- the attachment behavioral system. Hazan and Shaver observed that the relationship between infants and caregivers and the relationship between adult romantic partners share a number of the same features. For example, they both feel safe with proximity and responsiveness; they both participate in close, intimate, body contact; they both feel insecure when the other is unreachable, they both share discoveries with each other, they both play with one another's facial features and show a mutual fascination and preoccupation with one another; they

both engage in "baby talk." . Sue Johnson (2008) similarly built her emotionally focused couples therapy around the fundamental principle of attachment figure responsiveness and availability outlined by Bowlby emphasizing in adult romantic relationships the question most important to couples is "Can I depend on you?"

Because of these observed similarities, Hazan and Shaver theorized that adult romantic relationships are similar to infant-caregiver relationships in that they are attachments. Thus romantic love belongs to the attachment behavioral system and also is a part of the motivational system that engenders caregiving and sexuality.

The idea that romantic relationships are attachment relationships has a number of important implications for close relationships. Namely, if adult romantic relationships are attachment relationships, then one should observe the same kinds of individual differences in adult relationships that Ainsworth observed in infant-caregiver relationships. For example, one would expect secure attachment in relationships to demonstrate itself through an individual's feeling of confidence in their partner's ability to be there for them when needed, and also their feeling openness to depending on others and having others depend on them. Likewise, one should expect similar parallels to Ainsworth's insecure attachment categories. For example, insecure adults who are anxious/ambivalent may worry

that others may not love them completely, and be easily frustrated or angered when their attachment needs go unmet. Avoidant adults may appear not to care too much about close relationships, and may prefer not to be too dependent upon other people or to have others be too dependent upon them.

If adult attachment relationships are attachment relationships one can also assume that the same factors that engender secure infant-caregiver attachment will be important in making adult attachment secure. For example having a responsive and available caregiver e.g. partner that facilitates exploration are equally important and desirable qualifications for a romantic partner.

Lastly, whether an adult is secure or insecure in their adult relationships can be partially attributed to their attachment experiences their primary caregivers i.e. Bowlby's (1969/1982, 1973, 1980) idea of the internal working model . Once a child has developed their internal working model, they will tend to seek out relational experiences that are congruent with these expectations and perceive others in a way that is influenced by those beliefs. These expectations according to Bowlby, tend to promote continuity in attachment patterns over a life time. However, it is possible that a person's attachment pattern will change if a person's relational experiences disconfirm their expectations. In assuming that adult relationships are attachment relationships it can be expected that children who are secure to grow up to be secure in their adult relationships.

*Adult Attachment Style**Developmental Approach to Measuring Attachment*

An alternative measure of attachment based on a developmental and clinical approach, was developed by Main and her colleagues (George, Kaplan, & Main, 1985; Main et al., 1985). They developed the Adult Attachment Interview based on Ainsworth et al. (1978) strange situation to study adolescents and adults mental representations of attachment to their parents during childhood. As opposed to the ECR (Brennan et al., 1998), The Adult Attachment Interview (AAI) is a clinical interview designed to expose subjects to a stressful situation in order to activate and/or make evident their attachment orientation. This school of looking at attachment particularly values narrative communication about early family relationships because it allows them to deduce important emotional communications and see ways in which attachment patterns are transmitted across generations. For example the AAI classifies each person's attachment style based on how they tell their story. Restricted stories that are too bounded and rigid do not allow the truth out or others in; unbounded stories can have a similar effect by confusing the listener and encouraging enmeshment so that no coherent narrative theme can emerge (George, Kaplan, and Main, 1985). Based on how interviewees answered these open-ended questions interviewers would classify them into three categories which paralleled Ainsworth's infant attachment styles: "secure" (or

free and autonomous with respect to attachment), or “dismissing” (of attachment), or “preoccupied” (with attachment) (George, Kaplan, and Main, 1985).

*Social Psychologies Approach to Measuring Attachment*

Hazan and Shaver (1987) went onto research their idea on adult romantic attachment, within the framework of personality-social psychology, by developing a simple self-report measure. This measure consisted of three brief descriptions of feelings and behaviors in romantic relationships that were intended to be equivalent to the three infant attachment styles identified earlier by Ainsworth et al. (1978). Participants were asked to read the three descriptions and then place themselves into one of the three categories according to their primary feelings and behaviors in romantic relationships. The three descriptions were:

*Secure:* I find it relatively easy to get close to others and am comfortable depending on them and having them depend on me. I don't worry about being abandoned or about someone getting too close to me.

*Avoidant:* I am somewhat uncomfortable being close to others; I find it difficult to trust them completely, difficult to allow myself to depend on them, I



am nervous when anyone gets too close, and often others want me to be more intimate than I feel comfortable being.

*Anxious/Ambivalent:* I find that others are reluctant to get as close as I would like. I often worry that my partner doesn't really love me or won't want to stay with me. I want to get very close to my partner, and this sometimes scares people away.

Results from the measure (Hazan & Shaver, 1987), found that the distribution of categories was similar to that observed in infancy. In other words, about 60% of adults classified themselves as secure, about 20% described themselves as avoidant, and about 20% described themselves as anxious-resistant.

Hazan and Shaver's (1987, 1990) were followed by hundreds of other studies that use the same simple forced choice self-report measure. Over time attachment researchers made a number of methodological and conceptual improvements adding a Likert scale and breaking the descriptions down into individual items (e.g. Levy & Davis, 1988). Eventually, from this research and improvements a consensus that attachment styles are best conceptualized as regions in a two dimensional (anxiety-by-avoidance) space was found. These two dimensions are consistently obtained in factor analyses of attachment measures

(e.g., Brennan, Clark & Shaver, 1998). The dimensions are as follows: (Fraley & Waller, 1998)

*Anxiety*: concerned with a strong desire for closeness and protection, intense worries about partner availability and one's own value to the partner, and the use of hyper-activating strategies for dealing with insecurity and distress.

*Avoidance*: concerned with discomfort with closeness and dependence on relationship partners, preference for emotional distance and self-reliance, and the use of deactivating strategies to deal with insecurity and distress.

Those who score low on both dimensions are characterized as having a secure attachment style. They tend to trust in partners, expecting their partners to be available and responsive. Also they tend to find comfort in closeness and interdependence. Lastly they tend to have constructive ways of coping with threats and stressors.

People who score high on both dimensions "fearful avoidants" (Bartholomew & Horowitz, 1991) are especially low in trust and seem more likely than other people to have been hurt or abused in important relationships (Shaver & Clark, 1994).

The most popular of the self-report measures of adult attachment style are Brennan, Clark, and Shaver's (1998) ECR and Fraley, Waller, and Brennan's (2000) ECR-R--a revised version of the ECR. Brennan et al.(1998) created the ECR by factor analyzing the non-redundant items from all the previous self-report attachment measures.

### **Stability of Attachment**

The basic premise of attachment theory is that individual's internal model of attachment remains relatively stable over their life span (Bowlby, 1973, 1980, 1982). Although this internal attachment model can change in response to life experiences that disconfirm the existing model, a high rate of stability would be expected over short periods without the influence of any major life events (Scharfe & Bartholomew, 1994). This theory demonstrates itself in infancy whereby the stability of social circumstances (e.g. stressful life events or changing family characteristics) affects the attachment stability (Waters, 1978), however, attachment stability while found to be lower was still significant (Egeland & Farber, 1984). Similarly, Sroufe and Waters (1977) proposed attachment as an organizational construct as opposed to a trait because it is based on the affective tie between infant and caregiver and to a behavioral system which is influenced by context. Therefore we can predictably account for developmental and contextual changes as a predictable organization of adaptive behaviors (Sroufe and Waters). In early childhood a large number of researches have

reported longitudinal links between infant attachment patterns and later relationships with peers during childhood (Arend, Grove, and Sroufe, 1979; Erickson, Sroufe, & Egeland, 1985; Main, Kaplan, & Cassidy, 1985; Sroufe, 1983; Watters, Wippman, & Sroufe, 1979; Elicker, Englund, & Sroufe, 1992). These findings indicate that attachment patterns evolve to reflect a relatively stable characteristic in a child. The premise that attachment style is a relatively stable one is important to this present investigation because it lays the groundwork for why attachment research is important and significant i.e. the numerous long term implications and correlates attachment style has.

The stability of adult attachment follows that of children with several longitudinal studies having demonstrated moderate stability of adult attachment patterns ranging from weeks to many months (Hammond & Fletcher, 1991; Shaver & Brennan, 1992; Scharfe & Bartholomew, 1994). Attachment stability as measured through test-retest reliability has been demonstrated over time both with self-report measures (Collins & Read, 1990; Feeney, Noller, & Callan, 1994; Levy & Davis, 1988), and to a greater degree interview based measures (e.g. Adult Attachment Interview [George, Kaplan, & Main, 1985]) which indicate that attachment stability increases as the measurement is refined (Scharefe & Bartholomew, 1994). Whereby some instability across studies can be accounted for by measurement error, all these findings suggest adult attachment style appears to be relatively stable and trait like at least over short periods of time.

Stability of attachment, particularly in adulthood is important for this study since we are primarily focused on how adult attachment functions in general.

### **Attachment Research**

#### ***Relationship Quality***

In Hazan and Shaver's (1987) original studies, they provided evidence for the association between adult attachment style and how a person experiences romantic love. Specifically they discovered that secure participants rated their primary love relationship as happy, friendly, and trusting. Avoidant individuals were more likely to be fearful of intimacy and experience emotional extremes and jealousy in their primary love relationships. Lastly, anxious participants were characterized by obsession, extreme sexual attraction and jealousy, emotional extremes, desire for union with the partner, and likelihood to fall in love quickly and indiscriminately. These studies are of particular importance not just because they provided the initial support for the parallels between infant-caregiver attachment and adult romantic love attachment.

A number of cross-sectional studies (e.g. Feeney & Noller, 1990; Hazan & Shaver, 1987, 1990; Levy & Davis, 1988; Simpson, 1990) on attachment and close relationships have also all indicated that securely attached individuals report higher levels of satisfaction, interdependence, trust, intimacy, and commitment in their relationships. Conversely, individuals with avoidant attachment patterns tend

to report lower levels of these qualities, and anxious ambivalent relationship partners tended to report less satisfaction in their relationships and more conflict and ambivalence over their relationships. All these studies emphasize the wide ranging impact attachment style has on interpersonal relationships.

Keelan, Dion, and Dion (1998) found that communication patterns were influenced by attachment style discovering that securely attached participants disclosed more intimate details to their partners than to strangers, whereas those with insecure attachment styles disclosed similarly across relationships. Similarly, in her work examining the effects of partner attachment pairings, Major (2003) found that her results were consistent with the prediction that secure partner pairings would demonstrate higher degrees of intimacy, more comfort in disclosing vulnerable information, and greater openness than insecurely attached partner pairings and mixed partner pairings. Understanding attachment security and how it relates to disclosure and openness to vulnerability is both important to attachments' significance and to the current investigation on boundaries. Interpersonal boundaries are at least directly theoretically linked to how open or closed an individual is with vulnerable information (Hartmann, 1991).

### *Sexuality*

With regards to how attachment style affects attitudes and behavior towards sex, several researchers (Brennan & Shaver, 1995; Feeney, Noller, Patty,

1993; Hazan & Zeifman, 1994) found that avoidant individuals tend to hold more permissive views of casual sex than those who are securely or anxiously attached. In contrast, Hazan & Zeifman (1994) also found that secure individuals were more likely than others to be involved in mutually initiated sex and to enjoy physical contact. In females anxious-ambivalent attachment has been found to be associated with exhibitionism, domination, bondage, and voyeurism (Feeney et al. 1993; Hazan & Zeifman, 1994). Whereas anxious-ambivalent males, tend to be more sexually reserved (Feeney et al. 1993; Hazan & Zeifman, 1994). Clearly, attachment style has been demonstrated to affect attitudes and behaviors toward sex. Since, sexuality is an integral component to relationship satisfaction, it is important to investigate its significance for my current study. In addition, observing sexual attitudes provides a way in which to observe how individuals physically might manifest boundaries in relation to attachment albeit in an indirect fashion as boundaries are not the article of inquiry in these studies. However, it will be hypothesized that differences in sexual behavior and experience e.g. how open or controlled, how distant or connected, will reflect the quality of each individual's boundaries with respect to attachment.

Overall, studies have supported the idea that attachment security fosters a more positive and stable foundation for sexual intimacy. For example, more securely attached individuals tend to believe sex should happen within a committed romantic relationship (Brennan & Shaver, 1995). They also report

having fewer “one night stand” sexual encounters (Cooper, Shaver, & Collins, 1998) and fewer “hook-ups” (i.e. sexual encounters with a stranger or acquaintance) (Paul, McManus, & Hayes, 2000). This is particularly interesting to my current study because of the face value implications level of commitment and sexual involvement has in relation to boundaries. Also, secure people tend to report having experienced more positive emotions and fewer negative ones in sexual relationships than insecure individuals (Birnbaum, Reis, Mikulincer, Gillath, & Orpaz, 2006; Gentzler & Kerns, 2004; Tracy, Shaver, Albino, & Cooper, 2003). Lastly, the security of attachment in committed relationships impacted the level of sexual involvement in the relationship (Brassard, Shaver, & Lussier, 2007). For example, the higher a woman's and her partners score on avoidant attachment the less often she reported having sex. More avoidant men reported having sex less often if female partner was attachment anxious. If both partners were anxiously attached, there was more reported sex. Overall, the amount of sexual involvement and satisfaction are highly important to relationship satisfaction and thus these studies strengthen the current investigations assertion that it is important to understand more fully an individuals be able to access and change the attachment system in individuals.

### ***Self Esteem***

Attachment research has consistently shown attachment security associated with positive self-representations securely attached people reporting



higher self-esteem than insecurely attached ones (Bartholomew & Horowitz, 1991; Mickelson, Kessler, & Shaver, 1997). Securely attached individuals also view themselves as more competent and efficacious (Cooper, Shaver & Collins, 1998) and tend to possess more optimistic expectations about their ability to cope with stressful events (Berant, Mikulincer, & Florian, 2001; Cozzareli, Sumer, & Major; 1998). Lastly attachment security is also associated with having a coherent balanced and well-organized model of self (Mikulincer, 1995). These studies all demonstrates again the wide ranging implications attachment has on multiple life factors especially those that influence long term factors like life satisfaction and success. Attachments far reach only reinforces the importance of finding efficacious ways in which to influence attachment.

### **Boundaries**

Federn (1952a) explained that there are two kinds of boundaries; an inner boundary within the personality, and one external to the personality, separating self from others. Explaining further, the concept of boundaries is aimed to depict the demarcation between the person and the external environment, as well as among the person's own internal mental territories (Landis, 1970). Specifically, this study will theoretically explain boundaries similar to Lewin's (1935, 1936, 1938, 1951) ideas on psychological spaces as a perceptual metaphor based on physical space. A boundary is a border between a realm, within, a realm without, and the interface between these two realms. The contact boundary separates

interactions of events, states, and experience into two environments. These two realms are called the intrapersonal and interpersonal. The Intrapersonal realm is intrapsychic or subjective reality where behavior is a privately perceived experience e.g. internal mental boundaries. The interpersonal realm is where this reality projects itself, and behavior is open to public consensus e.g. external observable boundaries. In order to better understand boundaries and their importance, this study will briefly explore the theoretical differences between intrapersonal and interpersonal boundaries, boundary styles, the stability of boundaries, and what research says on the importance of boundaries.

### **Boundary Theory**

#### ***Intrapersonal boundaries***

The concept of ego boundary refers the demarcation between a person and his/her external environment among the person's own internal mental processes (Landis, 1970). It includes the division between what Freud called id, ego, and superego. Included in these are thoughts, feelings, or memories (Federn, 1952a, 1952b; Freud, 1975a, 1975b; Hartmann, Elkin & Garg, 1991; Hartmann, 1991; Landis, 1970). Ego boundary additionally applies to the demarcation between self and non-self (Chodorow, 1978; Federn, 1952; Hartmann, 1984, 1991; Landis 1970; Palumbo, 1987).

Landis (1970) commented most healthy people under ordinary circumstances experience themselves as separate individuals and are aware of their ideas and fantasies at the same time having no difficulty separating themselves from what's happening in the environment.

Freud (1975a, 1975b, 1975c, 1975d) proposed that the ego is a balance between the instinctual impulses of the id and the punishing super-morality of the superego. Freud (1975a) also saw the ego as a representative of the real world, and the mental agency which supervises all its own fundamental processes. Even when going to sleep at night, it exercises the censorship on dreams. (Freud, 1975a).

Although Freud (1975a, 1975b, 1975c, 1975d) did not use the term ego boundaries, he viewed the ego as a controller that kept the id in check. He suggested that the divisions between the ego were directly influenced by the real world, and the id. "In psychoanalytic literature solid ego boundaries are considered the ideal, and the emphasis is on defects and weaknesses in ego boundaries which lead to psychosis or other pathological conditions" (Hartmann, Harrison, & Zborowski, 2001, p. 349).

Landis (1970) pointed out that even though the ego boundary construct originally evolved within the Freudian psychoanalytic school, it has also been

used in various ways within other fields of thought including the Gestalt approach.

Hartmann (1997) commented that:

No matter how we conceptualize the contents of our mind--in the lay fashion as thoughts, feelings, fantasies, etc.; in the psychoanalytic fashion as ego, id, superego, etc.; or in a computer/network model as perceptual processes, semantic procession modules, etc.--we are speaking of parts, regions, functions or processes which are separate from one another and yet obviously connected (p. 147).

He goes on to describe that the boundaries between these regions or processes are not absolute. They are separate from one another and yet obviously connected. These boundaries can be thick or solid on the one end or comparatively thin or permeable on the other. Hartmann asserted that our interpersonal boundaries are only one of many types of boundaries that individuals hold in their minds (Hartmann, 1997, p. 147).

### ***Interpersonal boundaries***

Minuchin (1974) defined interpersonal boundaries within the family structure. He defined boundaries as the invisible line of separation between individuals and between family subsystems. He theorized that boundaries vary in permeability, with rigid boundaries being a boundary that does not allow communication between parts (individuals or subsystems) and diffuse boundaries being very permeable having constant confusion about what system an individual is a part of. Minuchin described cohesion (enmeshment vs. disengagement) as another way to describe boundaries. Enmeshment is when a family has diffuse boundaries e.g. when the behavior of one member of the family immediately affects the others. On the other hand, disengaged families are those with rigid boundaries that require a higher level of stress in one member in order to engage the others.

### ***The Concept of Boundary Thickness***

The idea that ego boundaries may be firm, thick, or impermeable in some people, and more fluid, thin, or permeable in others is a well-known concept (Federn, 1952a; Levin, 1990; Hartmann; 1991). Hartmann (1991) described the difference between thick vs. thin boundaries as being the difference between two things, processes, or functions in the mind, with thickness and thinness appearing on a continuum. One end of the continuum is represented by extreme thinness and the other end is represented by extreme thickness. At the thin end of the

continuum, increased connection occur between these parts and at the thick end there is greater separation between these parts.

Federn (1952a) theorized that the quality of the boundaries (i.e. thinness) is influenced by various states of consciousness. As sleep approaches, the ego and its boundaries weaken. The thinned boundaries allow subconscious material to surface (i.e. dream).

The significance of boundary thickness can be explained by looking at both extremes of the continuum. For example, when ego boundaries are less permeable the ability to empathize suffers. In general, having rigid boundaries prevents that individual from being impacted by another person's emotional state. This blockage results in a level of understanding that is either purely at an intellectual level, or a projection of that person's feelings onto the other. On the other hand, if boundaries are too permeable then the self-other differentiation may not occur and thus might lead to an uncontrolled merging or a narcissistic view of the other as an extension of self (Jordan, 1983).

### **Stability of Boundaries**

Investigating the stability of boundaries in general is important to our inquiry because we are looking at boundaries as another way of explaining attachment. Therefore one might hope to expect that boundaries follow similar rules to attachment in terms of stability.

In general, individuals are thought to have either an overall thinner boundaries or overall thicker boundaries (Hartmann, 1984, 1991). However, new experiences and aging can influence boundaries in either direction either becoming thicker or thinner. Hartmann (1991) helped classify the personality dimension of boundary thickness by examining multiple types of boundaries with a person e.g. body boundaries, boundaries between thoughts and feelings, interpersonal boundaries, and boundaries between the conscious and the unconscious. From his research, Hartmann (1991) discovered that while a person does not necessarily have all thin or all thick boundaries there is a tendency towards one type. This tendency toward one direction or the other gives some support for the first theory that on the whole boundaries are stable.

Developmentally, children appear to have more permeable ego boundaries (Lewin, 1935) and experience a universal thickening of ego boundaries during latency (Hartmann, 1991). The extent of this thickening, having both genetic and environmental contributions, will eventually determine the boundary structure of the adult. Lastly, in general it's been found (Hartmann, 1991) that while individuals maintain their basic boundary structure that boundaries tend to thicken with age.

Besides development, researchers (Hartmann, 1991; Lewin, 1935) have observed that life experience and stress (e.g. loss, trauma, examinations, and

pregnancy) can create changes in boundaries in either direction, depending on the situation. Thus it appears that similar to attachment in that boundaries remain stable in general but can be influenced by external factors like major life experiences. This lends support to this current investigations significance in supporting the proposal that attachment and boundaries are functioning within the same/similar internal working model.

### **Approaches to Measuring Boundaries**

Until Hartmann's Boundary Questionnaire (1991) few attempts has been made to quantify boundary measures. Some attempts have been made to measure the boundary construct through using the Rorschach (Blatt & Ritzler, 1974; Landis; 1970). However, all these measure described boundaries like Hartmann as thick or thin, and none has measured it using a self-report measure. Hartmann, and psychoanalyst, sleep disorder specialist, and frequent studier of dreams, initially conceptualized the boundary construct though his studies on dreams and nightmares (1991). Hartmann (1984; Russ, van der Kolk, Falke, & Oldfield, 1981; Russ, Oldfield, Sivan, & Cooper, 1987) first discovered the attachment construct with through a study he conducted to determine what differences there are between chronic nightmare sufferers and non-nightmare sufferers. Through interviewing these subjects some striking differences between nightmare sufferers and non-nightmare sufferers began to emerge. Trends in occupation, sensitivity, openness, trust, defenses, vulnerability, and flexibility were all observed. In



general, nightmare sufferers appeared more flexible and fluid in their identities and social relationships. When asked to describe nightmare sufferers globally the following words came up: “fluid,” “artistic,” “vulnerable,” and “open.” From these patterns Hartmann theorized that these nightmare sufferers had “thin boundaries” not being able to separate things out and lacking barriers or walls to separate themselves from the world. This was confirmed by Hartmann (1984; Sivan, Cooper, Treger, 1984), through using the Rorschach and a scoring system based on the work of Blatt and Ritzler (1974) and of Fisher and Cleveland (1968). In order to study this construct more widely, Hartmann developed the Boundary Questionnaire which was design to include as many different aspects of boundaries and types of boundaries as possible.

The original HBQ had twelve categories (e.g. 1) Sleep/wake/dream 2) Unusual experiences 3) Thoughts, feelings, moods 4) Childhood, adolescence, adulthood 5) Interpersonal 6) Sensitivity 7) Neat, exact, precise 8) Edges, lines, clothing 9) Opinions about children and others 10) Opinions about organizations 11) Opinions about people, nations, groups 12) Opinions about beauty, truth) which was preliminarily given to thirty colleagues and students of Hartmann. Subjects were instructed to respond to each item on a five-point scale from 0 (no, not at all, or not at all true of me) to 4 (yes, definitely true of me). Two thirds of the items are worded so that 4 is the thinnest and one-third are worded in the opposite direction 4 being the thickest. For each person a sub score is received in

each of the 12 categories, a total score for the first 8 categories (Personal Total), a total for the last 4 categories ( World Total) and an overall total boundary score (Sumbound). Further refinement to the HBQ was made to the clarity and wording of certain questions and later to the inclusion of certain question based on their correlation to the Sumbound. From these scores two dimensions of boundary personality were categorized:

***Hartmann's Boundary Types***

*Thick:* A person with very thick boundaries can easily focus on one thing at a time and is able to keep thoughts and feelings separate. Their mental states are absolutely clear for example when awake vs. asleep vs. dreaming. This person has a clear sense of the separation between their past, present, and future. They also have a definite sense of space around themselves (physical boundary) and group identity. They also tend to have a clear autonomous sense of self, never losing him/herself in a relationship, They also tend to see the world in terms of black versus white, us versus them, good vs. evil (Hartmann et al., 2001, p. 348).

*Thin:* A person with thin boundaries tends to be the opposite of rigid. They may attend to many things having difficulty focusing on one thing at a time. This person is likely to meld thought and feelings unable to differentiate between the two. They will probably have a rich fantasy life, dreaming and sometimes becoming lost in a fantasy, having difficulty in distinguishing it from reality.

There is a less solid sense of personal space, a tendency to merge or lose oneself in a relationship, to have less of the usual psychological defense mechanisms, to have a less firm or more fluid sexual (Hartmann, 1997)

### **Research on Boundaries**

#### ***Gender***

Chodorow (1989) believed that since girls were cared for and socialized by women that their personality was based on relational connection as well as flexible ego boundaries. Hartmann (1991) and Bevis (1986) found that women as a group scored significantly thinner on the Hartmann Boundary Questionnaire (1991) than men specifically in areas related to feelings, personal experiences, and sensitivities. Chodorow (1978) went on to explain that men tend to have more rigid boundaries and to maintain greater emotional distance in their interpersonal relationships possibly also speaking to socialization of the Western male model of development. The findings that women tend to have thinner boundaries are important to my current investigation in that it shows socialization has an impact on how people manifest boundaries. In addition, knowing this tendency it is important to interpret thin boundary scores in women given this context.

#### ***Dreaming***

In a number of studies, there they found an association between thinner boundaries and high dream recallers, adults with nightmares, and lucid dreamers

(Hartmann, 1991; Hartmann, Elkin, & Garg, 1991; Galvin, 1990). At the same time Hartmann noted that patients suffering from Sleep Apnea tended to have thicker boundaries (Hartmann, 1992). Thinness of boundaries was also associated with content of dreams subjects experiencing vivid, more dreamlike, more emotional, dreams and having more interactions between characters (Hartmann et al, 1991; Hartmann, Rosen, & Rand, 1998; Schredl, Kleinferchner, & Gell, 1996; Zborowski, McNamara, Hartmann, Murphy & Mattle, 1998). Investigating dream states of different boundaried individuals is particularly important in the investigation because it shows the intrapersonal boundaries more clearly and how they might manifest. Thus if a relationship between boundary thickness and attachment were to exist therapists might tell their progress in therapy by analyzing changes in types of dreams and amount of dreaming.

### *Intimacy*

Being emotionally intimate suggests having somewhat permeable or flexible ego boundaries (Landis, 1970). Hartmann (1991) and Hartmann et al. (1991) found that people with thick boundaries tended to keep emotional distance between themselves and others. Conversely, those with thinner boundaries became involved more quickly and deeply in relationships. When exploring relationships of very thick and very thin boundaried people Hartmann(1991) observed that those with thicker boundaries experienced a minimum of closeness with their spouses, but also lack conflict. Whereas thin boundaried people, tended

to have intense and often short lived relationships. These people tended to be open, trusting, and vulnerable, and sensitive in relationships (Hartmann et al., 1991). Investigating intimacy as it relates to boundaries is particularly relevant to this investigation as we might theorize that it share the most commonalities with attachment's theories on connectedness. In addition, speed of courtship, amount of sharing, and emotional distance are all areas of boundary setting that a therapist could address. Thus, if attachment and boundary thickness are related, this might help therapists and clients conceptualize their client's behavior better.

### ***Occupation***

Researches noticed that people with more creative professions like art students and music students tended to have thinner boundaries (Beal, 1989, Hartmann, 1991). On the other hand, those with more traditional careers naval officers, salespersons, and lawyers tended to have thicker boundaries (Hartmann, 1991). The implications of predicting boundaries of certain professions is important for this current study because if the relationship with attachment does exist it would provide a quicker means of identifying attachment.

### ***Diagnosis***

In terms of clinical diagnosis some interesting trends were noticed. Hartmann (1991) noted that thinner boundaried individuals if diagnosed were more likely have diagnosis like Borderline Personality Disorder, Schizoid

Personality Disorder or Schizotypal Personality Disorder (Hartmann, 1991). Whereas, if the diagnosable individuals had thicker boundaries, Obsessive-compulsive Personality Disorder or Alexithymia were more likely. Knowing the correlates of diagnosis with types of boundaries, might provide therapists with useful information on alternative treatments if attachment was related. This would be helpful in my current study because of the potential benefits it would provide to clients in giving therapists a better understanding of them and their diagnosis.

### **Summary of Present Study**

#### **Problem Statement**

This study will address the following questions: Are attachment style and boundaries related? Specifically, does an individual's attachment style have any bearing on how thick or thin their boundaries are? Conversely, is thickness or thinness of boundaries related to any particular attachment style?

#### **Hypothesis**

Research question: Does attachment style relate to boundary thickness?

Hypothesis 1: Anxious attachment is negatively correlated with boundary measures. Those presenting anxious attachment will have thinner boundaries.

Hypothesis 2: Avoidant attachment is positively correlated with boundary measures. Those presenting avoidant attachment will have thicker boundaries.

Hypothesis 3: Those with secure attachment will have neither very thick nor very thin boundaries but a balance of the two.

### **Definition of Variables**

Note: The following definitions on adult attachment style are taken from Fraley and Waller's (1998) dimensional representation of attachment which are more accurate than categorical representations. The definition being used is from the social psychological tradition vs. the developmental one because of the attachment measure being used in this study (ECR-R) comes from this tradition. More explanation as to this choice will be detailed in the instrumentation section in research design methods. For the following definitions on boundary thickness we will be using Hartmann's definitions as we are using his measure on boundaries Hartmann's Boundary Questionnaire (1991).

*Attachment:* The behavioral and motivational system formed an early age and activated for survival whereby infants enact attachment behaviors in order to maintain proximity to their caregivers (Bowlby, 1969/1982, 1973, 1980). When a caregiver is available and responsive and available it allows the infant to explore.

Conversely, when infants perceive their caregivers as unavailable or unresponsive their behavioral system is triggered to enact attachment behaviors to restore proximity between infant and caregiver. Over a series of these interactions infants begin developing expectations about their caregiver's responsiveness and dependability (Bowlby, 1969/1982, 1973, 1980). These expectations formed from their experiences in close relationships shape their attachment system. This attachment system becomes their internal working model of self, partners, and relationships (Bowlby, 1988). Bowlby proposed that these internal models eventually become relatively stable personality patterns with increasing age (Bowlby, 1973).

*Attachment Style:* Attachment style can be characterized as the relatively stable individual differences of each person's internal working model (Bowlby, 1969/1982, 1973, 1980). These individual differences are established through each individual's history of attachment experiences and resulting consistent working models lead. These stable individual differences have been examined empirically and measured through a construct called attachment style- a person's characteristic pattern of expectations, needs, emotions, and behavior in social interactions and close relationships (Hazan & Shaver, 1987).

*Attachment Anxiety:* concerned with a strong desire for closeness and protection, intense worries about partner availability and one's own value to the



partner, and the use of hyper activating strategies for dealing with insecurity and distress (Fraley & Waller (1998).

*Attachment Avoidance:* concerned with discomfort with closeness and dependence on relationship partners, preference for emotional distance and self-reliance, and the use of deactivating strategies to deal with insecurity and distress (Fraley & Waller (1998).

*Secure Attachment:* tend to trust in partners, expecting their partners to be available and responsive. Also they tend to find comfort in closeness and interdependence. Lastly they tend to have constructive ways of coping with threats and stressors (Fraley & Waller (1998).

*Boundaries:* Boundaries can also be explained by Federn (1952a) who introduced two kinds of boundaries; an inner boundary within the personality, and one external to the personality, separating self from others. Explaining further, the concept of boundaries is aimed to depict the demarcation between the person and the external environment, as well as among the person's own internal mental territories (Landis, 1970). Specifically, this study will theoretically explain boundaries similar to Lewin's (1935, 1936, 1938, 1951) ideas on psychological spaces as a perceptual metaphor based on physical space. A boundary is a border between a realm, within, a realm without, and the interface between these two realms.

*Intrapersonal vs. Interpersonal Boundaries:* There are two realms of boundaries one intrapersonal and one interpersonal. The Intrapersonal realm is intrapsychic or subjective reality where behavior is a privately perceived experience e.g. internal mental boundary. The interpersonal realm is where this reality projects itself, and behavior is open to public consensus e.g. external observable boundary.

*Thickness vs. Thinness of Boundaries:* Hartmann (1991) described the difference between thick vs. thin boundaries as being the difference between two things, processes, or functions in the mind, with thickness and thinness appearing on a continuum. One end of the continuum is represented by extreme thinness and the other end is represented by extreme thickness. At the thin end of the continuum, increased connection occur between these parts and at the thick end there is greater separation between these parts.

*Thick Rigid:* A person with very thick boundaries can easily focus on one thing at a time and is able to keep thoughts and feelings separate. Their mental states are absolutely clear for example when awake vs. asleep vs. dreaming. This person has a clear sense of the separation between their past, present, and future. They also have a definite sense of space around themselves (physical boundary) and group identity. They also tend to have a clear autonomous sense of self, never

losing him/herself in a relationship, They also tend to see the world in terms of black versus white, us versus them, good vs. evil (Hartmann et al., 2001, p. 348).

*Thin Diffuse:* A person with thin boundaries tends to be the opposite of rigid. They may attend to many things having difficulty focusing on one thing at a time. This person is likely to meld thought and feelings unable to differentiate between the two. They will probably have a rich fantasy life, dreaming and sometimes becoming lost in a fantasy, having difficulty in distinguishing it from reality. There is a less solid sense of personal space, a tendency to merge or lose oneself in a relationship, to have less of the usual psychological defense mechanisms, to have a less firm or more fluid sexual (Hartmann, 1997)

### **Assumptions**

The following assumptions will be made regarding the study:

1. Both attachment style and boundary thickness are relatively stable constructs in adulthood (Hammond & Fletcher, 1991; Shaver & Brennan, 1992; Scharfe & Bartholomew, 1994; Hartmann, 1991).
2. Attachment is equally important in adulthood as it is in childhood (Hazan and Shaver, 1987).

### **Delimitations**

1. The subjects will be above the age of 18.

2. The subjects will not have any psychological problems severe enough to require hospitalization.
3. The subjects will be English speaking.
4. All the subjects will have had at least a high school education, which tended to assure literacy at a level that would allow for the ability to answer the questionnaires.

### **Purpose and Significance of Study**

Attachment is widely agreed to be extremely important in infancy, childhood, and adulthood with a number of wide ranging implications for variable measures of life satisfaction like relationship quality, intimacy, and self-esteem (e.g. Major, 2003; Impett, et al., 2008; Butzer & Campbell, 2008; Brassard et al., 2007; Bartholomew & Horowitz, 1991; Mickelson et al., 1997). Given the wide ranging significance of attachment, it is important for both individuals and therapists to both understand and be able to influence this internal working model of attachment. While some schools of therapy like relational psychoanalysis Greenberg & Mitchell (1983) have sought to define treatment models for addressing attachment insecurity, there is only one evidence based treatment by Bateman and Fonagy (2004) and Fonagy and Bateman (2006) that addresses treatment of attachment. Bateman and Fonagy (2004, 2008) and Fonagy & Bateman (2006) developed a form on psychodynamic psychotherapy called Mentalization-based treatment which was designed for individuals with borderline

personality disorder who suffered from disorganized attachment and theoretically suffer from a failure to develop a mentalization capacity within the context of an attachment relationship. Fonagy and Bateman (2004) and Fonagy and Bateman (2006) define mentalization as the process by which we implicitly and explicitly interpret the actions of oneself and others as meaningful on the basis of intentional mental states. The goal of treatment is to increase patient's mentalization capacity which should improve affect regulation and interpersonal relationships.

Boundaries, both intrapersonal and interpersonal, while trending toward one direction either thicker or thinner and like attachment style can be influenced by major life experiences (Hartmann, 1991). According to Hartmann (1991), people have multiple types of boundaries e.g. body boundaries, boundaries between thoughts and feelings, interpersonal boundaries, and boundaries between the conscious and the unconscious. Overall individuals have either thicker or thinner boundaries; however, it is possible for individuals to have varying amounts of thickness depending on the type of boundary. Considering our varied knowledge on boundaries and its many types, if boundaries and attachment style were related, it would give us a route to theoretically understanding the internal working model of attachment more fully.

If the relationship between boundaries and attachment did exist it would provide multiple routes into challenging an individual internal working model of attachment. A therapist might help a client disconfirm their existing internal attachment model by providing targeted alternative experiences using the boundary subtypes. For example, helping clients alter their assumption about key boundaries like sensitivity or interpersonal trust in order to work on disconfirming their previously held beliefs about relationships and the world in general. Operationally, you could alter these assumptions through role plays, mini in vivo experiments, and verbally challenging by offering alternative explanations.

Besides offering a directed route for treatment interventions, knowing this relationship would help both therapist and clients better conceptualize the problem and provide a collaborative method in which the therapist can help the client determine what boundaries they want to keep and what boundaries they want to change. Giving the client the power of being able to actively be a part of and change their attachment paradigm, instead of being resigned to the being a victim of their circumstances, would help clients become more active agents in their own change. For therapists, understanding the multi-dimensional construction of their clients attachment paradigm would help them more clearly conceptual and plan treatment based on their individualized client's needs.

The indications this relationship has for couple's therapy and parent-child therapy is boundless. For example, in couples therapy therapist and clients could more clearly identify and treat the boundary dynamics which are contributing to the triggering of each individual's attachment style in a conflict. Similarly, certain problem boundary behavior can be more readily identified in order to help parents to better be able to be responsive and attach to their children. Possible treatments can be both through family therapy and through parenting classes.

Despite the wide ranging and useful therapeutic, understanding, treatments, and conceptualization of the relationship between attachment style and boundary thickness has not been directly studied until recently (Zborowski, Hartmann, Newsom, & Banar, 2003). Zborowski et al. (2003) used Bell's Object Relations and Reality Testing Inventory, Interpersonal Dependency Inventory, Spielberg State-Trait Inventory to measure attachment and other object relations dimensions. Their results indicate support my hypotheses finding that boundary thinness was related to insecure attachment and interpersonal dependency.

Other studies, have investigated both attachment and boundaries, however not in relationship to one another. For example, in 2001, Frederick Lopez sought to determine whether insecure adult attachment orientations and measures of problematic self-other boundary regulation would each be significantly related to splitting tendencies and found that attachment anxiety was associated with weak

self-other differentiation, high levels of emotional reactivity, and strong needs for social approval. Since weak self-other differentiation would indicate a thinness of boundaries, this study would lend support to the idea that attachment anxiety is associated with boundary thinness.

Kretchmar & Jacobvitz (2002) bring up the important point about the intergenerational transmission of boundaries. They looked at whether attachment, boundary patterns, and caregiver style is transmitted across generations and found that a balance of intimacy and autonomy is recreated in the parent-child relationship from one generation to the next. This re-creation of patterns in particular draws points an arrow towards the importance and significance of both these concepts since they appear to co-exist together.

Bower (1996) also alluded to the transmission of boundaries being affected by the intimacy of mother daughter relationships. Interestingly she found that women who were overprotected in childhood had significantly thinner ego boundaries in several areas. This accurately reflects Hartmann's (1991) research on how life experiences, stress, and illness can affect boundary thickness and reiterates the idea that one's boundaries although generally stable are influenceable.

Studying the relationship between attachment style and boundaries as discussed has multiple therapeutic applications including routes for a variety of



intervention and treatment applications for insecure attachment. In addition, there appears to be indications for preliminary support of this concept (Zborowski et al., 2003; Lopez, 2001; Kretchmar & Jacobvitz, 2002; Bower, 1995). Thus far, these studies (Zborowski et al., 2003; Lopez, 2001; Kretchmar & Jacobvitz, 2002; Bower, 1996) have only provided further motivation and support for learning more about this concept discovering a number of theoretical and practical implications.

## **Chapter 2: Research Design and Methodology**

### **Description of Research Design**

This study was a non-experimental correlational study using survey data that looked at whether attachment style and boundary thickness co-varied. The correlational research design was chosen because the studies aim was to examine what if any relationship exists between attachment style and boundary thickness (e.g. are these variables associated with one another?). As this study sought to determine this relationship through passive observation e.g. it measured variables that already existed in nature and did not attempt to manipulate them, a correlational design was most appropriate. Since these concepts have not been linked previously, a correlational investigation was a preliminary step in eventually determining possible causation through follow-up studies. Therefore,

finding a correlation between these two concepts would lay the groundwork in investigating what kind of relationship they do have.

This study was cross-sectional and used convenience sampling through SurveyMonkey (a psychological survey website). Attachment style was defined according to the Fraley and Waller's (1998) two dimensional representation of attachment. Attachment style was measured by the Experiences in Close Relationship Inventory-Revised (Fraley, Waller, and Brennan, 2000) a two dimensional measure of attachment based on the same tenets of Fraley and Waller (1998).

### **Selection of Participants**

The study population aim was to consist of a minimum of 84 adults, above the age of 18, with an even distribution between male and females. An unbiased selection of an even distribution was to be ensured by a stratified random sample. For example males and females were to be put into a separate subject pool and then in each participant within both pools were to be assigned randomly a number between 1 and 50. The first 42 were to be selected for the study. All subjects would have at least completed their high school education, and would speak English as their primary language. The sample would be one of convenience e.g. social networks websites, school referrals, and work referrals, comprised of volunteers that met basic criteria for selection. For example, an even distribution

of males and females was wanted in order to control for a documented tendency towards thinness of boundaries in women. In general the population would consist of Caucasian adults 22-55 who were associated with undergraduate and graduate school both teachers and students, and that of the engineering profession. The power analysis for a bivariate correlation based on an alpha of .05, a beta of .80, and an effect size of  $r = .3$  would mean that this study would need an  $n$  of at least 84.

## **Instrumentation**

### **Attachment**

#### *Description of Measure*

Attachment was measured by the Experiences in Close Relationships Inventory- Revised (ECR-R) which is a 36 item self-report measure created by factor analyzing the non-redundant items from all the previous self-report attachment measures (Brennan et al., 1998). The ECR-R is designed to assess individual differences in attachment-related anxiety and attachment-related avoidance. Brennan et al. (1998) used the conceptualization of attachment previously agreed upon by multiple researchers (Hazan and Shaver's, 1987, 1990; Brennan et al., 1998; Fraley & Waller, 1998) as regions in a two dimensional (anxiety-by-avoidance) space. Participants are asked to answer based on how they generally experience relationships, not just in what is happening in a current relationship on a scale from 1 = strongly disagree and 7 = strongly agree.

Participants scored on two dimensions attachment anxiety and attachment avoidance (See definitions for explanation of dimensions). For further administration and scoring information on the ECR-R see Appendix B.

*Reliability of ECR-R*

Sibley and Liu (2004) and Sibley, Fischer, & Liu (2005) found that the ECR-R provided reliable and replicable self-report measures of romantic attachment anxiety and avoidance finding that latent indicators of the ECR-R anxiety and avoidance subscales displayed good test-retest reliability correlations in the low .90s during a 6 week and 3week periods respectively. This assertion was also supported by Fraley et al (2000) simulation analyses of the ECR-R.

Sibley and Liu (2004) estimates on internal consistency reliability tends to be .90 or higher for the two ECR-R scales. However, their Item Response Theory analyses suggest that the reliability might be a bit less at the secure end of both dimensions than at the insecure end of the dimensions. Sibley, Fischer, & Liu (2005) found similar support for internal consistency in their finding that ECR-R measures of anxiety and avoidance were strongly positively correlated  $r=.48$

*Validity of ECR-R*

According to the constructs measured in attachment (i.e. responsiveness and availability of other) the ECR-R meets content validity. As attachment anxiety and attachment avoidance are defined (see definitions) the ECR-R meets face validity.

Sibley et al. (2005), when comparing the ECR-R to a similar self-report measure by Bartholomew and Horowitz's (1991) Relationship Questionnaire they found support for ECR-R's construct of two dimension model of attachment (e.g. anxiety & avoidance) explaining 83% of the variance. Criterion validity was also established through Sibley et al (2005) comparison of the ECR-R to a Social interaction diary (Wheeler & Nezlek, 1977) which found that the ECR-R accurately predicted sizable portions of variance in diary ratings of anxiety and avoidance experienced during social interactions with a romantic partner ( $r$ s equivalent of .50) demonstrating convergent validity. At the same time Sibley et al. (2005) also found that the ECR-R measure were only weakly (less than 5% of variance) and non-significantly related to diary ratings of anxiety, avoidance, and enjoyment in social interactions with a family member or close friend, indicating good discriminate validity.

Fraley et al. (2000) found that the ECR-R provided substantially more precise estimates of latent attachment across the entire trait range indicating good

sensitivity of measure. The construct of the two dimensional model was further supported through Sibley et al (2005) use of a Confirmatory Factor Analysis designed to assess each constructs validity finding that the model was an excellent fit for the data (GFI=.95).

*A Note about Measure Choice.*

The ECR-R was chosen over the Adult Attachment Interview-AAI (George, Kaplan, & Main, 1985; Main et al., 1985) for utility purposes. The ECR-R is easier to complete, administer and score than the AAI. The AAI requires specialty training to administer the clinical interview and lengthy time requiring 60 to 90 minutes per participant. On the other hand, the ECR-R is a self-report measure which requires no specialty training on administration or scoring (scoring take 2-3 minutes) and on average takes participants 10 minutes to fill out. The ECR-R was chosen over the other self-report measures on attachment as it was found to have the best psychometric properties in a study examining four commonly used self-report inventories (Fraley, Waller, & Brennan (2000).

***Boundaries***

*Description of Measure*

The Hartmann Boundary Questionnaire-HBQ (1991) was used to assess thickness and thinness of boundaries. The BQ is a 138-item questionnaire that includes items on multiple types on boundaries. The HBQ assesses twelve

categories/scales of boundaries: sleep/wake/dream; unusual experiences; thoughts, feelings, moods; childhood, adolescence, adulthood; interpersonal; sensitivity; neat, exact, precise; edges, lines, clothing; opinions about children and others; opinions about organizations; opinions about people, nations, groups; opinions about beauty, truth. Participants are instructed to respond to each item on a five-point scale from 0 [no, not at all, or not at all true of me] to 4 [yes, definitely true of me]. From their adjusted score subjects are given an overall boundary score ranging from thick to thin (See definitions for explanation of boundary thickness).

### *Reliability*

The Hartmann Boundary Questionnaire (1991) was found to have good test-retest reliability ( $r$ 's of about .77 in two samples) over six months (Kuzendorf & Maurer 1988-89; Funkhauser, Wurmle, Comu, & Bahro, 2001). In general, women were found to score half a standard deviation higher (thinner) than men, and age correlated negatively (-.31) with the total indicating a possible need to correct for these factors for reliability (Hartmann, 1991).

Hartmann, Harrison, Bevis, Hurwitz, Holevas, & Dawaini, (1987) found significant ( $r$  of .925) positive correlations of Sumbound (total HBQ Score) and all of the items for the test indicating good internal consistency reliability. An

exploratory factor analysis was done on the correlations among the 138 questions and 6 stable factor solutions were found. These factor-loadings were replicated (within .02 of those found in the total group) multiple times (Harrison et al, unpublished; Zborowski, 2001), demonstrating internal consistency of this measure.

### *Validity*

The HBQ had good content validity as it correctly predicted in the original sample who would score very thick or very thin based on the underlying theory (Hartmann et al., 1991). Harrison et al., 1993 also noted that the factors in which the HBQ theoretically tested, showed consistency with the thick-thin boundary idea. The HBQ has low to medium face validity as it is not immediately obvious what it is measuring.

In a study by Levin, Gilmartin, & Lamontano, (1998-1999) which compared the Rorschach and the HBQ, subjects with thinner boundaries were found to have significantly higher boundary disturbance scores and significantly lower form quality scores indicating support for the boundary construct and criterion validity. Harrison et al. (1993) found that the pattern within the HBQ was consistent with differences found in thick and thin individual indicating construct validity.



### **Demographic Questionnaire**

A short questionnaire on basic demographics was also included. This instrument was developed for this study by the author to gather demographics from the subjects and is not copyrighted.

### **Debriefing**

Participants at the end of the survey are given the option of contacting the researcher if they would like a brief summary of the research results, have any questions or requests for referrals. Those wishing to know the results of the survey were in no way linked to their e-mail. Those wishing to know the results of the research were to receive an email copy of the final report. All results were to be grouped together; therefore individual results were not available. See also attachment for specific language in debriefing form.

### **Participant Appropriateness**

The measures that have been chosen for the participants of this study were appropriate given the non-experimental nature of self-report measures and that participants would be adults above the age of 18 selected from a normal population. An adult population was required because by this developmental stage their attachment and boundary styles are relatively stable. An even distribution of males and females was wanted in order to control for a documented tendency toward thinness of boundaries in women. All subjects have at least completed

their high school education, and speak English as their primary language to ensure their understanding and conceptualization of the surveys.

### **Procedures**

Participants were recruited through a variety of convenience sampling including: internet networking (Google + & Facebook), graduate school and work referrals (i.e. friends/acquaintances of friends/work associates/school associates). The study was a self-administered questionnaire conducted SurveyMonkey - a survey website and the researcher recruited participants by posting on an internet networking site for those to take and/or the link will e-mailed directly to participants. An unbiased selection of an even distribution was to be ensured by an stratified random sample. For example males and females were to be put into a separate subject pool and then in each participant within both pools was to be assigned randomly a number between 1 and 50). The first 42 were to be selected for the study, ensuring an unbiased and random selection of both males and females.

Before commencing the study, participants reviewed the informed consent form and decided whether to proceed based on its description of the study (See informed consent in "Attachments"). If they did not agree to the informed consent (e.g. select Disagree instead of Agree) then participants were not be able to proceed to the surveys.

Participants were required to fill out a demographic questionnaire, the ECR-R, and the HBQ (self-report questionnaires) and given an option for debriefing via the website Survey Monkey. Permission to use the Hartmann Boundary Questionnaire was received by e-mail directly from Ernest Hartmann the creator of the HBQ (See Appendix D). The Experiences in Close Relationships-Revised was published in a scientific journal and the authors gave blanket permission for non-commercial use of their scales (See Appendix D). The informed consent, demographic, and debriefing are all created by the author. There have been no modifications to the ECR-R or to the HBQ. For the both ECR-R and the HBQ, participants were instructed to answer the questions according to how they *generally* have been in their adult lives, not just in a specific moments or contexts. With regards to the ECR-R, participants were instructed to answer how they *generally* experience relationships, not just in what is happening in a current relationship. Debriefing: subjects who wished to receive a brief summary of the research results, or had any questions or requests for referrals, could contact me independent of the survey. Thus their survey results were in no way linked to their e-mail. Those wishing to know the results of the research were to receive an email copy of the final report. All results were grouped together; therefore individual results were not available.

In addition participants were told that if they completed the study they could enter a drawing for a \$50 Amazon.com gift certificate. To ensure

confidentiality, respondents were given a link at the end of the survey where they could sign up for the drawing. This link was set up on a separate website not in any way associated with the survey. Because the survey results and the drawing were on separate systems there was no way to correlate them. Participants were given (at the completion of the survey) a private link to a page where they could enter their e-mail address to be entered in the drawing. The website was only accessible to participants that completed the survey. The researcher had access to the list of e-mails for purposes of the drawing but because the e-mails were entered separately from the survey they was no way to link to the participant's responses. Once all data was all collected, one e-mail was selected at random and the gift certificate was sent via e-mail, no other information was required from amazon.com to send the gift certificate. At completion of the drawing, the website shut down and all e-mails were deleted. The e-mails are no longer accessible to the researcher.

The scored raw data from the demographic questionnaire, the ECR-R, and the HBQ data was to be directly exported to SPSS or Excel. The raw data was statistically analyzed using the relevant statistics by the researcher for each hypothesis tested in order to determine if the hypotheses were supported or not. There have been no previous pilot studies comparing these two instruments to this date.

**Data Processing Techniques**

The data used for this study was prepared by directly exporting it from Survey Monkey to Excel. The computer program to analyze data was Excel. Measures of central tendency and dispersion were computed for the appropriate variables. The hypothesis, acceptable at the .05 level of significance, was to be tested on my variables of interest using Spearman's rank correlation coefficient, and the Chi-square test.

**Bias**

My subject's ethnicity and social class was very similar to my own given where I am sampling i.e. my own social connections and referrals. This similarity may cause me to over attribute their qualities to perhaps qualities of my own. In order to ameliorate this potential bias and to better understand my subjects, I will need to pay close attention to the differences within my subjects.

There will be differences in educational level between myself and my subjects, for example no college vs. college vs. graduate school, and these difference may lead me to have certain blind spots in my expectations of them mental ability. One way I addressed that bias is requiring all subjects to be above the age of 18 and have a high school education in order to ensure their comprehension level matches that of my study.

My biases as far as mating and courtship probably favors the more traditional model (casual dating vs. traditional), therefore while this won't affect my data gathering (no direct contact with participants); I need to be aware of my data interpretation. For example, I would need to pay attention to possible double standards as to casual sex practices for both men and women. Secondly, I would need to focus my awareness on dating practices/ love relationships of non-traditional groups e.g. gay, lesbian, bisexual, transgender, poly-amorous, and their differences and commonalities in experiencing attachment and boundaries. My bias here might lean more towards invisibility/overgeneralization as I would assume all relationships to be basically similar in regards to attachment needs and boundaries. In data gathering, I attempted to minimize invisibility bias through using inclusive language and categories both in my demographic questionnaire and choice of measure e.g. the ECR-R using the partner instead of boyfriend or girlfriend. Gathering this information will also help minimize overgeneralization as it will provide possible variants in data. With regards to style of courtship this may be influenced by social class and work experience so paying attention to minimizing these effects would be important. It will be important to keep aware during interpretation of data of the tendency of women to score thinner of boundaries and be careful not to over interpret/over pathologize such scores.

**Methodological Assumptions and Limitations**

The use of convenience sampling most likely will impact the generalizability of the results. As the subject sample was composed of a relatively homogenous group of mostly college educated Caucasian adults. This lack of diversity brings into question the applicability of this current study across groups. Another possible limitation to consider are gender differences in boundaries and attachment style and the possible impact this might have on the validity of the study. Therefore for the purposes of this study let us assume that gender differences are as Chodorow (1989) asserted a result of interpersonal socialization.

Also, in analyzing ordinal data there are limitations because when comparing two constructs our means of analyzing statistical fit is inherently less powerful (e.g. Chi-Square vs. ANOVA). Lastly, there are a number of problems in using self-report measures, for example respondents might exaggerate or be too embarrassed to reveal too much based on social desirability or they may be they may be influenced depending on how they feel at the time. A major assumption is that individuals in general want to be able to and care about influencing their own emotional, relational, and interpersonal systems and interactions. An example, of the opposite assumption would be most individuals are interested in changing only other people not themselves.

**Ethical Assurances**

This study has participants answer self-report questionnaires which does not present any inherent danger as questionnaires does not manipulate or introduce any new variables to a participant's life. In addition, the content (relationship quality, & types of boundaries) of the questionnaire does not reveal itself as having any particular psychological affects as these questionnaires have been administered independently numerous times with no ill effects. In order to protect confidentiality, participants were assigned numbers in ascending order of time taken instead of asking names. In addition, all other identifying information was removed when results were presented. Consent was obtained by participants, who were capable, liberated adults, before the commencement of the questionnaires (See Appendix A for Informed Consent Form). In addition, participants were given the researcher's contact information should they have any questions related to the study, need referrals, or experienced any adverse reaction to the taking of the questionnaires.

The inducement to participate (drawing for \$50 amazon gift certificate) should not have reduced their ability to freely choose to participate. In the case of the drawing, participants' survey results and their entry for the drawing was handled separately thus there was no way to correlate them. Only participants who completed the survey were made available a private link where they could enter their e-mail address to be entered in the drawing. The website was only



accessible to participants that completed the survey. The researcher had access to the list of e-mails for purposes of the drawing but because the e-mails were entered separately from the survey they was no way to link to the participant's responses. No names were required and in the case that a participant wanted more information about the results or the study, had questions, or wanted referrals they could contact the researcher by email. These e-mails were only accessible to the researcher and were in no way associated with the participant's information since the participants would be contacting the researched apart from the survey. For confidentiality purposes, participants who wanted a summary of the results would receive them but individual results would not be available. The gift certificate was sent to winner's e-mail, no other information is required from amazon.com. In the case of the drawing, participants' survey results and their entry for the drawing was handled separately thus there will be no way to correlate them. Only participants who completed the survey were made available a private link where they could enter their e-mail address to be entered in the drawing. The website was only accessible to participants that had completed the survey. The researcher had access to the list of e-mails for purposes of the drawing but because the e-mails were entered separately from the survey they were in no way linked to the participant's responses. The gift certificate was sent to winner's e-mail, no other information was required from amazon.com. At completion of the drawing, the

website was shut down and all e-mails were deleted. The e-mails are no longer accessible to the researcher.

Society will benefit from this study by having a better way of conceptualizing and treating those with insecure attachment including in individual, couples, and family therapy. The benefits of being able to understand and improve attachment insecurity are wide ranging having indications for both child and adult life and relational satisfaction. Individual benefits include: awareness, knowledge, and understanding of own attachment style and boundary thickness. There is a potential for using this information to directly benefit one's self in individual, couples, or family therapy.

In addition, as previously iterated there are no perceived risks to conducting this study as these measures have all been used independently with any deleterious effects. The benefits of being able to understand and improve attachment insecurity are wide ranging having indications for both child and adult life and relational satisfaction. In addition, as previously iterated there are no perceived risks to conducting this study as these measures have all been used independently with any deleterious effects. The research method that I used is a method with the smallest risk because it is survey and non-experimental e.g. does not change or manipulate variables of a participants life.

### Chapter 3: Results

#### Descriptive Data

The measures of central tendency for the ECR-R tracked relatively closely to norms those found in the larger population (Fraley, 2012). There were no significant differences found for an Avoidance the norm being  $M=2.92$  and my sample an  $M=2.64$ . While there were no significant differences found for Anxiety the norm being  $M=3.56$  and my sample  $M=2.88$  it was the largest difference found being within a half standard deviation of each other.

<i>Metric</i>	<i>Anxiety Score</i>	<i>Avoidance Score</i>
Median	2.556	2.389
Mean	2.883	2.641
Mode	2.056	2.333

**Table 1: ECR-R Measures of Central Tendency**

The dispersion levels for ECR-R tracked very similarly to that found in the larger population norms (Fraley, 2012). There were no significant differences found in the standard deviation for Avoidance Norm  $SD= 1.19$  and my sample  $SD= 1.12$ . The Anxiety standard deviation Norm was  $SD=1.12$  and my sample was  $SD=1.31$ .

<i>Metric</i>	<i>Anxiety Score</i>	<i>Avoidance Score</i>
Standard Deviation	1.312	1.123
Variance	1.721	1.260
Interquartile Range	1.778	1.500

**Table 2: ECR-R Dispersion**

The measures of central tendency for the HBQ tracked relatively closely to those found in the larger population norms (Hartmann, 1991). There were no significant differences found for the norm of the Sumbound Mean the HBQ  $M=273$  and my sample  $M=260.764$  as the difference was less than 1 standard deviation to the mean.

<i>HBQ Category</i>	<i>Median</i>	<i>Mean</i>	<i>Mode</i>
1	15	15.53	22
2	23	23.40	23
3	28	26.89	29
4	11	11.00	14

<i>HBQ Category</i>	<i>Median</i>	<i>Mean</i>	<i>Mode</i>
5	24	24.03	28
6	11	11.09	10
7	21	20.17	22
8	36	35.89	34
9	18	17.94	16
10	24	23.87	24
11	33	33.24	36
12	18	17.63	18
Total	268	260.67	278

**Table 3: HBQ Measures of Central Tendency**

The dispersion levels for HBQ were also similar to that found in the larger population (Hartmann, 1991). The standard deviation norm being  $SD=52$  and my samples  $SD=36.0331$ . There were no significant differences found for this difference as it tracked the dispersion of data relatively similarly.

<i>HBQ Category</i>	<i>Standard Deviation</i>	<i>Variance</i>	<i>Interquartile Range</i>
1	7.890	62.25	13
2	10.945	119.79	14
3	7.062	49.87	11
4	3.593	12.91	6
5	4.509	20.33	6
6	3.356	11.26	5
7	5.377	28.91	7
8	6.372	40.60	7
9	3.734	13.94	4
10	3.989	15.91	6
11	5.059	25.59	7

<i>HBQ Category</i>	<i>Standard Deviation</i>	<i>Variance</i>	<i>Interquartile Range</i>
12	2.925	8.55	3
Total	36.013	1296.97	52

**Table 4: HBQ Dispersion**

## **Demographic Variables**

### **Sample Selection**

My study had 108 participants and 89 completed all the relevant items in both the ECR-R and HBQ. Participants were obtained through convenience e.g. social networks (Facebook) websites, school referrals, and work referrals. The study was shared on Facebook and forwarded to an e-mail list of personal, work, and school contacts with instructions to forward it along to their contacts. In the introduction to the study potential participants were introduced to the nature of the study and purpose of the dissertation study and told they that they had the chance of winning a drawing for a \$50 amazon gift certificate upon completing the study (See ethical assurance s). All the participants met basic criteria for selection e.g. over the age of 18, high schooled educated, and English speaking.

### Sample Characteristics

Participants ranged from 19 years old to 68 years old with an average mean age of 41.75. The sample was 71.91% female and 28.09% male. The avg. participant was very educated the highest percentage (38.20%) completing graduates school and the second highest percentage (28.09%) completing undergraduate education. The ethnicity demographics consisted primarily of White/Caucasian (88.64%). 82.02% of the participants identified as being in a relationship with a mean average of 13.78 years for their longest romantic relationship. Of the participants that answered most of the respondents were married (58.43%). Only 13.48% of respondents identified with being single 20.22% of participants were children of divorced parents. Occupation consisted primarily of Psychologist, Teacher, and Software Engineer.

<i>Metric</i>	<i>Years</i>
Mean	41.75
Median	36
Mode	30

**Table 5: Age Distribution**



<i>Gender</i>	<i>Respondents</i>	<i>Percentage</i>
Male	64	71.91%
Female	25	28.09%

**Table 6: Gender Distribution**

<i>Education Level</i>	<i>Percentage</i>
9th Grade	0.00%
10th Grade	0.00%
11th Grade	0.00%
Completed HS	4.49%
1yr College	3.37%
2yr College	4.49%
3yr College	5.62%
Completed College	28.09%

<i>Education Level</i>	<i>Percentage</i>
Some Graduate	15.73%
Completed Graduate	38.20%

**Table 7: Education Distribution**

<i>Race</i>	<i>Percentage</i>
American Indian	0.00%
Asian/Pacific Islander	3.41%
Black – Non Hispanic	1.14%
Hispanic/Latino	2.27%
White – Non Hispanic	88.64%
Multiracial	4.55%

**Table 8: Ethnic Distribution**

## **Analysis**

### **Power analysis**

The power analysis for a bivariate correlation based on an alpha of .05, a beta of .80, and an effect size of  $r = .3$  would mean that this study would need an  $n$  of at least 84. This study had 108 total participants; however, only 89 completed both measures in totality. This was enough to meet my effect size goal of  $r$  of .3.

### **Main analysis**

Research question: Does attachment style relate to boundary thickness?

*Hypothesis 1:* Anxious attachment is related to thinner boundaries. Using a Spearman's rank correlation coefficient the hypothesis was not supported with a weak overall  $r$  value of .264. If these were perfectly correlated we would expect an  $r$  value of -1.

*Hypothesis 2:* Avoidant attachment is related to thicker boundaries. Using a Spearman's rank correlation coefficient the hypothesis was not supported with a very weak overall  $r$  value of .077. If these were perfectly correlated we would expect an  $r$  value of 1.

*Hypothesis 3:* Those with secure attachment will have neither very thick nor very thin boundaries but a balance of the two.

<i>HBQ Category</i>	<i>ECR-R Anxiety vs. HBQ</i>	<i>ECR-R Avoidance vs. HBQ</i>
1	0.256	0.109
2	0.398	0.170
3	0.280	0.110
4	0.305	0.310
5	0.331	-0.088
6	0.349	0.164
7	0.005	0.231
8	-0.028	-0.029
9	0.014	-0.115
10	-0.227	-0.141
11	-0.194	-0.259

<i>HBQ Category</i>	<i>ECR-R Anxiety vs. HBQ</i>	<i>ECR-R Avoidance vs. HBQ</i>
12	0.079	0.003
Total	0.264	0.077

**Table 9: Spearman's Rank Correlation for ECR-R vs. HBQ Scores**

### **ECR-R correlation with HBQ subscales**

While there was no significant correlation found between Avoidance and the Sumbound HBQ or Anxiety and the Sumbound HBQ in analyzing the correlation between the ECR-R and the subscales of the HBQ there was one moderate correlation (r of .4) found between Anxiety of the ECR-R and subscale 2 Unusual experiences on the HBQ. Otherwise, the rest of the subscales had weak to very weak correlations. Statistically it did not make sense to run the 3<sup>rd</sup> hypothesis (Those with secure attachment will have neither very thick nor very thin boundaries but a balance of the two) as the HBQ is continuous data and running this analysis would have required us to set up arbitrary cut offs to define “thick” and “thin” boundaries to run a Chi squared test. However, given the lack of strong correlation between the continuous data setting up arbitrary categories to correlate these would not give a useful result.

**Summary**

In summary, my population's scores did not differ significantly from the norms established for the ECR-R and HBQ. They did however appear to be on the whole less anxious (.6 SD) while still within the 1 standard deviation of the mean. However, my population's demographics had a number of key differences they were older than the norm (~42), mostly female (~72%), mostly college educated or above (~66%), and primarily white (~89%). My hypothesis that attachment style and boundary thickness failed to gain support with attachment anxiety and boundary thinness being only weakly correlated ( $r=.264$ ) and avoidant attachment and boundary thickness being very weakly correlated ( $r$  of  $.077$ ). However, I did find a moderate correlation ( $r=.4$ ) between attachment anxiety and one of the HBQ's subscales –Unusual Experiences upon further examination.

**Chapter 4: Discussion and Conclusions**

Attachment style was not correlated with boundary thickness. Specifically, anxious attachment was not related to thinner boundaries having a weak correlation. This result ran counter to Zborowski, Hartmann, Newsom, & Banar, 2003 study which found that boundary thinness was related to insecure attachment. However of note Zborowski et al. (2003) used different measures in their investigation e.g. Bell's Object Relations and Reality Testing Inventory, Interpersonal Dependency Inventory, Spielberg State-Trait Inventory.

Likewise, avoidant attachment was not related to thicker boundaries having a very weak correlation. This present investigation is the only study in which avoidant attachment and boundary thickness have been studied together.

The lack of support for the relationship between boundaries and attachment could be interpreted a number of ways. First, one key difference between the Zborowski et al. (2003) study and mine (besides using different measures) is that my population on the whole was much older. This difference is significant since on the Boundary questionnaire older persons tend to score thicker. This difference in population could have accounted for this result.

Another possible interpretation is that these results suggest that the ECR-R and the HBQ are not measuring similar things theoretically. One possible interpretation of these findings is that attachment theoretically is studying the concept of trust e.g. responsiveness and availability in relation to a significant other. One's attachment style is a behavior/technique/strategy to gain closeness to that other. As boundaries are more theoretically described as separation/demarcation within an individual's mind, we also might speculate that the concept of boundaries is different from attachment. For example, attachment examines the relational reaction from one individual to the other and boundaries are measuring those individual internal structures. Attachment and boundaries may function together to form a cohesive whole individual and their working

parts in a relationship, however, these concepts are separate organisms in themselves.

While the Hartmann Boundary Questionnaire (HBQ) Sumbound total did not have any strong correlations with attachment anxiety or avoidance, when the HBQ's subscales were correlated with the attachment anxiety or avoidance a moderate correlation was found between subscale 2 "Unusual experiences" and attachment anxiety. An example of some items that comprise the Unusual experiences subscale are: I have had unusual reactions to alcohol; At times I have felt as if I were coming apart; I have had the experience of not knowing whether I was imagining something or it was actually happening; I feel unsure of who I am at times. Attachment anxiety is concerned with a strong desire for closeness, intense worries about partner availability, one's own value to the partner, and the use of hyper-activating strategies for dealing with insecurity. Given that a number of the items on the unusual experience scale of the HBQ describe a loss of sense of self and attachment anxiety concerns one's feeling of value to their partner, we might speculate that the correlation between the two may be touching on sense of self/ identity. For example a question that could sum of this correlation might be "Who am I" and "Who am I in relationship to my important others?"

Another data point of interest is that the attachment of participants in this sample set was shifted to be slightly less anxious than population norms. This is



interesting to note as my population is more secure on the whole. Whether this difference can be accounted for through age, or demographics or some other reason is unknown. However, I would speculate as my population runs older most participants are much more settled and established in both careers and relationships than a majority of the population. For example a majority of my sample set were working professionals.

### **Limitations**

At the commencement of the study the goal was to obtain an even distribution of males and females as with the HBQ females tend to have thinner boundaries. However, as I was using convenience sampling e.g. recruiting through Facebook and email, I noticed that a most of my participants were females. However, this skew towards thinner boundaries in my population is partially accounted for given that my population on the whole tends to be older and older individuals tend to have thicker boundaries. Another difference in this sample from the norm is that on the whole they tended to be more educated with the largest number of participants (38%) completing graduate school.

### **Recommendations Future Research**

One avenue of future research that would be interesting to explore would be to run a study looking at just the unusual experiences subscale on the HBQs correlation with attachment anxiety with a larger population subset. Of particular

interest in studying this would be to see numbers in greater significance so as to be able to break down items by responses on the HBQ. This item response analysis would allow us to see what items have the highest correlation so as to capture the essence of the correlation so as to qualitatively see the some qualitative reasons for my current correlation.

### **Implications**

These findings improve our understanding on attachment and boundaries by expanding our theoretical understanding of both. For example, attachment is our strategy to restore closeness to a significant other and this strategy is unrelated to how the boundaries of the mind are organized. In addition, we might speculate theoretically that the correlation we found between unusual experiences on the HBQ and attachment anxiety could have interesting implications for better understanding how “self” is affected in relation to “other” in attachment. For example, does feeling like others aren’t dependable and you are unlovable (attachment anxiety) affect one’s sense of self security and organization i.e. I know who I am (Unusual Experience boundaries)?

One interesting implication on research methodology is of how level of education might affect either attachment or boundaries.

While this present study did not indicate that attachment style and boundaries as a whole as were related, this subject still merits future research. An

interesting area of inquiry might be to look at our current results in comparison to a different method of measurement e.g. using an interview based measure like the AAI instead of a self-report measure to see if it yields any more qualitative data concerning the correlation we found between unusual experience subscale of the HBQ and attachment anxiety and the lack of correlation between attachment and boundaries as a whole.

### **Clinical Implications**

These findings are particularly important for helping clinicians decide what treatment modality to use for anxiously attached clients given it's correlation with HBQ's Unusual Experiences subscale. The HBQ's Unusual Experiences subscale has a number of items that indicate dissociation/disorganized-unclear boundaries e.g. difficulty determining the real from imagined, coming apart, and being unsure of who they are. Taking this correlation into account clinicians can gear their treatment approach toward grounding methods; for example using relaxation such as mental imagery. In addition, clinicians should keep an eye towards clients' projections and check in with the client regularly especially in regards to any relational or familial material as this particular client has splitting tendencies. Alternatively, these findings on the unusual experiences subscale on

the HBQ and attachment anxiety might also help clinicians understand the loss of sense of identity part in response to a confirming or disconfirming relationships.

Another clinical application of my present results indicate the importance of warning anxiously attached clients against using chemical substances as they are more likely to experience unusual reactions. In addition, if they have already experienced unusual reactions this might help clients better make sense of and explain a potentially frightening experiencing.

Taking the lack of significant correlation between attachment style and boundaries overall at face value indicates to clinicians that the internal working model of attachment is very complex and cannot be explained by boundaries interpersonal or otherwise. In addition, it warns clinicians against assuming that by modifying current relational patterns through boundary setting that you can possibly change an individual's internal working model of attachment. Operationally, in couple's therapy this result might remind clinicians to work within their client's attachment style. For example, clinicians might help their client(s) recognize their "attachment" reactions (set of automatic behavior to gain proximity or responsiveness from their partner) and also recognize each individuals triggering situation (interactions in which they feel disconnected) instead of expecting clients to override their instinctual bid for attachment. Treatment that might be contraindicated might include treatment approaches that

only address the content level of the relationship like role play with boundary setting, scripts, and/or behavioral or solutions focused approaches. In addition, it would remind clinicians to help their clients work on their initial primary attachment needs and help them focus on working on relaxation methods to self-regulate in order to calm their reactivity. This would help the client slow down or halt their automatic hyper-activating strategy thereby enabling them to come up with better ways to get their needs met in more productive ways from their significant others.

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### **Appendix A: Informed Consent**

Project Title: The Relationships between Attachment Style and Boundary

Thickness

Project Investigator: Dore Lavering, M.A

Dissertation Chair: Juliet Rohde-Brown, Ph.D.

Purpose:

The purpose of this study is to investigate attachment style (i.e. the individual differences in how a person forms connections with a significant other given previous expectations of availability and responsiveness from primary caregivers) relates to the expression of boundaries both internal and interpersonal (i.e. boundaries are the separations between the person and their external environment, as well as among the person's own internal mental territories i.e. id(want), ego(mediator), superego(should). Boundaries can be very rigid e.g. an individual having a strong separation between others and thoughts and feeling, or very

diffuse/connected with whereby the individual tends to merge in relationships and have very little separation between their thoughts and feelings).

#### Participation:

I understand that this study is of a research nature. It may offer no direct benefit to me. Participation in this study is voluntary. I may refuse to enter it or may withdraw at any time without creating any harmful consequences to myself. I understand also that the investigator may drop me at any time from the study.

#### Research Procedures:

As a participant in the study, I will be asked to take part in the following procedures:

- Fill out a demographic questionnaire.
- Take a self-report measure on attachment –The Experiences In Close Relationship Inventory-Revised by Fraley, Waller, and Brennan (2000).
- Take a self-report measure on boundaries- The Hartmann Boundary Questionnaire by Ernest Hartmann (1991).
- The questionnaires in totality will take an estimated average of 35 minutes to fill out.

**Risks:**

There are no foreseeable risks for participating in this research.

**Benefits:**

The possible benefits of the procedure might be:

Direct benefit to me: Awareness, knowledge, and understanding of one's own attachment style (see above for definition) and boundaries (see above for definition). Potential for using this information to directly benefit oneself in therapy –individual couples, or family.

Benefits to others: Potential for helping other individuals and couples modify their attachment style (e.g. the way in which they seek connection) to function more effectively in romantic relationships. Potential for teaching boundary skills (e.g. being more assertive by setting limits or being more open and less rigid about personal rules) aimed at improving individuals attachment relationships (i.e. bond).

### Confidentiality:

You have a right to privacy, and all information identifying you will remain anonymous and confidential. Your answers to all questionnaires will be coded with numbers and no names will be required in association of this research. No identifying information will appear on any material. Any information obtained in connection with this research that can be identified with you will remain confidential and will not be discussed without your permission or as required by law. Any personal identifying information that you provide (for example, an e-mail address for the drawing or debriefing) is in no way linked to that of your survey responses will only be accessed by the researcher for these purposes. All e-mails will be destroyed after the study is complete. The results of this study may be published in scientific journals or be presented at psychological meetings as long as you are not identified and cannot reasonably be identified from it. However, it is possible that under certain circumstances, data could be subpoenaed by court order.

### Contact

Information about the study can be discussed with the researcher, Dore Lavering, M.A.. If I have further questions, I can call her at XXX-XXX-XXXX or email her

at xxxxxxxxxxxx@gmail.com. Questions can also be directed to Juliet Rohde-Brown, Ph.D. (805) 962-8179 [xxxxxxx@antioch.edu](mailto:xxxxxxx@antioch.edu).

Though the purpose of this study is primarily to fulfill my requirement to complete a formal research project as a dissertation at Antioch University, I also intend to include the data and results of the study in future scholarly publications and presentations. My confidentiality agreement, as articulated above, will be effective in all cases of data sharing.

My agreement below indicates that I have read the above information and acknowledge both the benefits, risks, and understand and agree to the rights and risks to confidentiality. I agree to participate in the study until I decide otherwise. By agreeing to participate in this study I am not giving up any of my legal rights. If you wish to participate click the "Next" below. If you do not wish to participate click "Exit this Survey" at the upper right corner of your web browser.

### **Appendix B: Debriefing Form**

#### Debriefing Statement:

Thank you for your participation in this research on the relationship between attachment style and boundaries.

#### Purpose of Research:

The goal of this research is to investigate whether specific attachment styles (Secure, or Insecure: Anxious-Ambivalent or Anxious-Avoidant) in any way relate to specific boundary types (Thick or Thin). In finding a link between attachment and boundaries we might better understand the nature of attachments internal working model. For example, finding this connection might indicate that boundaries are observable manifestations of an individual attachment style/internal working model. To clarify, below are the definitions for attachment styles and boundary types:

Secure attachment: Those who are classified as securely attached tend to trust in partners, expecting their partners to be available and responsive. Also they tend to find comfort in closeness and interdependence. Lastly they tend to have

constructive ways of coping with threats and stressors (Fraley & Waller, 1998).

Anxious-ambivalent attachment: is characterized by a person's strong desire for closeness and protection, intense worries about partner availability and one's own value to the partner, and the use of hyper-activating strategies (i.e. repetitive efforts to feel close to, or reunite with, the attachment figure) for dealing with insecurity and distress (Fraley & Waller, 1998).

Anxious- avoidant attachment: is characterized by a persons concerned with discomfort with closeness and dependence on relationship partners, preference for emotional distance and self-reliance, and the use of deactivating strategies (e.g.) avoidance of the attachment figure and emotional detachment) to deal with insecurity and distress (Fraley & Waller, 1998).

Thick Boundary: Those with thick boundaries are characterized by a separateness and rigidity in their thinking and between relational states (e.g. relationship contexts) both personal and professional.

Thin Boundary: Those with very thin boundaries are characterized by over connectedness e.g. a tendency to fuse thoughts and merge oneself in relationships.

Hypothesis:

Based on previous research (Zborowski, Hartmann, Newsom, & Banar, 2003), which found boundary thinness was related to anxious-ambivalent attachment, it is hypothesized that the boundary for those with an anxious-ambivalent attachment (Brennan, Clark, & Shaver, 1998) would be thinner (Hartmann, 1976, 1984, 1989, 1991) than that of a securely attached individual. In addition, I would also expect those with an anxious-avoidant attachment style will have thicker boundaries than those who are securely attached.

#### Summary of Procedures:

During this research, you were asked to complete fill out a demographic questionnaire, the ECR-R, and the HBQ (self-report questionnaires) in total taking on average 30 minutes. The aim was to see if attachment style (measured by the ECR-R) is in any way related/correlated to the boundary thickness (measure by the HBQ). There was no deception or information withheld from participants in this study.

#### Information on Final Results:

Final results will be available from the investigator, Dore Lavinger, by June 2013. You may contact me at ([doredissertation@gmail.com](mailto:doredissertation@gmail.com)) to receive an email copy of



the final report. All results will be grouped together; therefore individual results are not available. Your participation, including your answers, will remain absolutely confidential, even if the report is published.

Contact Information:

If you have questions, please ask. You may contact me at (XXX-XXX-XXXX or doredissertation@gmail.com). You may also contact the faculty member who supervises this research, (Juliet Rohde-Brown, Ph.D. at (805) 962-8179, xxxxxx@antioch.edu.

### Appendix C: Demographics

#### GENERAL INFORMATION

PLEASE FILL IN THE ANSWERS BELOW THAT BEST DESCRIBE YOU. IT IS IMPORTANT THAT ALL QUESTIONS ARE ANSWERED. PLEASE DO NOT PUT YOUR NAME ON ANY OF THE QUESTIONNAIRES. THANK YOU FOR YOUR TIME AND INTEREST IN THIS STUDY.

1. Your age \_\_\_\_\_
2. Gender \_\_\_M or \_\_\_F
3. Education (please circle the highest grade or level finished)

High School

College

Graduate School

9 10 11 12

1 2 3 4

1 2 3 4

4. What is your career, occupation, or major? \_\_\_\_\_
5. Current relationship status (please check one)

- 1. Single
- 2. Casual Dating
- 3. Exclusive Relationship
- 2. Not Married, but Cohabiting
- 3. Domestic Partnership
- 3. Married
- 4. Separated
- 5. Divorced
- 6. Widowed

6. Racial Background: (please check one)

- 1. American Indian/Alaskan Native
- 2. Asian/Pacific Islander
- 3. Black –non Hispanic
- 4. Hispanic/Latino
- 5. White – non-Hispanic

7. Are you involved in an exclusive romantic relationship (i.e., dating, engaged, or married)? Yes    No

8. If you are in a relationship, how long have you been involved with the person?

\_\_\_\_\_years

\_\_\_\_\_ months

9. Are your parents (or the caretakers that who raised you) divorced?
10. If your parents are divorced, how old were you when they separated or divorced?

### **Appendix D: Assessment Permissions**

Permission to use the Hartmann Boundary Questionnaire was received by e-mail directly from Ernest Hartmann the creator of the HBQ:

From: Ernest Hartmann <EHdream@aol.com> Fri, Sep 2, 2011 at 9:36 AM

To: Dore Lavinger <dorelavinger@gmail.com>

Dear Dore,

You have my permission to use the BQ. No further steps necessary.

I'll try to attach the BQ and score sheet. (These are also in both of my books on Boundaries) (Google me).

Best, Ernest H

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