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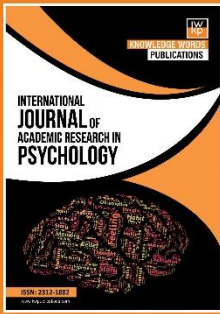
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Predictability of Mental Health Based on Attachment Styles and Coping Styles of Nurses

Fariborz. Sedighi Arfaee, Hamid. Rahimi, Abbas, Zare-ee, Zeinab. Ghodsi, Maryam, Nadi.

PhD, Associate Prof, Department of Psychology, Faculty Member, University of Kashan, Iran, PhD, Assistant Prof, Department of Education, Faculty Member, University of Kashan, Iran, PhD, Associate Prof, Department of English Language, Faculty Member, University of Kashan, Iran, MA, Field of Educational Psychology, Department of Education, University of Kashan, Iran, Email: fsa@mail.kashanu.ac.ir, dr.hamid.rahimi@kashanu.ac.ir, Zare-ee72@kashanu.ac.ir.

Abstract

Nowadays, the study of factors that may interfere with the psychological health of practicing nurses is considered very important in their performance. It is also well accepted that the physical and mental health of nurses, their strategies for coping with stress, and their psychological states directly influence the quality of their performance in patient care. These variables can be expected to show high levels of correlation based on the review of the literature. The main objective of this study was to check the predictability of mental health based on attachment style and coping in nursing. The design of the study was based on descriptive survey methods. The research population included all of the nurses in a Hospital known as Shahreza Amiralmomenin Hospital. Using Cochran formula, 122 nurses were sampled to take part in the study. Data collection instruments included three standard questionnaires known as a) mental health questionnaire (GHQ-28), b) attachment styles questionnaire (AAI) developed by Hazenand Shower (1987), and coping with stress questionnaire (CISS) developed by Endlerand Parker (1990). After collecting data using these instruments, quantitative analyses (ANOVA, t-test and Pearson correlation coefficient) were performed in order to test his predictability of mental health based on attachment style and coping. The results of the data analyses revealed that from among different styles of coping, problem-based and anxiety-based styles were significantly related to mental health and that mental health predictability based on this variable is multifaceted. The results of the data analyses also indicated that from among different styles of attachment; only secure attachment style showed significant positive correlation with mental health. The insecure avoiding style showed non-significant negative relationship with metal health. Also, the correlation coefficient between social anxiety symptoms and physical signs were significant.

Keywords: Mental Health, Attachment Style, Coping Style, Nurses, Hospital.

Introduction

Without human mental health, it is difficult to survive and if mental health is jeopardized, human relations and communications will be hampered which will in turn reduce the sense of security and solidarity required in a healthy society (Shamlou, 2003). Lack of mental health is evident from the imbalance of the relations between people living in groups (Cooley, 2001). For all persons, including employees, scholars, physicians, engineers, nurses, etc. there is a risk of psychological distress and lack of good mental health and the nurses addressed here are no exceptions.

World Health Organization (WHO) defines mental health as harmonious communication capabilities, as the ability to affect the environment and, the ability to resolve social and interpersonal conflicts that arouse from time to time. Nursing jobs are ones that can sometimes be highly stressful (Lee, 2002). Problems such as trouble with shifts, workload, relating to colleagues, and repercussions of frequent contacts with unhealthy people are among the issues that can relate to and show the importance of mental health especially in the context of nurses coping with kids. A review of research on adolescent attachment shows that attachment avoidance and its association with psychological well-being is inconsistent. Some scholars show no relationship between the two factors and others show a negative relationship between attachment avoidance and psychological health (e.g. Mikulincer & Orbach, 1995). Through the removal of multiple sources of stress and mental problems, nurses can resolve conflicts that are the results of job pressures. Because of the importance of nursing occupation and the great consequences that every problem can have in this context, mental health directly influences the quality of their performance in the care of patients. In stressful situations, nurses will have to adopt their actions accordingly and will not follow the routines that they have to in order to avoid risks to the life of the people who have been hospitalized.

Review of some related works on the concepts

Coping is defined as 'constantly changing cognitive and behavioral efforts to manage specific external and/or internal demands that are appraised as taxing or exceeding the resources of the person (Lazarus et al., 1984). Coping is adaptation. It involves effort to reduce the physical, emotional, and psychological burden linked to stressful events. The outcome of coping can sometimes be unacceptable. The variables that influence the assessment of stress can also consequently affect the strategies used to manage a stressor. This is then called a coping strategy. Endler and Parker (1990) offered a classification of coping styles into the three styles of task-oriented, emotion-oriented, and avoidance-oriented coping styles. People who use an emotion-oriented strategy act and think focusing on the emotion evoked by the stressor. Their activities are directed at altering the emotional responses. Those with a task-oriented strategy think they can adapt their resources and manage the situation. They often take direct action to change the situation itself. An avoidance-oriented coping style, on the other hand, is one in which people try to avoid a situation, deny it, lose hope, and ignore it. They do this consciously and/or unconsciously. They use indirect efforts to control stressors evading the situation or by doing unrelated activities to reduce stress. Some people really try to identify the best solution logically and may choose style that are not really included in or describe by the classification introduced by (Endler and Parker, 1990). We can probably say based on the literature that the classification of coping styles into just these three categories may have been the best at the time of their study; however, this seems to greatly simplify the complexities involved in modern life and in the different approaches that people can take to lead it.

Some scholars believe that attachment is one of the best concepts that can be used in the explanation of the coping strategies that people use in their stressful situations. Shalchi and Besharat (2007)

believe that attachments can greatly increase people's potentialities to cope with stressful situations. This can therefore have implications for nurses whose job can become very stressful from time to time. The concept of attachment in attachment theory emerged from Bowlby's observations of children separated from their mothers (Bowlby, 1969, 1982). Bowlby noticed that children separated from their mothers displayed a distinctive progression of behaviors after the separation. First, they vehemently protested their caregiver's absence by crying and screaming. Second, they became emotionally withdrawn and stopped looking for their caregiver. Finally, they began normal activities and acted in a more independent manner.

Ainsworth et al (1978) identified three groups of children based on their style of attachment: 1) anxious avoidant attachment, 2) secure attachment, and 3) anxious ambivalent attachment. Anxious and avoidant infants cry more and display less secure behaviors. They display hugging and kissing less than secure infants. Avoidant infants show less distress after their mother's departure. They are less likely to seek their mother upon her return than both the secure and the anxious infants. The anxious infants want to maintain proximity to their caregiver.

These styles of attachment have also been shown to be related to mental health and coping strategies. So, the interconnected nature of the construct requires further research to show who exactly these are related.

Methodology

Based on the literature addressing the predictability of mental health from attachment styles and coping styles, this study used a correlation design. The research population included all of the nurses in a Hospital known as Shahreza Amiralmomenin Hospital. Using Cochran formula, 122 nurses were sampled to take part in the study.

Data collection instruments included three standard questionnaires known as a) mental health questionnaire (GHQ-28), b) attachment styles questionnaire (AAI) developed by Hazen and Shower (1987), and coping with stressful situations questionnaire (CISS) developed by Endler and Parker (1990). The General Health Questionnaire (GHQ) by Goldberg (1972) includes 28 items. The purpose of this questionnaire is to test mental illness and health. Any response to the items was scored based on the common practices referred to in the guidelines. Inventory of attachment styles in adulthood (AAI) was developed by Hazen and Shover (1987): The questionnaire includes 15 questions that fall into three subscales including different types of attachment. This was a Likert scale (5-point) instrument as well. The other standard questionnaire was coping inventory for stressful situations. This scale consisted of 48 items falling into three main coping strategies categories (Endler and Parker, 1990).

After collecting data using these instruments, quantitative analyses (ANOVA, t-test and Pearson correlation coefficient) were performed in order to test the predict ability of mental health based on attachment style and coping.

Results

The first hypothesis about the relationship between attachment style and mental health was first tested and the results are summarized in Table 1. The relationship was a significant & positive one and the null hypothesis was accepted.

Table 1:

Correlation between the two variables of attachment style and mental health			
variables	N	Correlation	Sig
attachment style and mental health	114	0.206	0.02

Based on the results of regression analysis, from among the different styles of attachment only the secure style acted as a predictor of mental health. In this linear analysis, we were interested in the relationship pattern between values of variables to see if we could observe a straight line, which is the simplest and most commonly used form of analysis.

Table 2:

Regression coefficients for attachment styles					
variable	B	SEM	Beta	t	Sig
constant	25.43	7.00		3.62	0.000
Avoidant insecure style	1.75	1.63	0.10	1.07	0.28
secure style	3.90	1.72	0.23	0.23	0.02
insecure style	-1.23	1.84	-0.06	-0.66	0.50

In the next part of the analysis, the researchers looked at the possible relationships between coping styles and the mental health of the selected sample of nurses and the summary of the findings on this relationship are reported in Table 3.

Table 3:

Correlation between the two variables of coping style and mental health			
variables	N	Coefficient	Sig
Coping and health	114	0.04	0.34

This relationship was positive and no significant. In other words coping strategies were positively related to the mental health of the nurses in this study.

Table 4:

Regression coefficients for coping styles					
Variables	B	SEM	Beta	t	Sig
constant	31.98	8.85		3.61	0.000
Problem-focused	8.54	2.05	0.36	4.16	0.000
Anxiety-focused	-6.18	1.97	-0.27	-3.12	0.002
Avoidant	0.54	2.39	0.21	0.22	0.81

The regression analysis table showed that all but one of the styles of coping that we studied could predict the mental health of the participants. The summary of these results can be seen in Table 4.

Table 5:

Correlation between different attachment styles					
		Avoidant	insecure	secure	insecure
Avoidant insecure style	Correlation	1		-0.007	0.25**
	Sig			0.94	0.007
secure style	Correlation			1	0.35**
	Sig				0/000
insecure style	Correlation				1
	Sig				

Relationships that were found also existed between the different components of mental health. People who have more secured and firmer attachments have better coping strategies and better mental health. They are then expected to perform better in the social groups and in their personal lives.

Discussion

Results in the study pointed to a no significant positive correlation between attachment style and mental health. Mental health can partly be predicted from the attachment of the person as envisaged in the theory and as shown by the data that we presented here. These findings support the results reported by Hosseini (2013) who reported this in the past. We also observed a significant negative relationship between insecure attachment style and mental health which refers us to the importance and the interconnectedness of the concepts. These findings corroborate the ones on children with avoidant and in secure attachment reported by others (Bowlby, 1997; Collins, 2002). People within secure attachment are in a better position than those exposed to psychological problems such as anxiety and depression. Thus, differences in the cognitive, emotional and communicative abilities of people can be recognized with the analysis of their attachment styles. The results of the study point to and underline the needed attention to emotional hurdles associated within secure attachment in emotional and affective information processing (Goodwin, 2003; Bowlby, 2006). As stated in the literature, parent-child relationships act as the irreplaceable fabric that provides for the development of emotional self in childhood and adolescence and can be related to most of the problems children experience later in life (Bowlby, 1997). Individuals with a secure style of attachment can easily decode negative emotional states reflected on other people's faces and are more successful than people with an avoidant style in this regard. Our correct attachment can help us in successfully dealing with social and emotional instability (Simpson, 1990) has been approved. As it has been said over and over again in the past, people with more sympathetic and secure interpersonal relationships can better regulate their emotions and act in a more appropriate way in contrast secure individuals who experience more mental distress and act in less efficient ways. Fulham (2002) reported that the quality of attachment and adaptation capability among students was related to the safety of their interpersonal relationships, social problem-solving, stress management, physical health, and mental health. Based on the present research, attachments a psychological factor is inseparable from coping and mental health and this can be important to those who employ and supervise nurses.

Correlation between coping and mental health was positive and significant in our data. Regression showed that the coping styles of problem-focused and emotion-focused could help us predict mental health. These findings are similar to the results reported by Khani, 2008; Shukri, 2005; lustrous, 2004; Mollahzadeh, 2002).

Nurses who always face stressful situation and need to learn how to cope with them should be supported with their attachment and coping strategies; otherwise, it will be difficult for them to maintain an emotional balance to act properly in stressful situations of their occupation.

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