Exploring the Relationship between Insecure Attachment Styles and Social Anxiety in Undergraduate Students

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**ARTICLE DETAILS**

**ABSTRACT**

**Purpose:** This study aims to investigate the correlation between Avoidant and Anxious Attachment Styles and Social Anxiety, contributing to a deeper understanding of these interconnected factors among undergraduate students.

**Methodology:** Convenient Sampling was used to recruit 350 participants aged 18-26 from Forman Christian College (FCCU) in Lahore, Pakistan. The study administered the Revised Adult Attachment Scale (R-AAS) for close relationships and the Social Anxiety Scale (SAS). Data analysis was conducted using SPSS v.20, with Pearson’s Correlation Coefficient, Simple Linear Regression, and Independent Sample t-Test applied.

**Findings:** A statistically significant positive correlation was found between Anxious Attachment Style and Social Anxiety. Anxious Attachment Style was revealed to positively predict 19% variance in Social Anxiety with p value <.001. A significant gender difference was found among Social Anxiety and Anxious Attachment Style, but none among Avoidant Attachment Style.

**Implications:** Practical implications include tailored clinical interventions and support groups for holistic treatment. Recognizing attachment styles can improve intimate relationships. Gender differences in social anxiety suggest women may need gender-sensitive therapy to address social challenges in education and careers.

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**Introduction**

Social anxiety is defined as “a fear of one or more social situations in which the individual is exposed to possible scrutiny by others” (American Psychiatric Association, 2022). The social situations in this definition can refer to interacting with people, giving a public speech etc. Social
anxiety has become increasingly common, especially among young adults. Two studies conducted on undergraduate students showed a high number of them experiencing symptoms of social anxiety with 31.2% and 25.8% prevalence with one studying showing a 2.3 times higher chance for females to experience symptoms of social phobia (Desalegn et al., 2019; Hakami et al., 2018).

A study conducted by Jefferies and Ungar (2020) surveyed young adults in seven different countries to determine its prevalence. As a result, the study found the global prevalence to be considerably higher than it was previously assumed to be, with 36% of the participants meeting the criteria for having Social Anxiety Disorder (SAD). Moreover, approximately 18% of those participants did not regard themselves as experiencing social anxiety but met the threshold for SAD. Awareness and recognition of your adversities is the first step in overcoming them and without acknowledgment, no progress can be made.

When socially anxious individuals attempt to form a bond or a new friendship, they may still be scared about how they are going to be perceived by the other person as social anxiety is associated with greater difficulties even in an “already established romantic relationship” (Porter & Chambless, 2017). Research has shown that women with higher levels of social anxiety report less satisfaction with their romantic relationships as compared with the women who report lesser symptoms (Porter & Chambless, 2013).

Our ability to form bonds with others is informed by many factors, including our attachment style and the level of social anxiety we may experience. Parenting style affects both social anxiety and attachment style where attachment is defined as the ability to make emotional bonds with people (Bowlby, 1969).

Bowlby described attachment as “the relationship between an infant and his caregiver that lays the foundation for further healthy or unhealthy development” (Bowlby, 1969). He further explained that the infant's experience with his caregiver becomes built into his nervous system in such a way that it dictates his future relationships from “cradle to grave”. If the caregiver does not meet the child’s needs or proximity and is not consistently available, the child might develop an antisocial personality or an insecure attachment style.

Ainsworth (1978) identified three main attachment styles, “secure”, “avoidant” and “anxious”. She described an Anxiously attached child as exhibiting clingy behavior without feeling secure with the attachment figure or be comforted by them when distressed. Similarly, children who have an Avoidant attachment tend to be very independent and do not look for the caregiver when experiencing distress. Initially, attachment was seen only as relating to parent-child relationship, however, Hazan and Shaver (1987) asserted that the romantic relationships in one’s life are also evident of that first emotional bond developed in their infancy with their primary caregivers.

How a parent treats their child is also linked to the child’s likelihood of experiencing anxiety as Bruch and Heinberg (1994) found higher rates of Social Anxiety in children of parents who isolate their kids and avoid socializing with them. Parents are the first social connections the child makes. This lays the foundation for the child’s expectations and beliefs about future relationships. The parents who ignore and isolate their children end up teaching them to remain isolated.

Festa and Ginsburg (2011) deduced that greater levels of “parental anxiety, rejection, and over control” are correlated with higher levels of social anxiety. This can lead to children feeling helpless and anxious in social situations. Similarly, the study found that the higher the levels of “social support, acceptance, and validation” received from parents are, the lesser the social anxiety is. Children who already have an insecure attachment style and have experienced high levels of Inter-
Parental Conflict may be “at high risk for relationship problems” (Tolmacz et al., 2022). Parental conflict is also associated with symptoms of social anxiety in children where social anxiety refers to “fear of social situations caused by the excessive worry of being evaluated or scrutinized by others in public” (Adare et al., 2021). On the other hand, securely attached people can form friendships with much greater ease (Parade et al., 2009).

Individuals with social anxiety tend to have an insecure attachment style in their relationships as higher attachment anxiety and avoidance are said to be associated with higher social anxiety levels (Read et al., 2018; Cairns & Nielsen, 2009). This causes a hindrance for them in developing meaningful lifelong bonds. Their insecure attachment styles prevent them from having healthy relationships which in turn discourages these individuals from socializing as well.

The concept of attachment style is not widely known in Pakistan. With better knowledge about one’s attachment styles, we can work towards a secure attachment style, which is the key to healthy intimate relationships. We can understand our behavior in our close relationships without imparting blame to either individual. This can lead to even tighter knit bonds for all of us. When we are aware of how an attachment style can predict social anxiety, both issues can be dealt with simultaneously. By taking an approach that takes into account how an insecure attachment style informs social anxiety, treatment results can be more thorough using such a comprehensive strategy. Through realizing the role that our childhood plays in both social anxiety and how we present ourselves in relationships, we can break the patterns and be kinder to ourselves and others. This research is being conducted to understand the relationship between insecure attachment styles, i.e., Avoidant Attachment Style and Anxious Attachment Style, and Social Anxiety. The objective of the study is to determine whether a correlation exists among the variables and in what direction.

**Materials and Method**

The design of the research was Cross-sectional. Convenience sampling was used to contact the participants. The sample size consisted of 350 undergraduate students from FCCU (A Chartered University), Lahore ranging from 18 to 25 years. The target population for the study was students currently enrolled in an undergraduate degree. Forms filled by students younger than 18 or older than 26 years of age were discarded and not included in the study.

The Revised Adult Attachment Scale (R-AAS) originally constructed in 1990 by Collins and Read and revised by Nancy Collins (1996), was used to measure adult attachment style. It contains 18 times and two subscales with 6 items assessing Anxious Attachment style anxiety and 12 items for Avoidant Attachment style. The close relationships version of the revised edition of the scale was employed for this study. The authors reported Cronbach’s alpha coefficients of .81 for Close, .78 for Depend, and .85 for Anxiety (Collins, 1996).

The “Social Anxiety Scale”, constructed by Ejaz et al. in 2020, was employed to measure social anxiety in the study. It is culturally relevant as the authors are of Pakistani origin and they developed the scale using Pakistani undergraduate students. The scale consists of 22 items with 3 subscales, namely performance anxiety, interaction anxiety and evaluation anxiety containing 8 items, 10 items and 4 items respectively. SAS and its subscales have high reliability coefficients ranging between 0.78–0.90 and ensure a high internal consistency.

The study was conducted through in-person survey method. The questionnaire included the instruments for the study and required the participants to inform about their age and gender. The average time taken by the respondents was approximately 8-10 minutes.
Ethical Considerations
All APA ethical guidelines were followed. Approval from the Institutional Review Board was taken, informed consent form was provided to the subjects, which contained a description about the research and the contact of the researcher and supervisor. No form of deception was used in the study; therefore, no debriefing was involved. No physical or psychological harm came to the participants.

Results
The mean age of the respondents was found to be 21.5 years (SD = 1.67), as shown in Table 1. The gender of the participants was almost equally divided with 47.1% males and 51.4% females. The remaining 1.4% was attributed to “other”. The division was kept equal in order to efficiently calculate the t-Test measuring gender differences.

<table>
<thead>
<tr>
<th>Variables</th>
<th>f</th>
<th>(%)</th>
<th>M</th>
<th>SD</th>
</tr>
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<td>-</td>
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<tr>
<td>Gender</td>
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<td></td>
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<td></td>
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<td>47.1</td>
<td>-</td>
<td>-</td>
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<tr>
<td>Female</td>
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<td>51.4</td>
<td>-</td>
<td>-</td>
</tr>
<tr>
<td>Other</td>
<td>5</td>
<td>1.4</td>
<td>-</td>
<td>-</td>
</tr>
</tbody>
</table>

Table 1 Demographic Characteristics of Participants (N=350)

Table 2 shows that Social Anxiety was found to be strongly positively correlated with Anxious Attachment Style (r = 0.44, p < 0.001). No significant correlation was found between Social Anxiety and Avoidant Attachment Style.

<table>
<thead>
<tr>
<th>Variables</th>
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<th>SD</th>
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<th>2</th>
<th>3</th>
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</thead>
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<td>1. Social Anxiety</td>
<td>46.8943</td>
<td>17.04411</td>
<td></td>
<td></td>
<td></td>
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<tr>
<td>2. Avoidant Attachment</td>
<td>36.0343</td>
<td>5.54696</td>
<td>-.011</td>
<td></td>
<td></td>
</tr>
<tr>
<td>3. Anxious Attachment</td>
<td>18.3057</td>
<td>5.13753</td>
<td>.435**</td>
<td>.403**</td>
<td></td>
</tr>
</tbody>
</table>

Table 2 A Pearson’s correlation table displaying the correlations between Social Anxiety, Avoidant attachment style and Avoidant attachment style (N=350)

Table 3 shows the impact of anxious attachment on social anxiety. The $R^2$ value of .19 revealed that the predictor variable explained 19% variance in the outcome variable with F(1,348) = 81.11, p<.001. The findings revealed that social anxiety positively predicted anxious attachment style ($\beta$ = .435, p< .001).

<table>
<thead>
<tr>
<th>Variable</th>
<th>B</th>
<th>SE</th>
<th>95% CI</th>
<th>$\beta$</th>
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<tbody>
<tr>
<td>1 (Constant)</td>
<td>22.440***</td>
<td>2.837</td>
<td>16.860</td>
<td>28.019</td>
</tr>
<tr>
<td>Anxious Attachment</td>
<td>1.336***</td>
<td>.148</td>
<td>1.044</td>
<td>1.628</td>
</tr>
</tbody>
</table>

Table 3 Results of Linear Regression Analysis with Social Anxiety (N=350)
A significant difference was found in Social Anxiety rates among males (M = 43.35, SD = 16.36) and females [M = 50.16, SD = 16.36; t(343) = 3.82, p = .000] as shown in Table 4. The effect size was small, with a Cohen’s d of 0.41 (<0.50). A significant difference was also found in rates of Anxious Attachment Style among males (M = 16.96, SD = 5.2) and females [M = 19.48, SD = 5.62; t(343) = 4.30, p = .000]. The effect size was small, with a Cohen’s d of 0.47 (<0.50).

However, no significant difference was found in the rates of Avoidant Attachment style among males and females with t(343) = 1.215, p > 05. The value of Cohen’s d was 0.131 (<0.20) which indicated a very small effect size.

| Table 4 An Independent Sample t-test table displaying gender difference in study variables (N=350) |
|---------------------------------|----------------|----------------|-------|-----|-----|-----|
|                                 | Males          | Females        |       |     |     |     |
|                                 | M   | SD  | M   | SD  | t   | df  | p    | Cohen’s d |
| Social Anxiety                  | 43.35 | 16.36 | 50.16 | 16.36 | 3.28 | 343 | .000 | .412     |
| Avoidant Attachment             | 35.72 | 5.292 | 36.39 | 4.99 | 1.22 | 343 | .225 | .131     |
| Anxious Attachment              | 16.96 | 5.202 | 19.48 | 5.62 | 4.31 | 343 | .000 | .465     |

Discussion
The aim of the study was to explore the relationship between insecure attachment styles and social anxiety and to determine whether a correlation exists between them. Furthermore, the research analyzed the presence of any gender differences among the variables being studied.

The results of the research were in line with the previous theoretical findings and the literature review as social anxiety was found to be significantly positively correlated with anxious attachment style. Previous researches investigating the relation between the variables at hand also found them to have a positive relationship (Kozan & Arslan, 2022; Read et al., 2018; Tamannaefifar & Sanatkarfar, 2017). Manning et al. (2017) used secondary data and conducted a study into the association of insecure attachment styles and social anxiety, and found them to have a positive correlation throughout 93% of their review. Notzon et al. (2015) observed the same result using Oxytocin as a mediator between insecure attachment style and social anxiety.

An unsteady first bond with our parents can lead to us having an insecure attachment style (Bowlby, 1969). Similarly, our parents’ actions and behaviors toward us can cause us to socially withdraw, which is a large part of social anxiety (Rubin et al., 2009). Ainsworth (1978) theorized that mothers who are more sensitive to the needs of their children, have more securely attached children while Mert (2022) found that insensitive and authoritarian parenting is also considered as significant predictors for symptoms of social anxiety.

Through the finding, we can infer that social anxiety and an anxious attachment style may reinforce one another over time. Anxiety associated with an anxious attachment style can make forming and maintaining social ties more difficult, which can increase social anxiety. In a similar manner, individuals’ fear and avoidance of social circumstances may prevent them from building secure and rewarding relationships, thereby continuing the anxious attachment style. Trying to understand
and acknowledge both issues through their association could lead us to overcoming them and healing more effectively.

Avoidant Attachment Style was not found to be positively correlated with Social Anxiety in undergraduate students. This lack of association suggests that the two variables are obviously not strongly related within the context of this study. Social anxiety is more closely related to anxious attachment style than avoidant attachment style. Individuals with avoidant attachment style tend to be more independent, distance themselves from others and avoid intimate relationships. They experience difficulties in maintaining and forming close relationships, but it might not be due to their anxiety. This might be the reason why the two variables are not as closely related as the former two.

Previous researchers have found a correlation in avoidant attachment style and social anxiety (Read et al., 2018; Tamannaifar & Sanatkarfar, 2017). Thus, there may be factors affecting the study that contradicted past findings. The questionnaire used in this study was not indigenous to the population it was being applied upon.

Gender differences were found among attachment styles and social anxiety and female participants were shown to be more likely to experience social anxiety symptoms than men. Within the cultural context, in Pakistan, women tend to get less opportunities and encouragement to be social. Moreover, women are encouraged to be vigilant of how they look and they act at all times. This definitely plays a role in their gender experiencing higher rates of being socially anxious. Even while studying in a liberal arts university like FCCU, the female students may have had past experiences of being discouraged from socializing with their peers, especially the opposite gender. Bano et al. (2019) found no gender difference while researching social anxiety rates in adolescents in Pakistan. The researchers in this study employed an old instrument that was not indigenous to the population. Whereas this study used an updated and locally designed scale to measure social anxiety levels aptly.

As we continue to research into social anxiety and its associations with other parts of our lives, we are able to understand the phenomenon and ourselves better. The results of the study conducted suggest that individuals with an anxious attachment style may experience higher rates of social anxiety. This implies how social anxiety is associated with trouble in our intimate relationships rather than just in social interactions with strangers.

Practically, we can use this knowledge to form clinical interventions or take new approaches to treatment plans that can acknowledge and address both social anxiety and attachment-related concerns. These treatment plans could help individuals develop more secure and fulfilling relationships while managing their social anxiety symptoms. This can include social skills training or support groups offering mutual understanding and practical strategies for coping with social anxiety and attachment issues at the same time. This holistic approach can lead to more comprehensive and effective treatment outcomes.

Furthermore, practically, it can also provide insights into relationship dynamics. When we recognize our insecure/anxious attachment style, we can work together with our loved ones to foster a more supportive and secure intimate relationship environment, encouraging open communication and understanding.

Theoretically, this finding aligns with Bowlby’s Attachment Theory (Bowlby, 1969) which states that the first bonds formed in our lives can lay the foundation for how we present in our future intimate relationships. This correlation suggests that an insecure and unstable first relationship may lead us to experience difficulties in social interactions due to our attachment-related
insecurities. It implies that the patterns developed in our early childhood years can have an impact on our social functioning and anxiety levels in adulthood.

The study was conducted at a university in Lahore, Pakistan. Due to this, the results are not generalizable to undergraduate students in the entire nation. Even though the sample size was large, it was only adequate in representing the student body population of undergraduate students in Forman Christian College or Lahore. Future studies may involve participants from various universities in different provinces and cities across the country.

The method of data collection was one of the limitations in this study. The study was conducted using in-person survey method which did not allow the researcher to reach different parts of the country as it is a time-consuming and expensive procedure. In contrast, future studies may employ online surveys and reach a vast and diverse population.

The scale used to measure attachment styles, i.e. the Adult Attachment Scale, was not indigenous and contained questions about romantic relations which is not the norm in Pakistan in unmarried populations. Therefore, we could benefit from using a local scale constructed to study attachment styles.

Conclusion
This study was designed to study the association between insecure attachment styles and social anxiety in undergraduate students. The research expected to find a positive relationship between social anxiety and both insecure attachment styles i.e., avoidant attachment style and anxious attachment style. The results of the study agreed with the empirically established facts and showed a strong positive correlation between anxious attachment style and social anxiety. However, negating the hypothesis, no relationship was found between avoidant attachment style and social anxiety. As the literature suggested, a gender difference was found in rates of social anxiety and anxious attachment style as women were found to have higher rates of social anxiety and anxious attachment style than men. Women are more like to experience symptoms of social anxiety in their daily life than men. Consequently, due to the correlation established, they are also more like to have an anxious attachment style in their intimate relationships. This is not to state that men do not go through the experience of being socially anxious; they simply encounter it in lower rates than women. No gender differences were found among rates of avoidant attachment style as they were more or less equal for both males and females. The year of study of the student did not matter in whether they experienced social anxiety or not as no difference was found in the rates across the four years. In conclusion, the study attempted to highlight the dimensions and associations of social anxiety to attain a better grasp on the concept and enjoy closer bonds by developing more suitable treatment plans and understanding our relationship dynamics.

References


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