

An Attachment Theory Perspective on Closeness and Intimacy

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Attachment theory regards the propensity to make intimate emotional bonds to particular individuals as a basic component of human nature, already present in germinal form in the neonate and continuing through adult life into old age.

—Bowlby (1988, pp. 120–121)

Close relationships are essential to health and well-being (Cohen, 1988; Sarason, Sarason, & Gurung, 2001; Uchino, Cacioppo, & Kiecolt-Glaser, 1996), and most people regard their intimate relationships as their most important source of personal happiness (Myers & Diener, 1995; Ryff, 1989). Moreover, the capacity to form intimate bonds with others is considered to be a principal feature of effective personality development and a key marker of mental health (Bowlby, 1988; Epstein, 1994). But despite the importance of close relationships for health and well-being, many people find it difficult to develop and sustain intimate relationships with others, and many relationships fail to provide partners with the deep sense of emotional closeness that is necessary for optimal functioning. In this chapter, we use attachment theory as a framework for understanding closeness and intimacy processes within adult close relationships and for exploring individual differences in the capacity for intimate relating (see also Cassidy, 2001; Reis & Patrick, 1996). Attachment theory provides a useful perspective from which to understand intimacy processes for a number of reasons. First, attachment theory highlights the importance of closeness and intimacy processes for the development and maintenance of trust and felt security in close relationships. In doing so, attachment theory emphasizes the central role of care-seeking–caregiving exchanges as a special class of intimate interactions. Second, attachment theory identifies

the ways in which individual differences in attachment style shape the quality of intimate interactions within a relationship, as well as partners' subjective perceptions of these interactions. Finally, attachment theory provides insight into the role of early family experiences in the development of intimacy-related goals and skills.

Before discussing attachment theory, it is important to clarify our use of the terms *closeness* and *intimacy*. We use the term *closeness* to refer to the degree to which relationship partners are cognitively, emotionally, and behaviorally interdependent with one another. By interdependent, we mean the degree to which partners' lives are deeply intertwined such that partners influence one another's outcomes and rely on one another for the fulfillment of important social, emotional, and physical needs (Berscheid, Snyder, & Omoto, 1989; Kelly et al., 1983). Whereas closeness refers to a general pattern of interdependence, intimacy refers to a specific type of social interaction. On the basis of models of intimacy advanced by Reis and Shaver (1988; Reis & Patrick, 1996) and by Prager (1995; Prager & Roberts, chap. 4, this volume), we use the term *intimacy* to refer to a special class of social interactions in which one partner expresses self-relevant feelings and information and, as a result of the other partner's responsiveness and positive regard, the individual comes to feel understood, validated, and cared for (see Laurenceau, Rivera, Schaffer, & Pietromonaco, chap. 5, this volume, for a review of Reis & Shaver's [1988] intimacy model). Although intimate interactions often involve verbal self-disclosure, physical forms of intimacy (e.g., touching, hugging, sexual contact) provide an equally important channel through which individuals can express their true selves, and through which partners can communicate acceptance and caring (Prager, 1995; Reis & Patrick, 1996). Furthermore, although this model of intimacy emphasizes the importance of studying specific interactions, it is also useful for understanding patterns of intimate relating within a relationship. Individuals will come to experience their relationship as emotionally intimate to the extent that they feel understood, validated, and cared-for by their partner on central self-relevant dimensions (Reis & Patrick, 1996); and these intimate feelings should result from accumulated experiences in intimate interactions, along with each partner's subjective interpretations of those experiences and relevant goals and needs (Prager & Roberts, chap. 4, this volume).

Because attachment bonds are characterized by profound psychological and physical interdependence not found in other social bonds (Hazan & Zeifman, 1999), attachment relationships are among people's closest and most intimate relationships. Attachment relationships are unique from other close relationships in their ability to satisfy needs for security, in their central importance to the self, and in their implications for health and well-being (Cassidy, 2001). Moreover, it is within attachment relationships that individuals are most likely to express the types of "vulnerable emotions" (e.g., sadness, hurt, fear) that are considered to be the most self-revealing and the most intimate (Prager & Roberts, chap. 4, this volume; Reis & Patrick, 1996), and to engage in physical forms of intimacy (e.g., cuddling, kissing, comforting) that do not typically occur in other close relationships (Hazan & Zeifman, 1999; Shaver, Hazan, & Bradshaw, 1988). As such, attachment relationships provide an important context within which to explore the dynamics of closeness and intimacy, and the implications of these dynamics for personal and interpersonal adaptation across the lifespan.

In the pages that follow, we examine closeness and intimacy processes from the perspective of attachment theory. We begin by providing an overview of the basic tenets of attachment theory, focusing on both normative processes and individual differences. In doing so, we explore how early experiences in the family may shape the capacity for intimate relating in childhood and adulthood. Next, we discuss how intimacy and attachment processes are regulated in adult close relationships, and how these processes are shaped by individual differences in attachment style.

THE ATTACHMENT BEHAVIORAL SYSTEM

In discussing the attachment behavioral system, it is useful to distinguish between normative processes and individual differences. Normative processes refer to the general operation of the attachment behavioral system in terms of its adaptive function and its social and psychological dynamics, which are presumed to be universal. Individual differences refer to the specific ways in which the attachment system is expressed in different people depending on their history of attachment experiences, current relationship circumstances, and cultural context.

Normative Processes

Attachment theory was first developed to explain why infants become attached to their primary caregivers and emotionally distressed when separated from them. Drawing from principles of evolutionary theory, Bowlby (1969/1982) argued that attachment behaviors in infants (e.g., crying, clinging, smiling) are regulated by an innate *attachment behavioral system* that functions to promote safety and survival by maintaining a child's proximity to a nurturing caretaker. According to this approach, the attachment system will be activated most strongly in adversity so that when a child is frightened, tired, ill, or in unfamiliar surroundings, the child will seek protection and comfort from an attachment figure (Bowlby, 1969/1982; Bretherton, 1985). As the child matures and his or her cognitive system becomes increasingly sophisticated, the goal of the attachment system is not simply to maintain physical proximity to a caregiver, but to maintain a psychological sense of *felt security* (Bretherton, 1985; Sroufe & Waters, 1977).

An attachment bond is therefore a specific type of emotional bond that has four defining features: (a) *proximity maintenance*, in which the attached individual wishes to be in close proximity (either physically or psychologically) to the attachment figure, (b) *separation distress*, in which the attached individual experiences an increase in anxiety during unwanted or prolonged separation from the attachment figure, (c) *safe haven*, in which the attachment figure serves as a source of comfort and security for the attached individual, and (d) *secure base*, in which the attachment figure serves as a base of security from which the attached individual engages in explorations of the social and physical world (Hazan & Zeifman, 1999). A child's ability to rely on his or her attachment figure as a safe haven when comfort is needed, and as a secure base from which to explore the world, is considered to be a principal feature of well-functioning attachment bonds and a key predictor of healthy emotional development.

In order for attachment bonds to function effectively, the attachment behavior of a child must be coordinated with the caregiving behavior of his or her attachment figure. Indeed, Bowlby (1969/1982) referred to attachment bonds as a "shared dyadic programme" (p. 377) in which care seekers and caregivers play complementary roles and in which the behavior of one partner commonly meshes with that of the other. The *caregiving behavioral system* is thus an integral component of attachment bonds (Bowlby, 1969/1982; George & Solomon, 1999; Kuncze & Shaver, 1994). From a normative perspective, the caregiving system alerts individuals to the needs of others and motivates them to provide comfort and assistance to those who are dependent upon them (Collins & Feeney, B. C., 2000; Feeney, B. C., & Collins, 2001). Just as infants are motivated to remain in close proximity to their primary caregivers, caregivers feel a strong urge to remain close to their infants and young children; they routinely monitor their infant's whereabouts and remain ready to respond on short notice should any threat arise. Of course, effective caregiving involves more than simply monitoring a child's whereabouts and remaining alert to signs of distress. In its optimal form, caregiving includes sensitivity and responsiveness to the child's expressed needs and

signals, and should include a broad array of behaviors (e.g., holding, soothing, reassuring, problem-solving) that complement the child's attachment behavior (George & Solomon, 1999; Kuncz & Shaver, 1994).

Individual Differences

Although the need for felt security is believed to be universal, children differ systematically in the way they cope with distress and regulate feelings of security; these differences are thought to be contingent on the child's history of regulating distress with attachment figures (Ainsworth, Blehar, Waters, & Wall, 1978; Bowlby, 1973, 1969/1982). Attachment scholars have identified three primary patterns or styles of attachment in infant-caregiver dyads (secure, anxious-ambivalent, and avoidant), and these attachment styles are systematically linked to differences in caregiver warmth and responsiveness (Ainsworth et al., 1978; Egeland & Farber, 1984). *Secure* attachment is associated with a caregiver who is sensitive and responsive (thereby inducing feelings of support and security), *anxious-ambivalent* attachment is associated with a caregiver who responds in an inconsistent manner (inducing anxiety, vigilance, and anger), and *avoidant* attachment is associated with a caregiver who is cool, rejecting, and unsupportive (inducing premature self-reliance and suppression of neediness and vulnerability). These individual differences in *attachment style* are thought to reflect differences in the psychological organization of the attachment system, a central part of which is the child's perception of whether the caretaker can be trusted to be emotionally available and responsive when needed (Main, Kaplan, & Cassidy, 1985).

Thus, central to Bowlby's theory (1973, 1969/1982) is the notion that early child/caregiver interactions provide a critical context within which the child organizes emotional experience and learns to regulate attachment needs. On the basis of these early interactions, Bowlby (1973) argued that children develop *internal working models* of attachment, which contain beliefs and expectations about whether the caretaker is emotionally available and responsive when needed (a working model of other), and whether the self is worthy of care and attention (a working model of self). These working models tend to be mutually confirming such that positive (or negative) expectations about a caretaker's responsiveness tend to be linked to positive (or negative) images of the self. Working models are cognitive-affective-motivational schemas that enable individuals to forecast the responsiveness and availability of others and to plan their own behavior accordingly. They include conscious and unconscious elements that direct not only feelings and behavior, but also attention, memory, and cognition in attachment-relevant contexts (Bowlby, 1973; Bretherton & Munholland, 1999; Collins & Allard, 2001; Collins & Read, 1994; Main, Kaplan, & Cassidy, 1985). Once developed, working models tend to be relatively stable because they operate automatically and unconsciously, and because they influence how new information is processed and construed (Shaver, Collins, & Clark, 1996; Collins & Read, 1994). Therefore, enduring cognitive models will be carried forward into new relationships where they influence how one expresses and regulates attachment needs (Bowlby, 1988; Bretherton, 1985, 1987).

Attachment Processes in Adulthood

Although Bowlby focused primarily on infants and young children, he acknowledged the importance of studying attachment processes across the lifespan and he suggested that the basic functions of the attachment system continue to operate in adulthood and old age (Bowlby, 1988). At present, most of the empirical work on adult attachment

processes has focused on adult romantic relationships, which Bowlby viewed as the prototypical attachment bond in adulthood. Just as children derive a sense of felt security from becoming emotionally connected to a primary caregiver who is invested in their welfare and responsive to their needs, adults will derive a sense of security from becoming emotionally and behaviorally interdependent with a romantic partner who is uniquely committed to them and deeply invested in their welfare (Hazan & Zeifman, 1999). Hence, from a normative perspective, emotional (and physical) well-being in adulthood, as in childhood, will depend in part on having an accessible attachment figure who can serve as a reliable safe haven in times of need and a secure base from which to explore autonomous activities outside of the relationship. In addition, feeling nurtured and cared for by a responsive partner should be a critical component of secure and well-functioning intimate relationships in adulthood. We discuss these issues in greater detail subsequently.

In addition to these normative processes, Bowlby suggested that individual differences in adult attachment behavior and emotion regulation will be guided by internal working models of attachment that have their developmental origins in early attachment relationships. Consistent with these claims, adult attachment researchers have shown that the patterns of attachment that characterize adult romantic relationships are similar to those observed in childhood, and these patterns are systematically linked to retrospective reports of early experiences with attachment figures (e.g., Collins & Read, 1990; J. A. Feeney & Noller, 1990; Hazan & Shaver, 1987; Levy, Blatt, & Shaver, 1998; Rothbard & Shaver, 1994). Moreover, the cognitive, emotional, and behavioral consequences of these attachment patterns in adult romantic relationships appear to be similar to those observed in parent-child relationships (see Feeney, J. A., 1999 for a review of these findings).

Adult attachment researchers typically define four prototypic attachment styles derived from two underlying dimensions: *anxiety* and *avoidance* (Bartholomew & Horowitz, 1991; Brennan, Clark, & Shaver, 1998; Crowell, Fraley, & Shaver, 1999; Fraley & Waller, 1998). The *anxiety* dimension refers to one's sense of self-worth and acceptance (versus rejection) by others, and this dimension appears to be closely linked to working models of the self. The *avoidance* dimension refers to the degree to which one approaches (versus avoids) intimacy and interdependence with others, and this dimension appears to be closely linked to working models of others. *Secure* adults are low in both attachment-related anxiety and avoidance; they are comfortable with intimacy, willing to rely on others for support, and confident that they are valued by others. *Preoccupied* (anxious/ambivalent) adults are high in anxiety and low in avoidance; they have an exaggerated desire for closeness and dependence, coupled with a heightened concern about being rejected. *Dismissing avoidant* individuals are low in attachment-related anxiety but high in avoidance; they view close relationships as relatively unimportant and they value independence and self-reliance. Finally, *fearful avoidant* adults are high in both attachment anxiety and avoidance; although they desire close relationships and the approval of others, they avoid intimacy because they fear being rejected.

These differences in attachment style represent theoretical prototypes that individuals can approximate to varying degrees (Bartholomew & Horowitz, 1991); they are most often assessed through self-report scales, although structured interview measures have also been developed (see Crowell, Fraley, & Shaver, 1999 for a review of adult attachment style measures). Individual differences in adult attachment style are thought to reflect underlying differences in working models of self and others that are presumed to develop, at least in part, from early experience with attachment figures during childhood and adolescence (Collins & Read, 1990). And, much like children's working models direct their attachment behavior in parent-child interactions,

working models in adulthood should shape the way that adults express and regulate their attachment needs. For example, the different styles of attachment can be understood in terms of rules that guide responses to emotionally distressing situations (Fraley & Shaver, 2000; Mikulincer, Shaver, & Pereg, 2003). Kobak and Sceery (1988) suggest that secure attachment is organized by rules that allow acknowledgment of distress and turning to others for support. In contrast, avoidant attachment is organized by rules that restrict acknowledgment of distress, as well as any attempts to seek comfort and support from others, whereas preoccupied attachment is organized by rules that direct attention toward distress and attachment figures in a hypervigilant manner that inhibits autonomy and self-confidence. These different strategies for coping with distress will, of course, have important implications for closeness and intimacy processes, which we discuss in detail at a later point in this chapter.

It is important to note that the attachment styles observed in adulthood (between romantic partners) are not identical to those formed in infancy (between children and parents). Although longitudinal studies reveal moderate levels of continuity across childhood and adolescence (given a stable family environment; see Allen & Land, 1999), and across different time points in adulthood, we do not yet have clear evidence of a simple or direct link between parent-child attachment and adult romantic attachment (see Crowell, Fraley, & Shaver, 1999). Complexities in the conceptualization and measurement of attachment styles at different points in the lifespan make it difficult to establish strong links at this time, but attachment scholars are continuing to study the continuity, and lawful discontinuity, of attachment patterns across the lifespan. Nevertheless, regardless of whether the attachment patterns observed in adulthood are a continuation of those formed in childhood, adults as well as children will have developed characteristic strategies for regulating their attachment needs (i.e., strategies for seeking support, reducing feelings of distress, increasing feelings of security), and the specific strategies used to achieve this goal are believed to be at least partly contingent on an individual's history of regulating distress with attachment figures.

In summary, attachment theory proposes that individuals of all ages will have a propensity to form intimate bonds with a small number of significant others who provide a safe haven of support in times of need, and a secure base from which to explore the world. And, while the need for intimate bonds is presumed to be universal, people will differ systematically in their willingness and ability to develop such bonds, and in the way they regulate and express their attachment needs. These differences in attachment style are presumed to reflect underlying differences in working models of self and others, which guide cognition, emotion, and behavior in attachment-relevant contexts.

ATTACHMENT PROCESSES IN ADULTHOOD: CLOSENESS, INTIMACY, AND FELT SECURITY

As the above review suggests, attachment theory has obvious relevance to closeness and intimacy processes in adulthood. Not only is security maintained through the regulation of physical proximity and psychological closeness to attachment figures, intimate interactions provide the interpersonal foundation for the development of secure attachment bonds. In the sections that follow, we limit our discussion of attachment processes to those involving adult romantic relationships because romantic bonds are considered the prototypical attachment bond in adulthood (see Hazan & Zeifman, 1999) and because most of the empirical work in adulthood has been conducted on romantic relationships. However, we believe that the processes described

below would apply equally well to other adult relationships that qualify as attachment bonds.¹

In discussing attachment and intimacy, it is once again useful to distinguish between normative processes and individual differences. In the sections that follow, we begin by discussing the normative functioning of the attachment system in adulthood and its implications for intimacy processes. In doing so, we argue that intimate interactions are critical for the development of secure attachment bonds, and that support-seeking/caregiving interactions are especially important in this regard. Furthermore, we suggest that intimacy and security have reciprocal effects on one another, that is, effective intimacy processes enhance feelings of security, and feelings of security facilitate effective intimacy processes. Finally, we provide a detailed review of attachment style differences in the capacity for closeness and intimacy.

Attachment, Intimacy, and Closeness: Normative processes

Proximity Seeking. One of the primary assumptions of attachment theory is that individuals will regulate feelings of safety and security by regulating closeness and proximity to attachment figures. According to this approach, the attachment behavioral system will be activated whenever an individual experiences a threat to the self or a threat to their primary attachment relationship. And, although adults have the capacity for self-protection and self-reliance, they nevertheless benefit greatly from seeking contact with an attachment figure who is deeply invested in their welfare and reliably available to help if needed (Hazan & Zeifman, 1999). As Bowlby (1988) states, "To remain within easy access of a familiar individual known to be willing and able to come to our aid in an emergency is clearly a good insurance policy—whatever our age" (p. 27). There is, of course, ample evidence that romantic relationships serve important security-regulating functions in adulthood. Seeking social support is a common method of coping with stress, and romantic partners are often an individual's most important source of emotional and instrumental support (Cutrona, 1996). Moreover, a large body of research indicates that receiving social support from significant others helps individuals cope more effectively with stressful life events and has long-term benefits for physical health and emotional well-being (Cohen, 1988; Sarason, Sarason, & Gurung, 2001; Uchino, Cacioppo, & Kiecolt-Glaser, 1996).

In addition to evidence highlighting the importance of close relationships for coping with stress, a number of studies provide more direct evidence for attachment dynamics in couples by showing that stressful events motivate individuals to express their distress and to seek closeness to their romantic partner. For example, Collins and Feeney (2000) found that when individuals were asked to discuss a personal worry or concern with their partner, disclosers who rated their problem as more serious and stressful disclosed more openly to their partner and sought more social support. Moreover, disclosers felt better after the discussion (in terms of their overall mood)

¹ As discussed in detail by Hazan and Zeifman (1999), a relationship qualifies as an attachment bond to the extent that it is characterized by the four defining features of attachment, (a) proximity maintenance, (b) separation distress, (c) safe haven, and (d) secure base. Bonds of attachment are found in some but not all relationships of emotional significance – only those that are critical to an individual's continuing security and to the maintenance of emotional stability (Weiss, 1982). Bowlby suggested that adult pair bonds—in which sexual partners mutually derive and provide security to one another—are the prototypical attachment relationship in adulthood, and there is evidence that adults direct most of their attachment behavior toward their primary romantic partner (Hazan & Zeifman, 1999). It is important to note, however, that other long-term relationships may also function as attachment bonds in adulthood. For example, adults may continue to desire proximity to their parents and to depend on their parents as an important source of safety and security. Under some circumstances, sibling relationships and close friendships may also qualify as attachment bonds, but only if they serve an important safety-regulating function.

when their partner displayed more responsiveness and understanding during their discussion. Similarly, in a diary study in which couples were asked to report patterns of support-seeking and caregiving behavior over a 3-week period, respondents reported seeking more support from their partners on days when they experienced more stressful life events, and this behavior was corroborated by their partner's report (Collins & Feeney, B. C., 2003). Evidence for the normative activation of the attachment system was also obtained in a clever field study in which couples were unobtrusively observed at an airport (Fraley & Shaver, 1996). In this study, couple members who were separating from each other displayed higher levels of proximity-maintaining behavior (e.g., kissing, hugging, clinging, eye-to-eye contact) than did couples who were not separating from each other. Finally, in a series of studies, Mikulincer, Gillath, and Shaver (2002) found that when individuals were primed with threatening words, mental representations of attachment figures became more accessible in memory (and this was true regardless of the individual's chronic attachment style). These findings suggest not only that working models of attachment will be automatically activated in response to threat, but also that adults may derive a psychological sense of proximity (and perhaps felt security) by simply accessing mental representations of attachment figures in memory. Taken together, these studies provide evidence that adults respond to threats to the self, or threats to their attachment relationship, by regulating physical as well as psychological closeness to their romantic partner.

Intimacy and Closeness as Necessary for Felt-Security. To say that romantic relationships qualify as attachment bonds means only that such relationships have the *potential* to provide partners with a sense of physical and emotional security. The existence of a relationship by no means guarantees that the relationship will provide couple members with the deep sense of emotional closeness and security that is essential for optimal functioning. Just as parent-child relationships differ in their attachment quality, adult romantic relationships will differ in the degree to which they provide partners with a safe haven of comfort and security and a secure base from which to explore the world. If the basic functions of the attachment system continue to operate in adulthood, and if romantic relationships qualify as attachment bonds, then felt security in adulthood will depend in large part on whether one's romantic partner is perceived to be both willing and able to be responsive to one's needs (Collins & Feeney, B. C., 2000).

It is important to clarify what we mean by *felt security* in adulthood. We distinguish between two different but compatible uses of the term. First, felt-security refers to a situational state that reflects the degree to which the individual feels free from physical and emotional threat. When felt-security is threatened (by either a threat to the self or a threat to the attachment relationship) the attachment system will be activated and the individual will tend to seek contact with attachment figures. Thus, acute threats to felt security trigger the attachment system and motivate attachment behavior (as previously discussed). We distinguish this situation-specific form of felt security from relationship-specific felt security, which refers to an individual's overall sense of confidence in the partner's love and commitment, and expectations concerning the partner's responsiveness to need. Relationship-specific felt security reflects the degree to which the self is perceived to be accepted and cared for by the partner, and the degree to which the partner is judged to be emotionally available and responsive. Individuals will feel more secure in their relationship to the extent that they feel nurtured and cared for by a responsive partner. It is useful to conceptualize relationship-specific felt security in terms of a relationship-specific working model (Collins & Read, 1994). Consistent with this approach, Murray et al. (2001) argue that felt-security in romantic relationships requires two conjunctive beliefs, (a) that the partner loves the self and is thus *willing* to be available and caring, and (b) that the partner is a good, responsive person who is *capable* of fulfilling one's needs. Thus, a

secure relationship-specific working model simultaneously evaluates the self as loved and the partner as trustworthy and reliable.

If relationship-specific felt security requires the belief that a responsive partner is uniquely committed to the self, such inferences should be based on past experience in diagnostic situations that enable individuals to draw inferences about a partner's motives and feelings (Holmes & Rempel, 1989; Weiselquist, Rusbult, Foster, & Agnew, 1999). We suggest that intimate interactions, in which partners reveal private aspects of the self, provide a critical testing ground for drawing such inferences. Intimate interactions—in which individuals express self-relevant information and, as a result of their partner's responsiveness, come to feel validated, understood, and cared for—are central to felt security because they provide the interpersonal context in which individuals can gather diagnostic information about their partner's acceptance of the self. After all, in order for individuals to feel secure in their partner's love, they must perceive that their partner knows, understands, and values their true self.

Although intimate interactions of all kinds provide valuable information about a partner's attitude toward the self, a sense of felt security also requires evidence that the partner is willing and able to be responsive to one's needs. Therefore, we suggest that care-seeking–caregiving interactions, which are a special form of intimate interactions, will be especially critical for drawing inferences about a partner's responsiveness. Through care-seeking–caregiving interactions, individuals learn whether they can count on their partner to understand their needs and to be emotionally (and physically) available when needed. They also learn about their partner's willingness to follow communal norms and to accept responsibility for their well-being (Clark, Fitness, & Brissette, 2001). Furthermore, it is precisely because care-seeking interactions involve vulnerability (e.g., expressions of fear, weakness, sadness, hurt) that they provide such a critical testing ground for felt security. Such interactions provide evidence of a partner's willingness to care for us when we are at our weakest (e.g., when we are emotionally vulnerable, socially isolated, physically ill, down on our luck) and perhaps least able to reciprocate. Under these circumstances, a partner's continued acceptance and care provide diagnostic evidence of their deep investment in our well-being (Tooby & Cosmides, 1996). It is precisely this type of information that is necessary for an individual to develop a sense of confidence and trust in a partner's love and commitment (Holmes & Rempel, 1989).

Consistent with this idea, a number of studies have shown an association between relationship security and the receipt of responsive support and care. For example, questionnaire studies indicate that relationship satisfaction in dating and married couples depends in large part on the degree to which one's partner is perceived as a responsive caregiver who provides a safe haven of comfort and support (Carnelley, Pietromonaco, & Jaffe, 1996; Feeney, B. C., & Collins, 2003; Feeney, J. A., 1996). Links between effective caregiving and relationship security have also been found in laboratory studies of dyadic interaction, and in diary studies of ongoing interactions in couples. For example, Collins and Feeney (2000) brought couples into the lab and asked one member of the couple to disclose a personal worry or concern to his or her partner. Couples who rated their relationship as happier and more secure engaged in interactions that were judged—by members of the couple and by independent raters—to be much more supportive and responsive. Similarly, Kobak and Hazan (1991) asked couples to engage in two laboratory activities, a problem-solving activity and a confiding activity. Husbands who reported greater attachment security (as indexed by the degree to which they rated their wife as psychologically available) had wives who displayed less rejection and greater support validation during the problem-solving task. In addition, wives who reported greater attachment security (as indexed by the degree to which they felt they could rely on their husband and that he was psychologically available) had husbands who displayed more effective listening and greater acceptance during the confiding task. Finally, in a daily diary study of romantic couples,

Collins and B. C. Feeney (2003) found that respondents reported feeling more secure in their relationship (more loved and valued by their partner) on days when their partner provided more responsive care and support. Moreover, responsive support (or lack thereof) predicted changes in security from one day to the next, and the effects of social support were independent of the effects of social conflict. Taken together, these studies provide support for the idea that care-seeking/caregiving interaction play a critical role in the development of relationship-specific security.

Felt Security as Necessary for Closeness and Intimacy. We have argued that intimacy processes (especially care-seeking and care giving interactions) are critical to the development of felt security in adult romantic relationships. However, it is also likely that felt-security will have reciprocal effects on relational intimacy and interdependence. After all, individuals take considerable risk in revealing the self, not only because partners might show signs of disapproval or rejection but also because partners might misuse the information for future criticism or exploitation (Prager and Roberts, chap. 4, this volume; Reis & Patrick, 1996). Individuals also place themselves at risk when becoming interdependent with a partner because their personal outcomes may be linked to a partner who is unwilling or unable to fulfill important social and emotional needs, or who fails to behave in pro-social ways. Thus, a sense of trust and felt security should increase the likelihood that partners will be willing to engage in the types of behaviors that are necessary for intimacy and for the development of closeness and interdependence (see also Murray et al., 2003). For example, individuals should be more willing to express vulnerable emotions and to seek comfort and support when they feel confident that their partner is willing and able to respond in a sensitive manner. Moreover, confidence in a partner's love should enhance one's willingness to self-disclose because individuals readily anticipate acceptance rather than rejection (Prager & Roberts, chap. 4, this volume).

Consistent with this proposition, a number of studies provide evidence for the link between relationship security and the willingness to seek closeness and intimacy. In the diary studied mentioned above (Collins & Feeney, B. C., 1993), individuals were more likely to seek social support from their partner on stressful days if they perceived, in general, that their partner loved them and was responsive to their needs. Likewise, in another diary study, Murray et al. (2003) found that respondents who felt chronically more valued by their partner (a secure relationship-specific working model) tended to draw closer to their partner on days when they felt most vulnerable (and in need of support and affirmation), whereas those who felt less valued by their partner tended to distance themselves from their partner on days when they felt more vulnerable. Likewise, Kobak and Hazan (1991) found that when married couples were asked to engage in a confiding interaction in which partners discussed a personal disappointment or loss, both husbands and wives engaged in more self-disclosure when they felt more secure in their relationship. Finally, in an experimental study in which women were primed to feel more secure, respondents said that they would be more likely to seek social support in response to a hypothetical stressor relative to women who received neutral primes (Pierce & Lydon, 1998).

Attachment, Intimacy, and Closeness: Individual Differences

Thus far we have discussed normative attachment processes, and we have argued that felt security requires the belief that one's partner is committed to the self and can be trusted to be available and responsive when needed. Moreover, we have suggested that intimate interactions (especially support and caregiving interactions) provide critical diagnostic opportunities for drawing inferences about a partner's love and responsiveness. And finally, we have suggested that felt-security within a relationship will have reciprocal effects on one's willingness to engage in intimate interactions

and to become close and interdependent with one's partner. But, in addition to these normative attachment dynamics, it is important to consider individual differences in the capacity for intimate relating. After all, not everyone is equally skilled at intimate relating or equally motivated to seek out intimacy and interdependence. Thus, closeness and intimacy processes within a relationship will be shaped by the needs, expectations, and behavioral tendencies of each member of a dyad. Individuals who enter their relationships with dispositional insecurities (who have negative working models of self, others or both) may have difficulty engaging in the types of behaviors necessary for intimacy, and may find it difficult to develop a sense of confidence in their partner's love and commitment. Thus, individual differences in attachment styles should play a critical role in shaping the nature and quality of intimate interactions, and partners' subjective perceptions of those interactions.

Before discussing attachment-style differences in closeness and intimacy, it is useful to consider the skills and abilities that are necessary for intimate relating and for the effective regulation of attachment processes (see also Cassidy, 2001). Based on our discussion of normative attachment processes, we suggest that intimacy requires (a) willingness and ability to disclose the true self (one's thoughts, feelings, wishes, fears) and to be a responsive and accepting of the partner's true self, (b) willingness and ability to rely on one's partner for comfort, support, and nurturance, and to provide nurturance and support to the partner, and (c) willingness and ability to share physical intimacy. In addition to these essential abilities, Cassidy (2001) argues that intimacy also requires the ability to feel comfortable with an autonomous self (an appropriate balance between autonomy and intimacy), and the ability to negotiate with one's partner. As we discuss in detail subsequently, individuals who enter their relationships with insecure working models may have difficulty with effective intimacy processes because they lack one or more of these essential abilities.

Below we provide a detailed description of each attachment style, and we review and discuss evidence regarding attachment style differences in the capacity for intimate relating. (See also Edelstein & Shaver, chap. 22, this volume, for a detailed discussion of avoidant attachment and its relation to intimacy and interdependence in close relationships.) For theoretical and conceptual clarity, we have organized our discussion of individual differences around the four attachment prototypes (secure, preoccupied, dismissing, fearful); however, we note that individual differences in attachment styles are best measured in terms of continuous dimensions rather than discrete categories (see Brennan, Clark, & Shaver, 1998; Crowell, Fraley, & Shaver, 1999; Fraley & Waller, 1998).

Secure Attachment and Intimacy. Secure adults are comfortable with intimacy and closeness, view themselves as being valued and worthy of care and affection from others, and they perceive that others are generally responsive and dependable (Bartholomew, 1990; Bartholomew & Horowitz, 1991; Collins & Read, 1990; Feeney, J. A., & Noller, 1990; Hazan & Shaver, 1987; Simpson, 1990). Secure individuals perceive attachment figures to be generally well-intentioned, trustworthy, good-hearted, and accessible. Thus, these individuals are able to depend on others and they are not worried about being abandoned or unloved. They tend to be involved in relationships characterized by frequent positive emotion and high levels of interdependence, commitment, trust, and satisfaction. They value intimate relationships, they are able to maintain close relationships without losing personal autonomy, and they are coherent and thoughtful in discussing relationship issues. Moreover, secure individuals report positive, warm, and responsive relationship histories, have high self-esteem and perceptions of personal competency, are generally positive and self-assured in their interactions with others, and report an absence of serious interpersonal problems (Bartholomew, 1990; Bartholomew & Horowitz, 1991; Collins & Read, 1990; Feeney, J. A., & Noller, 1990; Hazan & Shaver, 1987; Rothbard & Shaver, 1994; Simpson, 1990).

They appear to maintain a healthy interdependence such that they effectively balance both intimacy and independence needs.

Secure individuals exhibit their comfortable approach to relationship intimacy in a number of ways. They are willing to seek both emotional and instrumental forms of support from others in stressful situations (Armsden & Greenberg, 1987; Collins & Feeney, B. C., 2000; Feeney, J. A., 1998; Florian, Mikulincer, & Bucholtz, 1995; Mikulincer & Florian, 1995; Mikulincer, Florian, & Weller, 1993; Ognibene & Collins, 1998; Simpson, Rholes, & Nelligan, 1992), they exhibit a willingness to disclose to others, and they both like and are responsive to interaction partners who disclose to them (Grabill & Kerns, 2000; Mikulincer & Nachshon, 1991). In contrast to individuals with insecure attachment styles, securely attached individuals discriminate among recipients of self-disclosure by showing more intimate levels of self-disclosure (and comfort with disclosure) when it is directed toward a close relationship partner rather than a stranger of the opposite sex (Keelan, Dion, & Dion, 1998). In addition, relative to avoidant individuals, secure individuals report higher levels of intimacy, enjoyment, promotive interaction, and positive emotion in their daily interactions with others (Tidwell, Reis, & Shaver, 1996). Secure individuals use touch to express affection and to seek care from relationship partners (Brennan, Wu, & Loev, 1998), and they are less likely than other individuals to respond to physical separation from relationship partners with feelings of insecurity (Feeney, J. A., 1998), perhaps because they are able to regulate security with a sense of psychological closeness as well as with physical closeness. Finally, secure individuals are comfortable with sexual intimacy and are less likely than insecure individuals to engage in risky sexual behavior. For example, relative to their insecure counterparts, secure adults are less likely to have sex outside their primary relationship, more likely to be involved in mutually initiated sex, and more likely to enjoy physical contact that is both intimate and sexual (Hazan, Zeifman, & Middleton, 1994, as cited in Feeney, J. A., 1999). In addition, secure women are less likely to agree to unwanted sex (Impett & Peplau, 2002).

When in the caregiving role, they exhibit responsiveness and sensitivity to their partner's needs, they freely display proximity-seeking behaviors, they take a cooperative (noncontrolling) approach when assisting their partner, and there is an absence of compulsive over-caregiving and negativity (Collins & Feeney, B. C., 2000; Feeney, J. A., 1996; Kuncle & Shaver, 1994; Simpson et al., 1992). When conversing with their partners, they exhibit high levels of receptivity, gazing, facial pleasantness, vocal pleasantness, interest, and attentiveness (Guerrero, 1996). Compared to insecure individuals, they are more expressive (Tucker & Anders, 1998), and they are skilled at interpreting their partner's nonverbal behaviors and feelings (Noller & Feeney, J. A., 1994). Thus, individuals with a secure attachment style have the general characteristics and interpersonal skills necessary for the development and maintenance of intimate relationships with others.

It is also important to consider individual differences in cognitions about relationship behaviors, as these thoughts and interpretations should have important implications for the closeness/intimacy experienced within the relationship. Secure adults have been shown to provide positive explanations for ambiguous and potentially negative relationship events—construing these events in ways that minimize their negative impact on the relationship (Collins, 1996; Collins, Ford, Guichard, & Allard, 2003). They are also less likely than insecure individuals to interpret a lack of support from their partner in pessimistic ways (e.g., by attributing negative intent to their partner) and to let an intervening negative event bias their perceptions of earlier relationship events (Collins & Feeney, B. C., in press). In addition, when their partner behaves in ways that are kind and caring, secure individuals are more likely to infer that their partner was motivated by altruistic rather than selfish concerns (Collins, Ford, Guichard, & Allard, 2003). This type of thinking is likely to promote intimacy by

engendering feelings of goodwill and understanding, and by reducing the likelihood of conflict and ill feelings toward one's partner. Interestingly, attachment security has been shown to enhance perceptions of intimacy in daily interactions with others (Grabill & Kerns, 2000; Kerns & Stevens, 1996). For example, in conversations with friends, secure dyads perceive their conversations as being more intimate than observers perceive them to be, and they perceive having received greater validation from their friends than is evident in observers' ratings. Thus, a secure attachment style appears to foster the types of perceptions that facilitate closeness and connectedness to others.

Preoccupied (Anxious–Ambivalent) Attachment and Intimacy. Preoccupied (or anxious-ambivalent) individuals are comfortable with intimacy and closeness, but they view themselves as being somewhat unworthy of care and affection from others. They possess mental models of themselves as being misunderstood, underappreciated, and lacking in confidence; they tend to report inconsistent, unpredictable, and relatively unsupportive attachment histories. Anxious–ambivalent individuals place a great deal of importance on, and are therefore strongly motivated to form, intimate relationships with others. They seek others' approval because they depend on other people's acceptance for a sense of personal well-being and to maintain positive self-regard; however, they experience a great deal of anxiety in their relationships with others because they are worried about being abandoned and unloved, and because they perceive significant others as being inconsistent, unreliable, and unwilling to commit to relationships (Bartholomew, 1990; Bartholomew & Horowitz, 1991; Collins & Read, 1990; Feeney, J. A., & Noller, 1990; Hazan & Shaver, 1987; Simpson, 1990). These perceptions and concerns appear to result in an over-dependence on close relationship partners, a tendency to desire extreme levels of intimacy, and a controlling (overdominating) interpersonal style. As a result, preoccupied/anxious individuals tend to be involved in relationships characterized by frequent negative affect and low levels of trust and satisfaction. They generally experience an approach-avoidance conflict in social situations as a result of their inconsistent experiences with attachment figures in the past—a conflict which typically results in extreme approach behaviors (Bartholomew, 1990; Bartholomew & Horowitz, 1991; Collins & Read, 1990; Feeney, J. A., & Noller, 1990; Hazan & Shaver, 1987; Rothbard & Shaver, 1994; Simpson, 1990). The dialectic between intimacy and independence for these individuals is heavily pulled toward concerns for intimacy over independence. Consistent with this idea, when Mashek and Sherman (chap. 19, this volume) asked adults to rate their actual level of closeness and their desired level of closeness in their current relationship, adults who were high in attachment-related anxiety reported a much larger gap between how much closeness they had and how much they desired.

Issues of closeness and distance (and struggles over this issue) are particularly salient for preoccupied–anxious individuals (Feeney, J. A., 1999; Pistole, 1994). Preoccupied individuals' comfort with and desire for intimacy is reflected in their desire to seek support from others when feeling distressed (Mikulincer & Florian, 1995; Ognibene & Collins, 1998), their willingness to disclose to others (Mikulincer & Nachshon, 1991), and their positive feelings toward individuals who disclose to them. Preoccupied individuals report a use of touch to express affection similar to that of secure; however, they report a desire for more touch from relationship partners, and they are the most likely (of all attachment groups) to use touch in a careseeking capacity (Brennan, Wu, & Loev, 1998). Although both secure and preoccupied individuals disclose to others, preoccupied–anxious individuals show less topical reciprocity (i.e., fewer of their statements refer to something that had been mentioned by the interaction partner), suggesting that the self-disclosure of preoccupied individuals may be self-focused and aimed more at meeting their own intimacy needs. Finally, like their

secure counterparts, preoccupied–anxious individuals report enjoying sexual contact that is also intimate (holding, caressing) and they tend not to endorse accepting attitudes toward casual sex (Feeney, Noller, & Patty, 1993; Hazan, Zeifman, & Middleton, 1994, as cited in Feeney, J. A., 1996). However, preoccupied individuals appear to be less discriminating about their sexual partners and more willing to engage in risky sexual behavior, perhaps because they use sexual contact as a way to satisfy their need for closeness and acceptance. For example, relative to secure and avoidant individuals, preoccupied–anxious individuals (especially women) tend to engage in intercourse at a younger age and to report a larger number of lifetime sexual partners (Bogaert & Sadava, 2002); they are also more likely to experience unwanted pregnancy (Cooper, Shaver, & Collins, 1998). In addition, preoccupied/anxious women are more likely to agree to unwanted sex, and they report doing so because they fear that their partner will lose interest in them (Impett & Peplau, 2002).

It is also interesting to note that the support-seeking behavior of preoccupied individuals does not differ under conditions of high and low stress, which suggests that they may be less discriminating in their need and desire for support and intimacy (Ognibene & Collins, 1998) and reflecting their chronic desire for a high level of intimacy and responsiveness from relationship partners. Although their caregiving behavior can be responsive with regard to the provision of instrumental support (in that they provide support in response to the partner's need—more when it's needed and less when it's not), anxious individuals have been shown to provide emotional support to their partners irrespective of the partner's need for it, again highlighting their desire for intimacy and closeness (Feeney, B. C., & Collins, 2001). Preoccupied (or anxious) individuals report relatively high levels of compulsive over-caregiving, controlling caregiving, and provision of physical comfort, but low levels of sensitivity (Feeney, J. A., 1996; Feeney, B. C., & Collins, 2001; Kuncz & Shaver, 1994). The caregiving pattern exhibited by these individuals suggests that although they are capable of providing affectionate caregiving, their caregiving may be somewhat intrusive and out of synch with their partner's needs—perhaps because they are focusing more on meeting their own intimacy needs. In fact, preoccupied–anxious individuals report that when they help their partners, they are motivated by a desire to achieve relationship goals (e.g., to develop a closer relationship with the partner, to keep the partner in the relationship) and to achieve some self-benefit (e.g., being rewarded for helping the partner), in addition to helping because of love and concern about the partner's well-being (Feeney, B. C., & Collins, 2003).

Similar to secure individuals, preoccupied/anxious individuals exhibit high levels of receptivity, gazing, facial pleasantness, vocal pleasantness, interest, attentiveness, and depth when conversing with their partners; however, they also exhibit high levels of vocal anxiety (Guerrero, 1996). Preoccupied/anxious individuals are less expressive when interacting with dating partners (Tucker & Anders, 1998), they use less adaptive negotiation and conflict resolution strategies (Levy & Davis, 1988; Pistole, 1989; Simpson, Rholes, & Phillips, 1996), they show deficits in the ability to decode a close relationship partner's nonverbal behavior and feelings (Noller & J. A. Feeney, 1994; Tucker & Anders, 1999), they have a tenuous sense of trust (Mikulincer, 1998; Shaver & Hazan, 1993), and they are more likely than secure individuals to respond to physical separation from relationship partners with feelings of insecurity (Feeney, J. A., 1998). A lack of interpersonal competence and skills is at least part of the reason why preoccupied–anxious individuals have difficulty developing satisfying social support networks. Despite their preoccupation with relationships and desire for closeness, preoccupied/anxious individuals appear to lack the skills necessary to be truly responsive to others and to develop the type of close, supportive relationships they desire.

With regard to cognitions about relationship events and behaviors that may have important implications for the closeness and intimacy experienced within the relationship, preoccupied/anxious individuals have been shown to provide relatively

negative attributions for their partner's transgressions—construing these events as rejecting and motivated by hurtful intent—in ways that are likely to have a negative impact on the relationship (Collins, 1996; Collins et al., 2003). They are also more likely than secure individuals to interpret an ambiguous support message in pessimistic ways (e.g., by perceiving their partner as insensitive and by attributing harmful intent to their partner) and to let an intervening negative event bias their perceptions of an earlier interaction (Collins & Feeney, B. C., in press). In addition, when their partner behaves in ways that are kind and caring, they appreciate this behavior but have doubts about their partner's benevolent motivation (Collins et al., 2003). This type of thinking is likely to reflect a low sense of self-worth and a concern about rejection, and it is likely to impede intimacy by engendering suspicion, conflict, and ill feelings toward one's partner. Interestingly, preoccupied individuals also have been shown to differ from individuals with other attachment styles in the way in which they organize knowledge about conflictual romantic relationships. Probably because their relationship goals involve achieving a high level of intimacy and maximal responsiveness from their partners, they tend to view their conflict interactions in a more positive light than other individuals—noticing not only the negative side of conflict, but also its more positive, intimacy-promoting aspects (Fishtein, Pietromonaco, & Barrett, 1999; Pietromonaco & Barrett, 1997). With regard to perceptions of intimacy in their social interactions, preoccupied individuals are less likely than secure individuals to report intimacy in their relationships and to feel understood, validated, and cared for by others (Grabill & Kerns, 2000). Thus, although preoccupied individuals desire intimacy, they may have difficulty developing and maintaining the intimacy they desire because of their anxiety about having their needs met (which may lead them to be less responsive to the needs of others and use ineffective intimacy-seeking strategies), and because they may fail to appreciate the level of intimacy they have obtained at each stage in their relationships.

It is important to mention that patterns of findings for preoccupied individuals have been less clear (sometimes apparent and sometimes unrelated to the various constructs of interest) than those obtained for individuals characterized by the other attachment styles. The inconsistent findings for preoccupied–anxious individuals are supportive of the notion that they may have the desire to engage in situationally appropriate intimacy-related behaviors (e.g., willingness to self-disclose, comfort with physical intimacy, and desire for interdependence); however, their efforts may sometimes be counterbalanced or interfered with by their insecurities related to fear of rejection. It is also worth noting that because preoccupied attachment is the least common attachment style, inconsistent findings may also be due to low statistical power.

*Dismissing Avoidance and Intimacy.*² Dismissing avoidant individuals are low in attachment-related anxiety but high in attachment-related avoidance. They perceive

² Since Hazan and Shaver's (1987) original formulation of adult attachment styles, the conceptualization and measurement of adult attachment has shifted from the original three-category model (secure, anxious, avoidant), to a four-category model (secure, anxious, dismissing avoidance, fearful avoidance). The primary difference between these models is the identification of two forms of avoidant attachment in the four-category model. As a result of these changes in the field, some studies report results for a single "avoidant" style and others report results for "dismissing avoidants" and "fearful avoidants." In our review of this literature, we describe results for the single "avoidant" category under the heading of "dismissing avoidant" because the dismissing avoidant prototype most closely matches the original "avoidant" category. Furthermore, contemporary work on adult attachment no longer uses a categorical approach; most scholars now use a dimensional approach in which individual differences in attachment style are assessed along two continuous dimensions of "attachment-related anxiety" and "attachment-related avoidance." Once again, in our review of this literature, we discuss findings related to "attachment-related avoidance" under the heading of "dismissing avoidance," unless the authors conducted special analyses in which they identified differential effects for individuals who fit the fearful versus dismissing prototype.

attachment figures as being generally unreliable, unavailable, and uncaring; however, they view themselves as being worthy and adequate individuals, and as being invulnerable to negative feelings. They maintain a positive self-image in spite of previous rejection from attachment figures by denying attachment needs, downplaying the importance of close relationships, placing much value on independence and self-reliance, distancing themselves from others, and restricting expressions of emotionality (Bartholomew, 1990; Bartholomew & Horowitz, 1991; Rothbard & Shaver, 1994). Therefore, dismissing avoidants tend to be compulsively self-reliant, and their relationships tend to be characterized by low levels of commitment and interdependence. Although avoidant individuals report a high sense of self-worth, they lack clarity or credibility in discussing close relationships (Bartholomew, 1990; Bartholomew & Horowitz, 1991). The dialectic between intimacy and independence for both avoidant styles appears to be heavily pulled toward independence over intimacy, with the major difference being that dismissing avoidant individuals claim not to want or need intimacy, whereas fearful avoidant individuals admit that they want it but are concerned about rejection (see below). Consistent with this argument, Mashek and Sherman (chap. 19, this volume) found that when adults were asked to rate their actual level of closeness and their desired level of closeness in their current relationship, individuals who were high in attachment-related avoidance but low in attachment-related anxiety (the pattern associated with dismissing avoidance) wanted much less closeness than they currently had. In contrast, those who were high in avoidance and high in anxiety (the pattern associated with fearful avoidance) reported wanting much more closeness.

Issues of closeness and distance (and struggles over this issue) are also salient for avoidant individuals who are characteristically uncomfortable with intimacy (Feeney, J. A., 1999; Pistole, 1994). Avoidant individuals' discomfort with intimacy and closeness is apparent in their use of distancing strategies (as opposed to support-seeking strategies) when coping with stressful situations (Mikulincer et al., 1993; Mikulincer & Florian, 1995; Fraley & Shaver, 1998; Ognibene & Collins, 1998; Simpson et al., 1992), their low levels of self-disclosure, their increases in negative emotion following the disclosure of others (Bradford, Feeney, J. A., & Campbell, 2002; Mikulincer & Nachshon, 1991), and, compared to secure and preoccupied individuals, their lower likelihood of using touch to express affection or seek care from relationship partners, and their greater aversion to touch (Brennan et al., 1998). Avoidant individuals also appear to be uncomfortable with intimate sexual contact as evidenced by their tendency to separate sex and love. For example, avoidant individuals are more likely than secure individuals to engage in "one-night stands" and to have sex outside of their primary relationship (Brennan & Shaver, 1995; Hazan, Zeifman, & Middleton, 1994, as cited in Feeney, J. A., 1999). They also tend to have more accepting attitudes toward casual sex (Feeney, J. A., Noller, & Patty, 1993) and are more likely to endorse the idea that sex without love is pleasurable (Brennan & Shaver, 1995).

Characteristic of avoidant individuals is their tendency to pull away from partners as their levels of distress increase (Collins & Feeney, B. C., 2000; Fraley & Shaver, 1998; Simpson et al., 1992). For example, Simpson et al. (1992) showed that as the anxiety level of avoidant individuals rises, they show more resistance to touch from their partners. When in the caregiving role, they are generally unresponsive, controlling, insensitive, and unlikely to provide physical comfort (Feeney, J. A., 1996; Feeney, B. C., & Collins, 2001; Kuncé & Shaver, 1994; Simpson et al., 1992). Their caregiving pattern reflects underlying motives including a dislike of distress and perceptions that the partner is too dependent and difficult (Feeney, B. C., & Collins, 2003). Avoidant individuals appear to experience negative emotion when their partners display behaviors that threaten their ability to avoid intimacy.

When conversing with close relationship partners, they exhibit (in comparison to secure and preoccupied individuals) lower levels of receptivity, gazing, facial and vocal pleasantness, interest, and attentiveness (Guerrero, 1996). Similar to anxious individuals, avoidant individuals are less expressive when interacting with dating partners (Tucker & Anders, 1998), they use less adaptive conflict resolution strategies (Levy & Davis, 1988; Pistole, 1989; Simpson et al., 1996), and they show deficits in the ability to decode a close relationship partner's nonverbal behavior and feelings (Noller & Feeney, J. A., 1994; Tucker & Anders, 1999). In addition, compared to secure and anxious-ambivalent adults, avoidant adults report lower levels of intimacy, enjoyment, promotive interaction, and positive emotions, and higher levels of negative emotion in their daily interactions with others (Tidwell, Reis, & Shaver, 1996). In fact, Anders and Tucker (2000) have shown that a lack of interpersonal competence and skills may be an important reason why avoidant individuals have difficulty developing satisfying social support networks (see also Feeney, B. C., & Collins, 2003, for evidence indicating that avoidant individuals cite a lack of skills as a reason for not supporting their relationship partners). For example, by not opening up to others and communicating their needs, avoidant individuals reduce the likelihood that close, supportive relationships will develop and endure. Consistent with this idea, in a prospective study of young adults, Collins, Cooper, Albino, and Allard (2002) found that individuals who were high in avoidance during adolescence went on (six years later) to develop relationships that were less satisfying and less intimate, as reported by both members of the couple. For example, avoidant respondents described their relationship as low in intimacy, low in mutual disclosure, low in effective problem-solving communication, and high in conflict.

It is important to note, however, that these overt distancing strategies are characteristic of avoidant individuals primarily in situations in which the attachment system is activated (when the self or relationship partner is feeling alarmed or distressed). At lower levels of anxiety (when the attachment system is not activated), avoidant individuals do not distance themselves, and they do seek and provide support and establish intimacy with others. Thus, these individuals cannot be characterized as cold, distant, or aloof in general. It is distress or anxiety that appears to impede the establishment of proximity and intimacy in dyadic interactions involving avoidant individuals. It appears that distressed adult partners (similar to distressed infants in the developmental literature) present significant relationship problems for avoidant individuals. Because the proximity needs of avoidant individuals have been frequently frustrated and rarely satisfied, these individuals may overcompensate with proximity-seeking in nonthreatening circumstances.

Although it may appear (on the basis of self-reports and overt behaviors) that intimacy and closeness is not important to avoidant individuals, these individuals (similar to avoidant children in the strange situation) do exhibit physiological arousal when separated from their relationship partners in stressful situations (Feeney, B. C., & Kirkpatrick, 1996), they are more likely than secure individuals to respond to physical separation from relationship partners with feelings of insecurity (Feeney, J. A., 1998), and they appear to be somewhat more calmed than even secure individuals by supportive partner comments, which indicates that avoidant individuals do benefit from support and do have intimacy needs (Simpson et al., 1992). Fraley, Davis, and Shaver (1998) have shown that although dismissing adults attempt to avoid attachment-related emotions and are able to block emotional responses (or prevent them from surfacing) when asked to think about separation and loss, they show substantial arousal when made to focus on such thoughts. If dismissing-avoidant individuals are truly dismissing of attachment and intimacy, we would not expect them to react physiologically to the presence versus absence of a romantic partner or to be calmed by a partner's conversational behavior when feeling stressed. Thus, even

avoidant individuals benefit from intimacy and closeness and appear to need it (albeit not overtly) even in threatening situations.

With regard to cognitions about relationship events and behaviors that may have important implications for the closeness and intimacy experienced within the relationship, dismissing individuals are more optimistic than fearful or preoccupied individuals (but less optimistic than secure individuals) in their explanations for their partner's transgressions—perhaps reflecting their positive views of themselves and their lack of dependence on relationship partners (Collins, 1996; Collins et al., 2003). However, relative to secure individuals, they are much more likely to draw negative inferences about their partner's caring behavior (e.g., to believe that their partner was motivated by selfish rather than altruistic concerns; Collins et al., 2003) and to view their partner's ambiguous support attempts as relatively unhelpful and unsupportive (Collins & Feeney, in press). Thus, dismissing individuals appear to draw inferences that protect them from the negative consequences of their partner's transgressions, but may also undermine their ability to benefit from their partner's kindness and goodwill.

Because avoidant individuals' behaviors do not always match their underlying feeling, it is interesting to speculate about the factors that may be driving their behaviors with regard to establishing closeness and intimacy in a relationship—particularly with regard to the degree to which cognition or emotion drives their behavior when the attachment system is activated. That is, there are likely to be individual differences in the degree to which emotional versus cognitive cues drive intimacy-related behaviors—particularly in stressful situations. It is possible that the behavior of secure individuals is the result of balanced attention to both cognitive and affective cues such that a focus on either will lead to the same overt behavior. That is, in stressful situations they will feel emotionally distressed and perceive the situation as one in which intimate contact with an attachment figure would be appropriate and helpful in coping with distress. However, it seems likely that the behavior of insecure individuals may be driven either by their cognitive response to the situation or their emotional response to it—which may or may not correspond—and that one set of cues will take precedence over the other in determining the behavioral outcome. For example, because dismissing individuals value self-reliance and seek to minimize interdependence, they may over rely on their cognitive cues and may tend to suppress or minimize the importance of attending to their emotional cues. Therefore, their cognitions about the importance of self-reliance may not match their desire for closeness to, and support from, their attachment figures—at least in stressful situations when their attachment systems have been activated. Therefore, cognitive cues would most likely drive the behavior of dismissing individuals because they are likely to suppress the opposing affective component. However, the opposite may be true for anxious individuals who may over rely on their emotional cues. As a result, they may indiscriminately desire and seek closeness and intimacy, even when their pessimistic cognitions concerning the responsiveness of others, if considered, would contradict those feelings. Additional research is greatly needed to uncover the mechanisms that underlie the intimacy-seeking and distancing behaviors of individuals with different attachment characteristics—particularly insecure individuals as their behavioral strategies for terminating the activation of the attachment system are not as direct or as easily understood as the behaviors of secure individuals.

Fearful Avoidance and Intimacy. Finally, fearful avoidant individuals are high in both attachment-related anxiety and avoidance. Like dismissing individuals, they perceive attachment figures as being generally unreliable, unavailable, and uncaring; however, they differ from dismissing individuals in their lower sense of self-worth. Fearful individuals view themselves as being unlovable, emotionally distant,

and mistrusting. They desire social contact and intimacy, but they avoid putting themselves in situations where they feel vulnerable to rejection (Bartholomew, 1990; Bartholomew & Horowitz, 1991). Thus, the approach-avoidance conflict they experience is typically resolved in favor of avoidance of close relationships. Fearful individuals tend to experience subjective distress and disturbed social relationships characterized by a hypersensitivity to social approval. Because they fear rejection and actively avoid social situations and close relationships in which they perceive themselves as vulnerable to rejection, they undermine the possibility of establishing satisfying, intimate social relations which could serve to modify their views of close relationships (Bartholomew, 1990; Bartholomew & Horowitz, 1991).

Because fearful individuals are high in both anxiety and avoidance, they have some characteristics in common with both preoccupied and dismissing individuals regarding their approach to intimacy. Their caregiving is characterized by low levels of physical contact, sensitivity, and responsiveness (similar to dismissing avoidants), but they also engage in relatively high levels of compulsive over-caregiving (Carnelley, Pietromonaco, & Jaffe, 1996; Feeney, J. A., 1996; Kuncze & Shaver, 1994). The caregiving patterns of the two avoidant types (dismissing and fearful) support Bartholomew and Horowitz's (1991) hypothesis that the two styles are similar in their avoidance of intimacy, but differ in their need for others' acceptance and approval and in their desire for intimate social contact. Fearful individuals are likely to be similar to dismissing avoidants in their use of distancing strategies when coping with stressful situations (Mikulincer et al., 1993; Mikulincer & Florian, 1995; Ognibene & Collins, 1998; Simpson et al., 1992) and in their low levels of self-disclosure (Mikulincer & Nachshon, 1991; however, see Grabill & Kerns, 2000 for an exception). When having conversations with a close relationship partner, fearful avoidants are vocally anxious and, compared to individuals characterized by the other attachment styles, they sit farthest from the partner, they display the least conversational fluency, and they have the longest response latencies (Guerrero, 1996). Similar to dismissing avoidant individuals, they are less likely than secure or preoccupied individuals to use touch to express affection or seek care from relationship partners, and they are more likely to report touch aversion (Brennan, Wu, & Loev, 1998). Interestingly, however, they report a desire for more touch equivalent to that of preoccupied individuals. Perhaps fearful adults have historically received more insensitive and controlling than affectionate forms of touch from relationships partners. If so, their reports may reflect their aversion to insensitive forms of touch and a desire for more affectionate touch. Alternatively, because avoidant individuals report histories with relatively unaffectionate caregivers, they may desire touch yet, at the same time, they may feel uncomfortable with the unfamiliar experience.

With regard to cognitions about relationship events and behaviors that may have important implications for the closeness and intimacy experienced within the relationship, fearful individuals (similar to preoccupied individuals) tend to make relationship-threatening attributions for their partner's transgressions (Collins, 1996; Collins et al., 2003) and (similar to dismissing individuals) tend to draw negative inferences about their partner's caring behavior (Collins et al., 2003). In addition, when faced with a stressful laboratory task, fearful individuals are much more likely than secure individuals to view their partner's support attempts as hurtful and unsupportive, especially when those attempts are somewhat ambiguous (Collins & Feeney, *in press*). Thus, fearful individuals tend to perceive their relationship experiences in ways that are likely to impede the continuance or establishment of intimacy. We suspect that fearful individuals' cognitions about the hazards of relationships frequently override their emotional desires for intimate contact. However, in some situations in which they perceive rejection to be less likely (e.g., in situations in which the relationship partner is in need of support or care), their behavior is likely to be guided by

their emotional desire for intimate contact. The compulsive caregiving they exhibit in some of these "safer" situations may reflect an overcompensation for their frequent lack of intimate contact with relationship partners.

Concluding Comments Regarding Individual Differences. It is important to remember that attachment patterns are presumed to develop as an adaptation to the particular caregiving environments that individuals are currently experiencing or have experienced in the past (George & Solomon, 1999; Main, 1990). That is, all individuals, at some point in their lives obtain knowledge about the most effective ways of terminating attachment system activation in times of distress, of meeting attachment needs, and of deriving security and protection from attachment figures. For example, avoidant children have learned that overt expressions of distress and contact-seeking are frequently rebuffed; therefore, they developed an attachment strategy of keeping the caregiver or attachment figure in check while inhibiting direct expressions of need for intimate contact. This is an effective strategy for an avoidant child's particular caregiving environment as he or she is able to maintain a sufficient amount of intimacy with, and proximity to, the attachment figure to feel safe while not alienating the attachment figure. This behavior probably does not reflect the child's ideal degree of intimate contact with the attachment figure, but it has proven to be the best strategy for the particular caregiving environment in which the child has been placed. Similarly, preoccupied/anxious children have learned that clinging is an effective strategy for maintaining proximity to attachment figures, given the inconsistent and independence-restricting caregiving environment in which they have been placed.

Attachment theorists (e.g., Main, 1990) have proposed that although security is the ideal attachment pattern, anxious and avoidant attachment are alternative patterns that allow the child to maintain a sufficient amount of proximity to (or intimacy with) the caregiver. These alternative attachment strategies are thought of as "good enough" strategies for deriving a sufficient amount of security from, and intimate contact with, the attachment figure. Although these strategies leave insecure children more vulnerable than secure children, they afford the insecure child some degree of proximity to the attachment figure on whom the child depends for protection (George & Solomon, 1999).

If we extend this thinking to adult attachment patterns, it is likely that adults have either (a) continued the strategies for deriving protection and security from attachment figures they learned earlier in life, which are strategies they employ without having reexamined their adequacy for new caregiving environments; (b) developed the most adaptive attachment patterns and strategies that fit their current adult experiences with attachment figures; or (c) selectively enter adult relationships or caregiving environments for which their learned attachment strategy is appropriate. Therefore, even in adulthood, each attachment strategy (whether secure or insecure) affords the individual some degree of acceptable proximity to (or intimate contact with) the attachment figure. For example, the research evidence reviewed above indicates that it is not the case that avoidant adults wish to have no intimacy in their lives. To the contrary, they do appear to derive security from their relationship partners, and they do seek intimacy when the attachment systems (of both the self and the partner) are deactivated. They appear to have learned that they can most effectively derive comfort and security from relationship partners if they do not express their attachment needs directly and risk alienating the partner or attachment figure. Thus, from an attachment perspective, some degree of intimacy is important for all individuals' sense of security and well-being, and most adults appear to obtain it and benefit from it to some degree. Adult attachment patterns may have evolved as "good enough" strategies for maintaining a safe degree of intimate contact with attachment figures and for maintaining adequate levels of security within the context of the particular caregiving environment in which the individual is placed. All individuals learn to regulate

emotions (and thereby terminate attachment system activation) by maintaining a certain degree of closeness and proximity to the caregiver or attachment figure. Although the insecure strategies are not ideal for developing and maintaining the type of close, intimate relationships that secure individuals enjoy, they are likely "good enough" strategies for maintaining an acceptable degree of intimacy to attachment figures. In adulthood, these strategies are adaptive if they match the individual's current caregiving environment. If not, they may prevent the experience of a deeper intimate connection with relationship partners.

Although a secure attachment style is not the only one that allows individuals to derive security and closeness, it does appear that closeness and intimacy are more easily and ideally obtained for those who enter their relationships with secure working models of self and others. Secure individuals appear to have the closest, most ideally intimate relationships in that they are comfortable with expressing their thoughts and feelings, comfortable with physical forms of intimacy, and able to give and receive care as needed. Preoccupied/anxious individuals appear to have relationships that are not intimate in the ideal sense in that their insecurities and learned strategies for maintaining closeness to attachment figures are likely to frustrate and tax their relationship partner. Although the preoccupied-anxious attachment strategy allows them to obtain some degree of intimate contact with the attachment figure, the anxiety experienced by these individuals (and the resulting behavioral manifestation of this anxiety) is likely to impede the deeper intimate connection they crave. Avoidant individuals appear to have the least close and intimate relationships. They behaviorally appear not to let the partner in—perhaps because too much intimacy and closeness has been dangerous in the past; however, the research evidence indicates that even avoidant individuals derive some degree of security from their close relationship partners. They have simply learned not to overtly seek intimate contact—particularly in times of distress.

In conclusion, although we have learned a great deal about the ways in which intimacy is expressed and received in the context of adult close relationships as a function of the relationship partners' attachment characteristics, the intimacy dynamics surrounding each attachment pattern (particularly the insecure attachment patterns), as well as the interactive effects of various combinations of attachment patterns, require some unraveling in future research. It remains to be seen if attachment strategies in adulthood (as in childhood) can be viewed as "good enough" adaptations to particular caregiving environments, and it remains to be discovered exactly how good is "good enough" with regard to the development and maintenance of well functioning relationships in adulthood.

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