Attachment Styles in Romantic Relationships and Perceived Support in Postpartum Couples

Saul McLeod, PhD, MRes, Katherine Berry, ClinPsyD, PhD,
Peter Taylor, ClinPsyD, PhD, Alison Wearden, CPsychol, PhD,
Lucy Oakes, MSc Clinical and Health Psychology

The transition to parenthood is a significant life event that presents various challenges. Adequate support for both parents is crucial, as insufficient support can lead to negative outcomes. While insecure attachment has been identified as a risk factor during this period, there is limited research on how dyadic attachment styles influence perceptions of received support. This study investigates the relationship between momentary perceptions of support matching and attachment styles among parental dyads using the experience sampling method (ESM) to reduce retrospective bias. For seven days, 40 mothers of infants aged 3-12 months completed daily self-report measures relating to desired and received support from their romantic partner. Multilevel analyses revealed that securely attached mothers perceived greater support matching compared to those with insecure attachment styles. The attachment style of the support provider (father) did not significantly affect the mother's perceptions of support adequacy. These findings highlight the importance of attachment security in shaping support perceptions and suggest

that attachment-based interventions could improve support experiences for new parents. Future research should explore the nuances of attachment pairings and their impact on support dynamics within couples. Interventions following childbirth should focus on improving maternal attachment security to enhance support matching and well-being for new parents.

Keywords: attachment style, romantic attachment, postpartum, support

The transition to parenthood is a significant, time-bound life event. Mothers and their partners experience similar challenges, including the demands of adapting to parenthood, learning new skills relating to infant care, and the emotional burden of deprived sleep and rest. Accordingly, there are numerous opportunities for both desired and received support. It is important to assess if a lack of adequate support can predict specific outcomes, such as postpartum depression and maternal efficacy (as these were under-addressed by previous studies). Approximately 25% of women experience elevated symptoms of depression postpartum (O'Hara & Swain, 1996), and 5% to 8% of mothers are estimated to meet diagnostic criteria for an anxiety disorder (Ross & McLean, 2006). Insecure attachment has been established as a risk factor for the well-being of mothers and their families during the transition to parenthood (Ikeda et al., 2014).

Attachment

Attachment behavior comprises a set of strategies activated during times of stress to achieve proximity and feel security with a person deemed better able to deal with the world (Ainsworth et al., 1978; Bowlby, 1988). Cutrona and Suhr (1992) propose that support needs are derived from the objective characteristics of a situation, such as stressor controllability. However, attachment theory posits that individual differences in attachment style are an important influence on support needs and the interpretations of support by a recipient (Collins & Feeney, 2004).

Attachment style is a persistent way of relating to significant others, known as attachment figures. During childhood, interactions with attachment figures

provide an individual with information that forms a set of expectations and beliefs regarding the self ("Am I worthy of love?") and others ("Will this person support me during times of distress?") in relationships. These internal working models of the self and others in relationships form the basis of an individual's attachment style, comprising mental and emotional representations that guide behavior and regulate affect during stress (Collins & Allard, 2001; Collins & Read, 1994). Individuals with a positive view of the self and others have a secure attachment style, and those with negative beliefs regarding the self or others hold an insecure attachment style. Early models are typically reinforced via interactions with others over time and become strengthened and resistant to change, operating mainly at an unconscious level of awareness (Rothbard & Shaver, 1994; Siegel, 1999). Although later experiences have the potential to modify attachment representations (Fearon & Roisman, 2017; Fraley & Roisman, 2019; Theisen et al., 2018), attachment styles formed in childhood can be carried forward to adulthood, with romantic partners becoming the primary attachment figure in adult close relationships (Fraley, 2002; Trinke & Bartholomew, 1997).

Previous literature indicates that attachment style can influence an individual's perception of received support (Kane et al., 2007; Mcleod et al., 2020; Moreira et al., 2003). Received support typically occurs when an individual acknowledges an act of support from another person. Support recipients with secure attachment styles tend to interpret social transactions more favorably and perceive their partners as better caregivers (Kane et al., 2007). Insecure adults tend to exhibit a negative bias in relation to perceptions of received support, perceiving ineffective support from their partners and often recalling a partner's helpful behavior more negatively (Brock & Lawrence, 2009; Collins & Feeney, 2004; Don & Hammond, 2017). Individuals with an insecure attachment style doubt whether they can rely on their partners for support. Therefore, during adversity, their working models can amplify distress and feelings of insecurity (Mikulincer & Shaver, 2003).

Romantic Attachment Dyads

Integrating a dyadic (interconnected) approach to attachment theory is useful for identifying whether the partner's attachment influences a support recipient's perceptions and if recipients in couples with specific attachment pairings (e.g., secure support provider and insecure recipient) are more likely

to perceive ineffective support from a romantic partner. For example, Conde et al. (2011) investigated how marital support and attachment style combinations predicted symptoms of depression and anxiety in both members of a couple expecting a baby. The Attachment Style Interview (ASI; Bifulco et al., 2002) was administered to assess a person's willingness to access and utilize emotional support and to provide a categorization of adult attachment style based on a summary score of three close relationships (partner and two others named as very close). In addition, measures of depression and state anxiety were recorded during the second trimester and three months postpartum. The findings showed no significant effects of interactions between caregivers and recipients' attachment styles (secure vs. insecure) and the occurrence of active emotional support (high vs. low) for the incidence of recipients' anxiety and depression symptoms. However, Conde et al. (2011) assessed active emotional support when an individual had confided a need for emotional care. This is problematic, as significant others can provide emotional support without explicit assistance requests (High & Scharp, 2015). A further limitation was that social support was measured cross-sectionally, whereby recollection of support experiences could be prone to retrospection bias (Fahrenberg et al., 2007).

Three studies have examined how attachment predicts perceptions of received support in relation to support adequacy, although due to different conceptualizations, it is difficult to make comparisons (Brock & Lawrence, 2014; Mcleod et al., 2021). Rini et al. (2006) distinguished between the different types of adequate support (e.g., emotional, informational) experienced by pregnant women but did not discriminate between over and under-support nor anxious or avoidant attachment styles (attachment was conceptualized as an index of security). Attachment security was found to be predictive of positive appraisals of adequate support, which in turn were associated with lower levels of prenatal anxiety. Brock and Lawrence (2014) asked married couples to report on global perceptions of over or under-support during five time points. Anxious attachment predicted under-provision of received support in both genders and avoidant attachment predicted overprovision of received support in men but under-provision of received support in women. Mcleod et al. (2021) examined how attachment styles predict perceptions of adequate and inadequate support (i.e., over or under) in first-time mothers. Both global measures and specific types of support (emotional, informational, physical, and tangible) were tested in relation to outcome variables, including depressive

symptoms, maternal efficacy, and relationship satisfaction. Findings revealed that both attachment anxiety and avoidance were associated with negative perceptions of global support adequacy. Symptoms of depression increased with perceptions of being under-supported, whereas adequate support predicted a decrease in depression symptoms. Being physically under-supported predicted a decrease in maternal efficacy, which suggests that new mothers need physical comfort (e.g., hugs and kisses), possibly to reassure them of their maternal competence. Neither adequate nor inadequate support was associated with perceptions of relationship satisfaction, although this study only measured support on a single occasion, and it may take time for the effects of support to become salient.

However, we must be cautious when interpreting these findings as these studies only measured the recipient's attachment style. This is limiting as support is an interpersonal process and should be studied at the dyadic level (Collins et al., 2006). The support provider is pertinent as attachment theory predicts individual differences in support provision. For example, secure attachment is associated with responsive and sensitive acts of caregiving behavior, and insecure individuals are prone to either excessive or dismissive acts of support (Collins & Feeney, 2000). There is debate in the literature as to whether the attachment style of the support provider influences the recipient's perception of support received.

Findings from a daily diary study indicate that the attachment style of the support provider (a romantic partner) does not influence the recipient's perception of receiving responsive support during a positive event (Gosnell & Gable, 2013). Alternatively, Kane et al. (2007) reported that support recipients with insecure partners were less satisfied in their relationships and perceived their partners to be less caring and supportive. However, this sample was comprised primarily of young adult couples, and these findings have not been replicated in studies exploring married couples. For example, Brock and Lawrence (2014) reported that wives of husbands with avoidant attachment perceived to receive too much support relative to what they desired (i.e., overprovision of support). This is surprising as attachment avoidance is associated with a dismissive caregiving style, which is a precursor for a support recipient to experience being under-supported. However, it is not clear if dismissive acts of caregiving that typically characterize avoidant attachment are related to support as a global construct or are specific to subtypes of support, such as emotional (e.g., providing reassurance and affection) or tangible (e.g.,

providing direct or indirect practical assistance to solving a problem; Feeney & Hohaus, 2001).

Support Adequacy

We propose that what constitutes support effectiveness (e.g., high vs. low) must extend beyond assessing the frequency at which recipients report receiving support. Attachment representations influence the perception of support, implicitly biasing preferences for the amount of support a person needs and how they interpret received support. This means that it is not enough to measure the frequency of support received; researchers must also consider the amount of support desired. For example, the optimal matching theory of social support (Cutrona & Russell, 1990) and research on support adequacy (Brock & Lawrence, 2009) posit that effective support occurs when individuals receive support that matches their needs. When there is a mismatch between an individual's preference for support and the amount of support they receive, a support recipient experiences a support gap.

The Present Research

The aim of this study is to address the gap in research concerning dyadic attachment and perceptions of support matching. Where previous research has explored perceptions of support cross-sectionally, our study is the first to examine momentary perceptions of support matching in relation to dyadic attachment style pairing. The experience sampling method (ESM) records how individuals think, feel, and behave during their daily lives, in which participants are prompted at random or preset intervals to answer brief questionnaires regarding their current experiences. Experience sampling is helpful as it provides the opportunity to detect processes of needing and receiving social support close to the time of the actual occurrence, thereby reducing retrospective bias associated with generalized measures of support (Fahrenberg et al., 2007).

This study will examine dyadic attachment style pairing in relation to momentary perceptions of support matching in a population of mothers. Mothers experience a period of significant interpersonal change during the transition to parenthood (Taubman-Ben-Ari, 2019), and lack of support has been identified as a risk factor for postpartum mothers (Leahy Warren, 2005).

In addition, we will test for partner effects to examine how the attachment of a caregiver (the father) influences momentary support perceptions of the recipient (the mother) within a romantic dyad. We have decided to investigate specific types of support, including emotional and tangible, which can provide a nuanced explanation of the association between attachment styles and support perceptions. Based on previous findings, we predict support recipients with an insecure attachment style are more likely to perceive that the support they receive does not match their needs, while securely attached recipients are more likely to report receiving matched support.

We expect the attachment style of a support provider to be related to the recipient's perceptions of received support; specifically, recipients partnered with a secure caregiver will be more likely to perceive receiving matching support, while those affiliated with an insecure partner are more at risk of a mismatch in support. We expect dyadic attachment pairings to provide a more nuanced picture of when the attachment style of the provider is more important. For example, by examining the attachment style of both partners, we hope to clarify if the attachment style of the mother or the partner is more important in determining whether the mother finds that support matches her needs. We expect support recipients in dual-secure relationships to report a match regarding the amount of support needed and that received.

We hypothesize that support recipients with an insecure attachment will experience a mismatch of support when partnered with a support provider who also holds an insecure attachment style. We expect the caregiving skills of support providers with secure attachment to be enough to attenuate the recipients' bias for perceiving negative support when they are insecurely attached. Therefore, a mixed secure/insecure couple will have better-matched support than an insecure/insecure couple.

Method

This paper used the same sample examined in Mcleod et al. (2021b), though the present investigation addressed different research objectives. Each mother and father dyad was assigned an ID number. Before the ESM procedure, mothers completed the ESM protocol, and both members of each parental dyad completed self-report measures.

Participants

Participants were 80 parents of babies between three and twelve months of age, recruited by convenience sampling of mother and baby groups on Facebook between June and August 2019. Prospective participants were asked to contact the principal investigator (Saul Mcleod), who emailed participant information sheets to mothers and fathers separately and answered questions relating to study participation. Potential participants were screened by phone or e-mail to determine whether they met the following inclusion criteria: 1) parent with a child between 3 - 12 months; 2) married or living together with their romantic partner; 3) at least 18 years of age; 4) English speaking, and the mother required; 5) use of a mobile phone with internet access. Although participation in the study was not restricted by sexuality, all couples comprised traditional heterosexual couples of a mother and father ($n = 40$ dyads).

Measures

Attachment Styles

Attachment styles were assessed using postal questionnaires completed before the ESM phase of the study. The Experiences in Close Relationships-Revised Inventory (ECR-S**;** Wei et al., 2007) is a 12-item self-report scale designed to assess attachment styles avoidance (six items) and anxiety (six items) in general experiences of romantic relationships. Attachment anxiety involves an excessive need for interpersonal approval and fear of rejection from significant others, and attachment avoidance is concerned with an excessive need for self-reliance and fear of emotional closeness or dependence (Brennan et al., 1998). The scale's reliability was good, with a Cronbach's alpha of .69 for anxiety, .76 for avoidance for mothers,.73 for anxiety, and .73 for avoidance for fathers. Following procedures outlined by Fraley (2012), the scores pertaining to the styles of attachment avoidance and anxiety were used to categorize participants into a specific attachment category. Individuals were classified as insecurely attached when either both or one of their attachment style scores were the same or higher than the median for their parental group, namely mothers or fathers. When both attachment avoidance and anxiety scores were below the median average, individuals were classified as securely attached.

ESM Items

Four items adapted from the Support in Intimate Relationships Rating Scale-Revised (SIRRS-R; Barry et al., 2009) assessed desired and received support. Participants were asked to rate how much support they had needed and received since the last ESM alert using a 5-point Likert scale, from not at all (1) to extremely (5).

Desired support. Two items were used to assess desired support: emotional, "I have needed someone to comfort me emotionally," and tangible, "I have needed someone to help me with the things I needed to do."

Received support. Two items were used to assess received support: emotional, "My partner has comforted me emotionally," and tangible, "My partner has helped me with the things I needed to do."

Procedure

ESM Briefing

All mothers were given a thorough briefing regarding the ESM sampling schedule, which included an email requesting them to log in to the ESM item website via their mobile phone using their ID number and a predetermined password. The purpose of this procedure was to check if the mobile phone's internet browser remembered the login details for subsequent attempts. Mothers were also asked to complete a practice session to familiarize themselves with the ESM procedure.

The experience sampling procedure was implemented using a web-based application (surveysignal.com; Hofmann & Patel, 2015), which used short message service (SMS) messages as signals and reminders. The ESM items were accessed by mothers online via a website hosted by the University, and access was restricted by ID number and password. Each SMS included the link to the website, and participants could only click on this link once. After that time, it was deactivated to prevent participants from completing ESM items beyond the signal time limits.

Seven-day ESM phase

Mothers were asked to choose a study week to represent their daily lives, excluding weeks that included holidays, visits, or other special events. During the study week, participants were randomly signaled six times a day for seven consecutive days, between 9 a.m. and 9 p.m., with at least one hour between receiving SMS signals. Therefore, each participant could provide up to 42 records throughout the experience-sampling period. After an SMS was received, each participant had up to 60 minutes to complete the ESM items, and an SMS reminder was sent after 30 minutes if a participant had not clicked on the study link in their original signal. After 60 minutes, the website link within the SMS was deactivated. Mothers were contacted on the first day of the ESM phase to check for compliance with the procedure and were encouraged to contact the researcher if they had any subsequent questions or were not receiving SMS on their phones. After the ESM phase, participants were debriefed, and couples received a £40 shopping voucher in exchange for their voluntary participation.

Statistical Analysis

Experience sampling data share cross-sectional time-series characteristics containing a hierarchal structure, whereby measures are clustered in three levels: Beeps are nested in days and nested within participants (Bolger et al., 2003). Therefore, multilevel models were used to test the hypotheses since these account for the hierarchical structure. A total of 1303 out of 1680 recordings were obtained, resulting in an overall 75.5% response rate to the beep. Only one participant responded to less than 50% of their signals, and this data was included in the analysis. This data indicated a high level of compliance with the protocol. Attachment styles were consolidated into a categorical variable ($0 = secure$, $1 = insecure$). Two continuous support matching variables were created for each momentary beep, one for emotional support and the other for tangible support. When corresponding received support and desired support items were endorsed at the same point of the 5-point response scale, the support matching variable was labeled 1. When desired and received support were different values, it was labeled 0.

The XTMIXED command in Stata (version 10, Stata Corp., College Station, TX, USA) was used for all continuous outcome variables, with a random intercept for each participant and each day within participant;

regression coefficients for fixed effects, 95% CI, and *p*-values are reported for all associations between variables within each assessment point. XTMIXED uses all available data and can cope with missing data; mixed-model regression can minimize bias when missing data are random. Simple slopes were tested for all significant interactions at the $p < .05$ level using the margins command in Stata 10 (Dawson & Richter, 2006).

Results

Sample Characteristics

The most common attachment style pairing was between two insecure parent figures, and the least frequent pairing comprised insecure mothers partnered with secure fathers (see Table 1).

Table 1

Relationships Between Mothers' and Fathers' Attachment Styles

Mothers' Classifications	Fathers' Classifications	
	Secure	Insecure
Secure	8	12
Insecure	4	16

Preliminary Analysis

Table 2 contains descriptive statistics relating to the variables in the multilevel model analyses presented below.

Table 2

Descriptive Information for ESM Items Included Within the Multilevel Model Analyses

Variable	Number of observations	Min, Max	Mean (SD)
Need Emotional	1254	1, 5	1.68 (1.12)
Need Tangible	1254	1, 5	2.43 (1.50)
Received Emotional	1253	1, 5	1.66 (1.17)
Received Tangible	1252	1, 5	2.32 (1.17)
Matched Emotional	1251	0, 1	0.63 (0.48)
Matched Tangible	1252	0, 1	0.51 (0.50)

Multilevel Analyses

A multilevel model, or a hierarchical linear model, is a statistical approach used when data has a nested or hierarchical structure. In this study it allows us to analyze how variables at different levels (e.g., individual and group) relate to our outcomes of interest. We chose this method because it accounts for the non-independence of observations within groups.

The results of the multilevel model analyses for attachment styles and perceptions of support matching are presented in Table 3. As predicted, the extent to which mothers' perceptions of emotional and tangible support matched their needs on a momentary basis was associated with attachment security, and insecure attachment style was related to momentary instances of support mismatches. In addition to investigating associations between mother's attachment and support adequacy, we also examined partner effects. Specifically, if the attachment of the support provider (i.e., father) influenced perceptions of support adequacy of the recipient (i.e., mother). Results showed no significant main effects for the relationship between fathers' attachment style and mothers' perceptions of support matches or mismatches at the momentary assessment. Finally, we examined the relationship between dyad attachment pairings and the mothers' perception of support matching. Contrary

to study hypotheses, neither same (i.e., dual-secure or dual-insecure) nor different (i.e., insecure-secure or secure-insecure) mother and father attachment styles combinations predicted mothers' perceptions of support matching.

Table 3

Multilevel Model Analyses for Attachment Styles and Perceptions of Support Matching

	Emotional Support			Tangible Support		
Insecure Styles*	B	SE	*p*	B	SE	*p*
Mother	-.1843706	.0604582	.002	-.1306042	.0539823	. 016
Father	-.0342518	.0724147	. 636	-.0423622	.062344	.497
Dyad	-.0178	.1384348	.898	.089232	.1239019	.471

Note: *This is a comparison of insecure attachment against a reference category of secure attachment.

B is the unstandardized regression coefficient, indicating the change in the outcome variable for each unit increase in the predictor.

SE is the standard error, which measures the precision of the estimate.

Discussion

The primary aim of our study was to examine the relationship between momentary perceptions of support matching and attachment style at the individual, partner, and relational dyad levels in the context of the daily life of mothers. The findings revealed that mothers with a secure attachment style perceived that emotional and tangible support from their partners matched their needs. Those with an insecure attachment style experienced mismatches between the support needed from a romantic partner and the emotional and tangible support received. On an interpersonal level, the attachment style of the father was not associated with the mother's perceptions of support matching, either as a partner effect or when considered with the mother's attachment style as part of a dyad. Although attachment style can shape enacted support transactions, our findings suggest that attachment styles are a pertinent feature of appraising support transactions, implicitly biasing interpretations of received support. Therefore, the objective features of support transactions may be

construed differently depending on the attachment security of the support recipient (Collins & Feeney, 2004). Evidence shows that support recipients with an insecure attachment style may discount or attenuate acts of responsive support from their partner (Collins & Feeney, 2004). This could explain why the attachment style of the support provider did not influence the recipient's perception of support.

Limitations and Future Directions

It could be argued that categorizing attachment into secure and insecure patterns did not capture some subtleties in attachment pairings. For example, we only used two crude categories of secure versus insecure, ignoring the different insecure attachment styles identified in the literature. However, adopting a categorical measure of attachment was the most parsimonious way to examine the data, as examining hypotheses using continuous measures would have resulted in eight analyses and, therefore, increased the type 1 error. Due to a limited sample size, this study could only distinguish between secure and insecure attachment style dyad combinations. Dyadic attachment styles might still be important for support perceptions in intimate relationships, and future research would benefit from differentiating between the three types of insecure romantic attachment proposed by Bartholomew and Horowitz (1991). By conceptualizing attachment styles as a four-category model of secure, preoccupied, dismissive, and fearful, future studies can test additional attachment style pairings to provide a more accurate interpretation.

A further limitation of this study regards assessing the different types of support generally as a single ESM item, which each recipient might interpret differently. It would be useful for future research to capture a more nuanced measurement of emotional and tangible support, perhaps aggregating reports from several items. For example, desired and received emotional support could be operationalized based on findings from the psychotherapy literature, such as non-judgmental listening, responsive touch, and validating feelings (Shaddock, 2000). We expect support providers with a secure attachment to demonstrate adaptive support strategies, and it would be useful for future research to test how each strategy contributes to specific outcomes, such as depression symptoms or relationship satisfaction. Furthermore, because our data relied on self-reports, the support recipient's instances of received support were subjectively interpreted rather than objectively rated by an external observer.

Future studies would benefit from recording the support providers' momentary acts of support provision. This would allow us to test differences between secure and insecure support recipients regarding their acknowledgment of actual support from their partner to assess the degree of recipient bias.

Another limitation of this study was the failure to consider the effect of social context on the expression of attachment styles. For example, the association between attachment styles and perception of support matching may be moderated by social contact (e.g., alone vs. a romantic partner) or social closeness (feeling emotionally close vs. wanting to be alone) when support is received. Findings by Sheinbaum et al. (2015) imply that the emotional and cognitive expression of attachment styles in the moment is influenced by appraisals of interpersonal closeness rather than the presence of social interactions. Finally, although this study was interested in solicited and unsolicited support, future studies should make this distinction when operationalizing support transactions, as this will provide a gradated understanding of how help-seeking and support matching are related. Future research would also benefit from examining the context in which support was enacted.

Conclusion

The present investigation provided a novel contribution by using an experience sampling method to assess the extent to which dyadic attachment style combinations influence the perception of support matching in everyday life. Although there was a relationship between the attachment of the support recipient and their corresponding perceptions of support adequacy, there was limited evidence to suggest that the caregiver's attachment can influence the support perceptions of the recipient. These findings suggest that the attachment security of the support provider is less important than that of the support recipient and that perceptions of support may not be based on objective support transactions. Instead, recipients may selectively attend to information that corresponds to features of their internal model and attenuate information that does not support their beliefs in the worthiness of self and responsiveness of others (Baldwin, 1992). Therefore, interventions to improve support following childbirth should focus on improving maternal attachment security. For example, cognitive behavioral therapies may be beneficial. These therapies first help develop the mother's understanding of how earlier experiences and

attachment patterns impact thoughts and feelings in relationships with partners. Then, they assist in reappraising negative perceptions of support attempts.

Internal working models not only shape enacted support transactions; they also bias how care recipients subjectively interpret support experiences. Internal representations of the self and others are pertinent because they are automatically activated in response to stressful events and subsequently influence how individuals evaluate and appraise their interactions with significant others (Collins & Feeney, 2000; Pierce et al., 1998). As individual differences in attachment are based on working models, objective features of support transactions may be construed differently depending on the attachment security of the support recipient. Indeed, evidence suggests that provider and recipient accounts of support are, at best, only moderately correlated (Abbey et al., 1995; Antonucci & Israel, 1986; Coriell & Cohen, 1995).

Internal models may implicitly alter how individuals process information regarding social support by directing attention and memory systems to organize and filter incoming information (Collins & Allard, 2001; Collins & Read, 1994). Indeed, the literature indicates that many features of social perception are driven by top-down processing whereby existing schemas shape how new information is interpreted (Baldwin, 1992). However, it is also probable that support attempts could be guided by bottom-up data-driven processes embedded in the objective features of the support transactions.

References

Abbey, A., Andrews, F. M., & Halman, L. J. (1995). Provision and receipt of social support and disregard: What is their impact on the marital life quality of infertile and fertile couples? *Journal of Personality and Social Psychology*, *68*(3), 455.

Ainsworth, M. D. S., Blehar, M. C., Waters, E., & Wall. S. (1978). *Patterns of attachment: A psychological study of the strange situation*. Hillsdale, NJ: Erlbaum.

Antonucci, T. C., & Israel, B. A. (1986). Veridicality of social support: A comparison of and network members' responses. *Journal of Consulting and Clinical Psychology*, *54*(4), 432.

Baldwin, M. W. (1992). Relational schemas and the processing of social information. *Psychological Bulletin*, *112*(3), 461. https://doi.org/10.1037/0033-2909.112.3.461

Bartholomew, K., & Horowitz, L. M. (1991). Attachment styles among young adults: a test of a four-category model. *Journal of Personality and Social Psychology, 61*(2), 226. https://doi.org/10.1037//0022-3514.61.2.226

Barry, R. A., Bunde, M., Brock, R. L., & Lawrence, E. (2009). Validity and utility of a multidimensional model of received support in intimate relationships. *Journal of family psychology: JFP: Journal of the Division of Family Psychology of the American Psychological Association (Division 43), 23*(1), 48–57. https://doi.org/10.1037/a0014174

Bifulco, A., Moran, P. M., Ball, C., & Bernazzani, O. (2002). Adult attachment style. I: Its relationship to clinical depression. *Social Psychiatry and Psychiatric Epidemiology, 37*(2), 50–59. https://doi.org/10.1007/s127-002-8215-0

Bolger, N., Davis, A., & Rafaeli, E. (2003). Diary methods: Capturing life as it is lived. *Annual Review of Psychology*, *54*(1), 579-616. https://doi.org/10.1146/annurev.psych.54.101601.145030

Bowlby, J. (1988). *A secure base: Parent–childsfin attachment and healthy human development*. New York: Basic Books.

Brennan, K. A., Clark, C. L., & Shaver, P. R. (1998). Self-report measurement of adult romantic attachment: An integrative overview. In J. A. Simpson, & W. S. Rholes (Eds.), *Attachment theory and close relationships* (pp. 46–76). New York: Guilford Press.

Brock, R. L., & Lawrence, E. (2009). Too much of a good thing: Underprovision versus overprovision of partner support. *Journal of Family Psychology, 23*(2), 181–192. https://doi.org/10.1037/a0015402

Brock, R. L., & Lawrence, E. (2014). Intrapersonal, interpersonal, and contextual risk factors for overprovision of partner support in marriage. *Journal of Family Psychology, 28*(1), 54–64. https://doi.org/10.1037/a0035280

Collins, N. L., & Allard, L. M. (2001). Cognitive representations of attachment: The content and function of working models. *Blackwell handbook of social psychology: Interpersonal processes*, *2*, 60–85.

Collins, N. L., & Feeney, B. C. (2000). A safe haven: An attachment theory perspective on support seeking and caregiving in intimate relationships. *Journal of Personality and Social Psychology, 78*(6), 1053–1073. https://doi.org/10.1037//0022-3514.78.6.1053

Collins, N. L., & Feeney, B. C. (2004). Working models of attachment shape perceptions of social support: Evidence from experimental and observational studies. *Journal of Personality and Social Psychology, 87*(3), 363–383. https://doi.org/10.1037/0022-3514.87.3.363

Collins, N. L., Guichard, A. C., Ford, M. B., & Feeney, B. C. (2006). Responding to need in intimate relationships: Normative processes and individual differences. In M. Mikulincer & G. Goodman (Eds.), *Dynamics of romantic love: Attachment, caregiving, and sex* (pp. 149 –189). New York: Guilford Press

Collins, N. L., & Read, S. J. (1994). Cognitive representations of adult attachment: The structure and function of working models. In K. Bartholomew & D. Perlman (Eds.) *Advances in personal relationships, Vol. 5: Attachment processes in adulthood* (pp. 53–90). London: Jessica Kingsley.

Conde, A., Figueiredo, B., & Bifulco, A. (2011). Attachment style and psychological adjustment in couples. *Attachment & Human Development, 13*(3), 271–291. https://doi.org/10.1080/14616734.2011.562417

Coriell, M., & Cohen, S. (1995). Concordance in the face of a stressful event: When do members of a dyad agree that one person supported the other? *Journal of Personality and Social Psychology*, *69*(2), 289. https://psycnet.apa.org/doi/10.1037/0022-3514.69.2.289

Cutrona, C. E., & Russell, D. W. (1990). Type of social support and specific stress: Toward a theory of optimal matching. In Sarason, B. R., Sarason, I. G., & Pierce, G. R. (Eds.), *Social support: An interactional view* (pp. 319–366). New York: Wiley

Cutrona, C. E., Shaffer, P. A., Wesner, K. A., & Gardner, K. A. (2007). Optimally matching support and perceived spousal sensitivity. *Journal of Family Psychology*, *21*(4), 754. https://doi.org/10.1037/0893-3200.21.4.754

Cutrona, C. E., & Suhr, J. A. (1992). Controllability of stressful events and satisfaction with spouse support behaviors. *Communication Research*, *19*(2), 154-174. https://doi.org/10.1177/009365092019002002

Dawson, J. F., & Richter, A. W. (2006). Probing three-way interactions in moderated multiple regression: development and application of a slope difference test. *Journal of Applied Psychology*, *91*(4), 917–926. https://doi.org/10.1037/0021-9010.91.4.917

Don, B. P., & Hammond, M. D. (2017). Social support in intimate relationships: The role of relationship autonomy. *Personality and Social Psychology Bulletin, 43*(8), 1112–1124. https://doi.org/10.1177/0146167217705119

Fahrenberg, J., Myrtek, M., Pawlik, K., & Perrez, M. (2007). Ambulatory assessment—

Monitoring behavior in daily life settings: A behavioral-scientific challenge for psychology. *European Journal of Psychological Assessment*, *23*(4), 206-213. https://doi.org/10.1027/1015-5759.23.4.20.

Fraley, R. (2002). Attachment stability from infancy to adulthood: Meta-analysis and dynamic modeling of developmental mechanisms. *Personality and social psychology review*, *6*(2), 123-151

Fraley, R. C. (2005). Information on the experiences in close relationships-revised

(ECR-R) adult attachment questionnaire. *University of Illinois Psychology Department Labs*. http://labs.psychology.illinois.edu/~rcfraley/measures/ecrr.htm

Fraley, R. C., & Roisman, G. I. (2019). The development of adult attachment styles: Four lessons. *Current opinion in psychology*, *25*, 26–30. https://doi.org/10.1016/j.copsyc.2018.02.008

Fraley, R. C., & Tancredy, C. M. (2012). Twin and sibling attachment in a nationally representative sample. *Personality and Social Psychology Bulletin, 38*(3), 308–316. https://doi.org/10.1177/0146167211432936

Fearon, R. P., & Roisman, G. I. (2017). Attachment theory: Progress and future directions. *Current opinion in psychology*, *15*, 131-136.

Feeney, J. A., & Hohaus, L. (2001). Attachment and spousal caregiving. *Personal Relationships*, *8*(1), 21-39.

Gosnell, C., & Gable, S. (2013). Attachment and capitalizing on positive events. *Attachment & Human Development*, 15(3), 281–302. https://doi.org/10.1080/14616734.2013.782655

High, A. C., & Scharp, K. M. (2015). Examining family communication patterns and seeking social support direct and indirect effects through ability and motivation. *Human Communication Research*, *41*(4), 459-479. https://doi.org/10.1111/hcre.12061

Hofmann, W., & Patel, P. V. (2015). SurveySignal: A convenient solution for experience sampling research using participants' own smartphones. *Social Science Computer Review*, *33*(2), 235-253. https://doi.org/10.1177/0894439314525117

Ikeda, M., Hayashi, M., & Kamibeppu, K. (2014). The relationship between attachment style and postpartum depression. *Attachment & human development*, *16*(6), 557-572. and postpartum depression. *Attachment & human development*, *16*(6), 557-572. https://doi.org/10.1080/14616734.2014.941884

Kane, H. S., Jaremka, L. M., Guichard, A. C., Ford, M. B., Collins, N. L., & Feeney, B. C. (2007). Feeling supported and feeling satisfied: How one partner's attachment style predicts the other partner's relationship experiences. *Journal of Social and Personal Relationships, 24*(4), 535–555. https://doi.org/10.1177/0265407507079245

Leahy Warren, P. (2005). First-time mothers: Social support and confidence in infant care. *Journal of Advanced Nursing*, *50*(5), 479–488. https://www.doi.org/10.1111/j.1365-2648.2005.03425.x. PMID: 15882364.

McLeod, S., Berry, K., Hodgson, C., & Wearden, A. (2020). Attachment and social support in romantic dyads: A systematic review. *Journal of Clinical Psychology*, *76*(1), 59–101. https://doi.org/10.1002/jclp.22868

McLeod, S., Berry, K., Taylor, P., & Wearden, A. (2021). Romantic attachment and support preferences in new mothers: The moderating role of stress. *Journal of Social and Personal Relationships*, *38*(5), 1535–1552. https://doi.org/10.1177/0265407521990432

Mcleod, S., Berry, K., Taylor, P., & Wearden, A. (2021b). Romantic attachment and support adequacy in new mothers. *The Journal of Social Psychology*, *164*(1), 112–135. https://doi.org/10.1080/00224545.2021.2006125

Mikulincer, M., & Shaver, P. (2003). The attachment behavioral system in adulthood:

Activation, psychodynamics, and interpersonal processes. *Advances in Experimental Social Psychology,* 35, 53–152. Elsevier Academic Press. https://doi.org/10.1016/S0065-2601(03)01002-5

Moreira, J. M., de Fátima Silva, M., Moleiro, C., Aguiar, P., Andrez, M., Bernardes, S., &

Afonso, H. (2003). Perceived social support as an offshoot of attachment style. *Personality and Individual Differences*, *34*(3), 485–501. https://doi.org/10.1016/S0191-8869(02)00085-5

Pierce, T., & Lydon, J. (1998). Priming relational schemas: effects of contextually activated and chronically accessible interpersonal expectations on responses to a stressful event. *Journal of personality and social psychology*, *75*(6), 1441. https://doi.org/10.1037//0022-3514.75.6.1441

O'Hara, M. W., & Swain, A. M. (1996). Rates and risk of postpartum depression—a meta-analysis. *International review of psychiatry*, *8*(1), 37–54. http://dx.doi.org/10.3109/09540269609037816

Rini, C., Schetter, C. D., Hobel, C. J., Glynn, L. M., & Sandman, C. A. (2006). Effective social support: Antecedents and consequences of partner support during pregnancy. *Personal Relationships*, *13*(2), 207-229. http://dx.doi.org/10.1111/j.1475-6811.2006.00114.x

Ross, L. E., McLean, L. M., & Psych, C. (2006). Anxiety disorders during pregnancy and the postpartum period: a systematic review. *Depression*, *6*(9), 1–14. https://doi.org/10.4088/jcp.v67n0818

Rothbard, J. C., & Shaver, P. R. (1994). Continuity of attachment across the lifespan. In M.

B. Sperling & W. H. Berman (Eds.), *Attachment in adults*, 31–71. New York: Guilford.

Shaddock, D. (2000). *Contexts and connections: An intersubjective systems approach to couples therapy*. Basic Books.

Sheinbaum, T., Kwapil, T. R., Ballespí, S., Mitjavila, M., Chun, C. A., Silvia, P. J., &

Barrantes-Vidal, N. (2015). Attachment style predicts affect, cognitive appraisals, and social functioning in daily life. *Frontiers in Psychology*, *6*, 296. https://doi.org/10.3389/fpsyg.2015.00296

Siegel, D. J. (1999). *The developing mind* (Vol. 296). New York: Guilford Press.

StataCorp, L. P. (2013). Stata Statistical Software: Release 10 College Station.

Taubman–Ben-Ari, O. (2019). Blossoming and growing in the transition to parenthood. *Pathways and Barriers to Parenthood: Existential Concerns Regarding Fertility, Pregnancy, and Early Parenthood*, 271-290. https://doi.org/10.1007/978-3-030-24864-2_16

Theisen, J. C., Fraley, R. C., Hankin, B. L., Young, J. F., & Chopik, W. J. (2018). How do attachment styles change from childhood through adolescence? Findings from an accelerated longitudinal Cohort study. *Journal of Research in Personality*, *74*, 141–146. https://doi.org/10.1016/j.jrp.2018.04.001

Trinke, S. J., & Bartholomew, K. (1997). Hierarchies of attachment relationships in young adulthood. *Journal of social and personal relationships*, *14*(5), 603–625. https://doi.org/10.1177/0265407597145002

Wei, M., Russell, D. W., Mallinckrodt, B., & Vogel, D. L. (2007). The Experiences in Close

Relationship Scale (ECR)-short form: Reliability, validity, and factor structure. *Journal of Personality Assessment*, *88*(2), 187-204. https://doi.org/10.1080/00223890701268041