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SCHIZOPHRENIA Factsheet

February 2022

What are attachment styles?

Attachment styles are used to describe patterns of attachment in relationships. Adults with a secure attachment style tend to have good self-esteem, they share their feelings with partners and friends, and have trusting, lasting relationships. Insecure attachment styles include anxious attachment style (also known as ambivalent or preoccupied), which involves reluctance to become close to others, worry about the security of relationships, a reduced sense of autonomy, and increased dependence on others. Avoidant attachment style is another insecure style. It involves problems with intimacy, over-regulation of emotions, and unwillingness to share thoughts and feelings. Fearful attachment style is represented by an inconsistent sense of self and an inability to regulate one's emotions.

While attachment style in adulthood is thought to be based on early experiences with primary care givers, life's experiences can also impact on attachment style in adults. Children described as ambivalent or avoidant can become securely attached as adults, while those with a secure attachment in childhood can show insecure attachment patterns in adulthood.

What is the evidence for attachment styles in people with schizophrenia?

Moderate to high quality evidence finds the prevalence of insecure attachment styles is higher in people with schizophrenia than in people without a mental illness (76% vs. 38%), with fearful attachment style being the most prevalent in patients (38%) followed by avoidant (23%), then anxious (17%) attachment style.

This large effect of more insecure attachment styles in people with schizophrenia compared to controls was similar to that seen in people with depression or bipolar disorder. It was also similar across all three disorders for anxious attachment style. However, for avoidant attachment style, it was small for schizophrenia, medium-sized for bipolar disorder, and large for depression.

Small to medium-sized associations were found between increased general and positive symptoms and increased anxious and avoidant attachment styles. There was a weak association between increased negative symptoms and increased avoidant attachment style, and no significant association between negative symptoms and anxious attachment style. There were also medium-sized associations between decreased social and personal recovery and increased anxious and avoidant attachment styles in patients.

For more information see the technical table



NeuRA (Neuroscience Research Australia) is one of the largest independent medical and clinical research institutes in Australia and an international leader in neurological research.

Diseases of the brain and nervous system pose the greatest health, economic and social burden of any disease group because they are chronic, debilitating and have no known cures.

Medical research is the cornerstone of efforts to advance the health and wellbeing of families and the community. Our dedicated scientists are focussed on transforming their research into significant and practical benefits for all patients.

While we hope you find this information useful, it is always important to discuss any questions about schizophrenia or its treatment with your doctor or other health care provider.

HOW YOUR SUPPORT HELPS

We are able to make significant advances due to the generosity of countless people. Your donation allows us to continue to work towards transforming lives. For information on how you can support our research, phone **1300 888 019** or make a secure donation at neura.edu.au/donate.