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Investigating the Relationship	Between	Attachment	Styles and	Attitudes	Towards	Drug	Use
	Nationa	al College of	f Ireland				

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Abstract

Previous research has highlighted a relationship between insecure attachment styles and their propensity towards problematic drug use. However, no existing research has assessed how this may impact individuals' attitudes towards drugs. The present study examined the relationship between adult attachment styles and attitudes towards drugs, while also exploring the gender differences within these variables. The study found that males tended to have more positive attitudes towards drug use than females, and that females were more likely to exhibit anxious attachment. However, there were no significant differences in avoidant attachment between genders. Additionally correlational analysis found mixed findings for males, while for females, there was an overall positive relationship between attitudes towards drugs and scores of avoidant and anxious attachments. The findings have important implications for developing effective strategies to prevent and address drug use and related harm, particularly by acknowledging the influence of attachment styles and gender differences.

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Introduction

Use of alcohol and illicit drugs have been prevalent in the across the population for hundreds of years now. The use of illicit drugs has been prohibited by many international drug control treaties for over half a century as they are inclined to present an increased risk of addiction and other problem behaviors across the general population. Governments across the globe have aimed to control various types of drugs (Drucker, 1999) These vary from plant-based drugs such as heroin, cocaine, and cannabis to synthetic drugs such as amphetamines and MDMA. Additionally, in response to rising concerns about the non-medical use of pharmaceutical drugs, such as buprenorphine, methadone, and benzodiazepines, restrictions have been implemented. Recent research from the United States has revealed a significant increase in benzodiazepine use between 2003 and 2015, with over 30.6 million people reporting using benzodiazepines. Of this figure, 17.2% reported misuse of the drug (Maust, Lin & Blow, 2019). Moreover, according to reports by the United Nation Office on Drugs and Crime, between 149 and 271 million people had used an illicit drug at least once in 2009. Similarly, according to the European monitoring center for Drugs and Drug Addiction 13.8% of the European population report smoking cannabis, 4.4% report taking MDMA and 2.9% report using cocaine. Apart from illicit drugs, levels of alcohol consumption in Ireland remain one of the highest in the world as reported by the World health Organization stating Irish consumers drink near 11.2 liters of pure alcohol per year.

The abuse of drugs and alcohol pose many threats to the condition of both the individual and the wider society. According to HSE expenditure report, it was speculated that alcohol related issues overall cost to society was up to 3.7 billion euro per year highlighting financial

concerns regarding the possible avoidable public expenditure if communal behavior changed. Similarly, there is a strong relationship between drug/alcohol dependency increasing the likelihood of becoming and staying homeless with 63% of homeless individuals report their drug problem was the reason they became homeless (Fountain, et al., 2003). Furthermore, research has shown a relationship between drug misuse and the increased risk of crime (Bennett, Holloway & Farrington, 2008).

Drug use can also affect the health of the individual in a variety of ways. Despite the risk of overdose, drug and alcohol use is also associated with cardiovascular issues (Klatsky, 2002) cancer, lung disease as well as the spread of HIV or hepatitis B or C in needle users (Strathdee et al., 2010). Additionally, the use of drugs and alcohol have also been shown to pose many psychological risks. Substances such as marijuana have been consistently related to the emergence of psychotic symptoms and cannabis withdrawal symptoms (Wilson & Cadet, 2009). Research measuring the comorbidity of substance use disorders found that 35% of the samples with drug dependence met lifetime criteria for a mood disorder, 45% met criteria for an anxiety disorder and 50% met criteria for either conduct or antisocial personality disorder (Merikangas et al .,1998). Although one must remain conscious of the directionality of this research, illicit drug use is undoubtedly an inappropriate response towards dealing with such disorders. This concerning information about the destructive effects of drug use to the individual's health and across society has been informative towards inspiring the necessary research needed to highlight risk factors involved in drug use participation as well as developing steps towards preventative intervention.

Although modern societies are shifting towards a more liberal approach towards drug use (Greenwald ,2009). there are still individuals and subgroups in a population who are at an increased likelihood of using drugs and alcohol as a form of self-medication. Cooper (1994) investigated the motivations of drug and alcohol users isolated four main contributing factors to substance use: maintaining a positive mood or outlook, conforming to the desires of others, making social activities more fun, and reducing negative feelings such as anxiety or depression. Attachment style research has indicated these motivations may be exacerbated in certain insecure individuals resulting in negative drug related behavior, therefore, this research will place particular emphasis on research regarding this area.

Attachment Theory

The need to belong is a powerful and universal motivating force in humans that is imperative for feeling content (Baumeister & Leary, 1995). The development of this need can be traced back to infancy, as infants exhibit distress when separated from their parents or caregivers (Bowlby, 1969). Attachment theory was presented by Bowlby in an attempt to explain this distress and refers to the idea that infants are biologically predisposed to forming emotional bonds with caregivers, and that the quality and characteristics of these bonds later shape the development of personality and attitudes in an individual (Bowlby, 1973). Bowlby's theory was later expanded upon by Mary Ainsworth, who developed a methodology to test these ideas empirically. In 1971, Ainsworth conducted the "strange situation" experiment, which involved placing a one-year-old in a laboratory situation where they were left with a stranger in a room while their caregiver left periodically. The study aimed to measure the extent to which the child

would use their mother as a secure base from which to explore the strange environment with and without her presence (Ainsworth & Bell, 1972).

The feeling of security or "secure base" created in early attachment experiences helps the child regulate their emotions and is an important step in acquiring their own coping strategies when facing fear or distress. This has also been observed in Harlow's impactful work on monkeys, which led tkey insights into the development of attachment theory (Suomi, Van der Horst & Van der Veer ,2008). After consistent experiences with their parents or caregivers' responsiveness, these experiences become internalized, and the child develops internal working models of their attachment figure. If positive internal working models are developed, the child can extend these models of a secure base onto other relationships throughout their life.

Additionally, positive internal working models make it easier to regulate one's own affective states by themselves, as opposed to externalizing such regulation onto the accessibility of someone else.

Attachment styles are formed between infants and their caregivers at a very young age, and each style impacts the outcomes and experiences of the relationships they have with their family, friends, or romantic partners over time. The reunion period between a caregiver and a child serves as a crucial indicator of the attachment style formed between them, as proposed by Ainsworth in 1978. According to Ainsworth, attachment styles can be divided into two broad categories, secure attachment, and insecure attachment. Individuals who have experienced a secure base in their childhood are generally labeled as having a secure attachment style. They are confident and independent, seek support when needed, and attempt to be honest and uncontrolled within their relationships (Sroufe, 1986).

In contrast, individuals who did not experience a secure base during their childhood develop negative internal working models of themselves and others, which may manifest in their relationships in a variety of ways. Insecure attachment styles are typically categorized into three main groups: dismissive-avoidant, anxious-preoccupied, and fearful-avoidant (Bartholomew and Horowitz, 1991). Dismissive-avoidant attachment style is characterized by distancing oneself, self-importance, and restraint of emotions. Individuals with an anxious-preoccupied attachment style are clingy and possessive, while also participating in actions that push their partner away. Fearful-avoidant individuals may fear abandonment but also struggle with intimacy, and their relationships are often adversarial (Bartholomew& Horowitz, 1991).

The integration of these attachment styles from childhood into adulthood has been shown to be influential in the development of emotional and behavioral problems across development (Sroufe, 1986). Insecure attachment styles have been associated with higher levels of anxiety, depression, substance abuse, and other mental health problems (Schore, 2001). Studies have also found that individuals with insecure attachment styles are more likely to have difficulties regulating their emotions, resulting in higher levels of stress and negative affect (Crowell, Fraley, & Shaver, 2008).

Theoretical exploration of the relationship between Substance Use and Attachment Styles

Over the past decade, attachment theory has been increasingly applied to a variety of other areas of psychology, including substance use disorders. Growing research has examined the relationship between attachment styles and substance abuse, with attachment insecurity believed to be related to substance abuse based on the concept that drug use is related to psychological distress. Psychological distress can be defined as non-specific symptoms of stress,

anxiety and depression (Viertiö et al.,2021). Consistently, (Kassel, Wardle & Roberts ,2007) reported that individuals with anxious attachment styles had a significant positive association with both frequency of drug use and stress-related drug use. They were more likely to use drugs recreationally and during times of stress as a coping mechanism compared to those with secure attachment.

The "self-medication hypothesis" suggests that the abuse of specific substances may be an attempt to cope with specific forms of emotional distress (Khantzian, 1997). In this case, individuals with insecure attachment styles may lack the necessary skills or experience to form social relationships, and when presented with circumstances that require these skills, they may experience distress. As a result, individuals with insecure attachment may be at an increased likelihood to use drugs and alcohol to initiate "merger states" where they can cope with affective dysregulation from deficient socialization (Walant, 1995).

Further research has focused on the motivational processes of attachment and substance abuse by focusing on the reward-deficiency hypothesis of addiction (Nutt, et al., 2015). Insecure individuals have not experienced the reward of a secure base and therefore place more emphasis on satisfaction being derived from social contact. Animal research analyzing endorphins and opioids suggests that insecure attachment and insufficient conditioning to reward by social contact leads to a lack of endorphins in the ventral tegmental area (Trigo et al.,2010). As a result, dopaminergic reward processing in the limbic system cannot be released, leading to a reward deficiency and an increase in the risk for addictive behavior (Schindler, 2019).

Insecure Attachment and Substance Use

The relationship between an individual with an insecure attachment and their increased likelihood of engaging in substance use/abuse has been observed across a variety of substances and sample populations. For instance, research has highlighted positive associations between parental heavy drinking and the prevalence of insecure attachment styles in their children (Eiden, Edwards, & Leonard, 2002), as well as positive associations between insecure attachment and excessive drinking in adolescents and adults (McNally, et al., 2003). Insecure attachment has also been shown to be associated with increased cigarette smoking in adolescents in instances of emotional distress (Nakhoul et al., 2020). Additionally, research investigating the relationship between attachment styles and Methadone Maintenance treatment patients found that 81 patients out of 101 displayed extreme aspects of poor relating and insecure attachment. These figures highlight the relationship between chronic drug use and insecure attachment when compared to the average population, as 35% are estimated to be insecurely attached. Furthermore, these individuals displayed increased levels of psychopathology, particularly in dimensions such as interpersonal sensitivity, anxiety, hostility, phobic anxiety, and paranoid ideation (Potik, et al., ,2014). This further indicates evidence of the relationship between psychological distress, insecure attachment style, and the propensity towards substance use as a coping mechanism in treatment patients and individuals collectively.

Gender differences in Attachment and Substance Use

Previous literature has proposed that mainstream attachment research would benefit by integrating sex differences (Del Giudice,2019). While attachment styles are believed to be largely universal (Del Giudice,2019), there is evidence to suggest that there may be differences

in attachment styles between males and females. Research has shown that women tend to score higher on measures of attachment anxiety than men, meaning that they are more likely to experience worry and insecurity in their close relationships (Roisman et al., 2007). This may be due in part to socialization and cultural expectations that place greater emphasis on emotional expression and nurturing behaviors in women. Women may also be more likely to prioritize relationships in their lives, and thus may be more invested in the outcomes of these relationships (Eagly & Wood, 1999). In contrast, men tend to score higher on measures of attachment avoidance than women, meaning that they are more likely to keep emotional distance from their partners and avoid vulnerability (Gugová & Heretik, 2011). This may be due in part to societal expectations that men be self-reliant and independent, as well as cultural norms that encourage men to prioritize work and achievement over relationships. Additionally, men may be socialized to view emotional expression and vulnerability as signs of weakness, which could lead them to suppress their emotions and avoid emotional intimacy (Vandello, & Bosson, 2013). Moreover, due to the role that culture may play in influencing gender roles as well as models of the self and other (Markus & Kitayama ,1991), which is fundamental to attachment scales, it may be beneficial to research gender differences in attachment in the Irish population.

Women's greater tendency towards attachment anxiety may lead them to use substances as a way of coping with stress and negative emotions. This is consistent with research showing that women are more likely than men to report using substances in response to negative emotions such as anxiety and depression (Greenfield et al., 2010). In contrast, men's greater tendency towards attachment avoidance may lead them to use substances as a way of avoiding emotional intimacy and vulnerability. Similarly, this is consistent with research showing that men are more likely than women to report using substances in social and recreational contexts (Cooper ,1994).

Therefore, it may be important to consider gender and attachment styles in understanding and addressing research incorporating observations surrounding substance use. In particular, the effects of these patterns of use may have on the formation and development of attitudes towards drug use. Additionally, research may aid in our understanding of already existing disparities of drug use evident between men and women whereby statistics reported by the European Monitoring Centre for Drugs and Drug Addiction, 2005 indicate that men are more likely to engage in illicit drug use compared to women. Moreover, out of the minimal research examining differences in attitudes towards drug use between men and women, contrasting evidence has been found. This is evident as men have been reported to have more positive attitudes towards drug use (Lancaster et al., 2013) (Novak et al., 2002) while contrasting research has suggested that females have more positive attitudes towards drugs (Mousavi et al., 2014). Thus, incorporating attachment styles may further our understanding of such a complex issue.

Attitudes towards Drugs

Attitudes are a critical concept in social psychology that helps to elucidate human behavior in contemporary times. According to (Eagly & Chaiken,1993, p.1), attitudes can be defined as a psychological tendency that is expressed through the evaluation of an object with some degree of favor or disfavor. Objects that elicit such evaluations are referred to as attitude objects. In the context of this study, individuals may develop attitudes towards drugs and alcohol. The multicomponent model of attitude, proposed by Haddock and Zanna (1999), posits that attitudes are comprised of summary evaluations that are influenced by affective, cognitive, and behavioral components of an attitude object.

Conner and Armitage (2008) have noted that most measures of attitude are designed in a manner that precludes the possibility of holding both positive and negative evaluations simultaneously. Typically, attitudes are considered to exist along a single continuum, with individuals holding either positive or negative evaluations of a given object, but not both. For instance, an individual's attitude towards "Cocaine" might span from extremely unfavorable to highly favorable. Research has consistently demonstrated that attitudes are one of the strongest predictors of drug use behavior and addiction (Sutton,1987) (Mcmillan & Conner, 2003). Positive attitudes towards drugs can include beliefs that drugs are enjoyable, provide a sense of escape or relief from stress, or can enhance certain experiences. On the other hand, negative attitudes towards drugs can include beliefs that drugs are harmful, dangerous, or addictive.

Numerous investigations have explored the correlation between drug attitudes and drug usage. For example, a study conducted on college students examined the link between attitudes towards marijuana and marijuana usage and revealed that students with positive attitudes towards the drug were more likely to use it (Morrell et al., 2010). Additionally, the study found that the recent legalization of marijuana in neighboring states had a significant impact on the students' attitudes towards the drug. Furthermore, longitudinal research followed a group of adolescents over time and examined the relationship between their attitudes and behaviors related to drug use, as well as other risky behaviors such as smoking and alcohol use. The study found that attitudes and behaviors were reciprocally related, with attitudes influencing behavior and behavior influencing attitudes (Gerrard et al., 1996). Using this framework, it is reasonable to speculate about the impact of substance use behavior on the attitudes of individuals with insecure attachment, given their increased likelihood to develop engage in unhealthy substance use behavior.

The Current Study

Contemporary research on drug use has predominantly focused on determining drug use prevalence, with little attention paid to attitudes towards drug use. However, recent literature highlights the significance of attitudes as a crucial aspect to consider in the study of drug use. Particularly, research has shown that individuals with insecure attachment styles are at a greater risk of engaging in problematic substance use behavior compared to those with secure attachment styles, emphasizing the need to examine the attitudes of such populations. Although the largest study exploring attitudes towards drug use in an Irish population was conducted over two decades ago, there have been minimal significant developments in this field since (Bryan et al., 2000). Therefore, it would be valuable to further research this area by investigating vulnerable populations associated with an increased likelihood of developing substance use disorders in an Irish population. Additionally, research has highlighted the valuable contribution that gender differences may play in understanding the role of attitudes towards drug use. Studies have also explored how different attachment styles, such as avoidant and anxious attachment, may drive males' and females' patterns of drug use and development of attitudes towards drug use. By examining gender differences and attachment styles, we may gain a better understanding of the complex interplay between attitudes towards drug use, gender, and attachment styles in the development and maintenance of drug use behaviors. Therefore, the following research questions are presented.

Research question 1: Is there a relationship between attachment styles and attitudes towards drug use for males and females?

Research Question 2: Are there differences in attitudes towards drug use between males and females?

Research Question 3: Are there differences in Avoidant and Anxious attachment scores between males and females?

Methodology

Participants

This research includes (185) participants (Male, n= 70; Female n= 115). Participants were recruited using a non-probability sampling convenience sampling using the researcher's social media accounts such as Facebook and Instagram and WhatsApp. Moreover, snowball sampling was also used as many of the participants shared the study with their friends and colleagues to promote involvement in the study. This was done by sharing a link that brought the participant to a short paragraph that described what the study involved, and the length of time participation would take. To gain insight into the diversity of the sample, the participants were asked about their demographic variables. The sample group was composed of individuals living in various areas, with 40% residing in the capital city, 7.9% in other cities, 29.5% in towns, and 22.6% in rural areas. In terms of education, only 0.5% of participants completed primary level education, 20% completed secondary level education, and 79.5% completed or enrolled in third level education. No participant had not attained some level of education. Although this data was collected it was not controlled for in any inferential data analysis due to a insufficient rationale.

Measures

The questionnaire was developed using the online survey builder "google forms". This included a variety of demographic questions to gain an insight into the sample participants surrounding their age, gender, education level, and area in which they live. The questionnaire included three full/refined scales used to address attachment style and attitudes towards drug use.

Adult Attachment Scale:

The Revised Adult Attachment scale (Collins,1996) is an 18-item scale designed to measure an individual's style of attachment. Response is measured on a 5-point Likert scale whereby selecting 1 would indicate your response to the statement as "Not at all characteristics of me" and 5 representing "very characteristic of me". This research study divided the items into two subscales. The first subscale referred to an anxious attachment (Model of self) and the second referred to avoidant attachment (Model of other). Selected items are reverse scored before computing the subscale mean (see Appendix C). Previous research in samples of undergraduates indicates an acceptable level of internal consistency across each subscale as the Cronbach's alpha coefficient was .85 for Anxiety subscale and .81 for the avoidant subscale which matched this research study.

Attitudes towards drug use (ADU):

The 12-item Attitudes to Drug Use Questionnaire (Harmon, 1993) assesses individuals' attitudes towards drug use using a 5-point Likert Scale ranging from 1 = strongly agree to 5 = strongly disagree. Total scores are computed by summing responses and dividing them by 12. Higher scores indicate more positive attitudes towards drug use, while lower scores suggest less positive attitudes. Reverse scoring applies to five items of the 12-item scale. The scale's internal reliability is within a very good range ($\alpha = .89$).

The Drug Attitude Scale (DAS)

The Drug Attitude Scale (DAS) is a brief attitude measure designed to assess an individual's attitude towards drug use. It consists of 17 items, each of which asks the participant to rate their level of agreement with a statement on a six-point Likert scale ranging from 1 ("Strongly Disagree") to 6 ("Strongly agree"). The scale includes questions pertaining to different categories of drugs, such as Marijuana, Alcohol, Heroin, Opioids, Speed, and Barbiturates.

The scale was developed as a revised version of the original Drug Attitude Scale, which included 60 items (Goodstadt et al., 1978). The aim of the revision was to create a shorter version of the scale while maintaining an acceptable level of internal consistency. To improve the relevance of the scale to modern times, some of the drugs mentioned in the original version of the scale were replaced with more prevalent and current drug terminology. Additionally, scores for seven items that imply a negative attitude towards drug use were reversed to ensure that higher scores on the scale indicate more positive attitudes towards drug use. In the case of the DAS, the coefficient alpha was initially reported to be .75, indicating good internal consistency. However, an error in the experimental design resulted in one item being excluded from the study, which reduced the coefficient alpha to .67.

In this study, the researcher used two different scales to collect data on participants' attitudes towards drugs. The ADU is a scale that measures general attitudes towards drug use, while the DAS measures more specific attitudes towards different types of drugs and drug-related behaviors. For example, the DAS includes questions such as "Cocaine should remain completely illegal" and "It's okay to use hallucinogens if you know what you are getting into". In contrast the ADU included more general attitudes such as "There are few things more dangerous

than experimenting with drugs "and "Using illegal drugs can be a pleasant activity". By using both scales, the researchers felt it was important to distinguish between both general and specific attitudes to gain a more nuanced understanding of participants' attitudes towards drugs.

Design and Analyses

The first research question examined the relationship between attachment style and attitudes towards drug use, with a focus on anxious attachment and avoidant attachment. Spearman's correlations were used to analyze the results, with separate analyses conducted for each gender. The researcher examined the relationship between anxious attachment and attitudes towards drug use, as measured by the general attitude towards drugs scale (ADU) and the drug attitudes scale measuring more specific attitudes towards drugs (DAS) scale. They also examined the relationship between avoidant attachment and attitudes towards drug use using the same scales.

For the second research question, the study investigated the impact of gender on attitudes towards drug use. The independent variable was gender, with male and female participants included in the study. The dependent variable was attitudes towards drug use, which was measured using two scales: the general attitudes towards drug use (ADU) and the scale measuring more specific attitudes towards drugs (DAS). To analyze the results, the researcher conducted a Mann Whitney U test twice.

For the third research question, the study explored the relationship between gender and attachment style (avoidant and anxious). The independent variable was gender, while the

dependent variables were the avoidant and anxious attachment style scales. The researcher also used the Mann Whitney U test to analyze the results.

Procedure

All 185 participants in the study were recruited through various social media platforms such as Snapchat, Instagram, and Facebook, as well as through email referrals from mutual friends. Prior to participating, individuals were presented with a consent form and information sheet (Appendix D & E) that provided a brief overview of the study's objectives and estimated completion time, which was approximately 10-15 minutes. It was clearly stated in the consent form that participants could withdraw from the study at any time without any penalty. After giving their consent, participants completed an Attachment Style Questionnaire, followed by the Attitude Towards Drug Use Scale (ADU), and the Drug Attitude Scale (DAS). Following completion of these three questionnaires, participants were given a debriefing form that included contact information for the research team, as well as helpline numbers. Participants were also encouraged to seek help if they experienced any distress due to participation in the study (see Appendix F).

Ethical Considerations

The study adhered to the ethical guidelines of National College of Ireland ethics committee during the data collection process and the Psychological Society of Ireland's ethical standards. The potential risks and benefits of participating in the study were clearly explained to participants, and no incentives were offered to encourage participation and all participants' identities remained anonymous. Informed consent was obtained from all participants.

Participants were informed that the study may be published in the NCI library, which could be

accessed by students, lecturers, and visitors. This information was explicitly stated in the debriefing form provided to participants. Additionally, contact information for helplines was provided in the debriefing form for participants who experienced distress as a result of their participation (see Appendices F).

Results

Descriptive statistics

The study sample consisted of 185 participants (n = 185), with 62.2% (n = 115) identifying as female and 37.8% (n = 70) as male. A large proportion of the participants, 39.5% (n = 73), reported residing in Dublin City, while 8.1% (n = 15) lived in another city in Ireland. Furthermore, 29.7% (n = 56) of the respondents reported living in a town, while 22.7% (n = 42) stated they resided in a rural area. In terms of educational level, 79.5% (n = 147), of participants reported completing Third level education, while 20% (n = 37) completed Secondary Education, and only 0.5% (n = 2) completed primary education.

There are four continuous variables including Anxiety Subscale Scores, Avoidance Subscale Scores, the Attitudes to Drug use scale (ADU) and the Drug Attitude Scale (DAS). Mean, standard deviation, minimum and maximum scores are displayed in Table 1 below.

Table 1: Descriptive Statistics all for Continuous Variables, N=185

Variable	<i>M</i> [95% CI]	SD	Range
Anxiety Subscale	2.73	1.069	5
Avoidance Subscale	2.60	.661	4
ADU	3.08	.903	4.67
DAS	3.30	.865	5.38

Inferential statistics

Preliminary analysis indicated that each scale did not meet the assumptions of normality, therefore, Spearman correlation coefficient was utilized instead of the Pearson correlation coefficient to examine the relationship between the Anxiety subscale and attitudes towards drug use on both scales, as well as the Avoidant subscale. The results of the analysis showed a significant moderate positive correlation between attachment anxiety and attitudes towards drugs (ADU) in females, rho = .344, n=115, p<.01 Additionally, a significant small positive correlation was observed between attachment anxiety and the scale regarding specific attitudes towards drugs (DAS), rho = .210, n=115, p<.05. However, for males, the correlations indicated a weak negative relationship between attachment anxiety and Attitudes Towards Drug use, rho = .029 n=70, p>.05 and a weak positive relationship for the Drug Attitude Scale, rho = .042, n=70, p>.05. Correlations coefficients are presented in the table below (See Table 2)

Furthermore, the correlations examining the relationship between attachment avoidance and general Attitudes Towards Drugs (ADU) indicated significant positive moderate results in females rho = .210, n=115,p<.05, with a small positive relationship found for the scale referring to specific Attitudes Towards Drugs (DAS) rho = .143,n=115,p>.05. However, for males, the results indicated a small positive relationship between avoidant attachment and general attitudes towards drugs (ADU), rho = .023,n=70,p>.05. Moreover, small negative relationship was reported towards the scale referring to specific attitudes towards drugs (DAS), rho = -115, n=70, p>.05. Correlation coefficients are presented in the table below (See Table 3)

Table 2: Spearman's rho correlations between Attachment Anxiety, attitudes towards drug use (ADU), and Drug attitude scale (DAS) split by gender.

	Attachment Anxiety	ADU	DAS
P. 1			
Female			
Attachment Anxiety			
ADU	.344**		
DAS	.210*	.738**	
Male			
Attachment Anxiety			
ADU	029		
DAS	.042	.629**	

Note: **p<.01, *p<0.05 ADU; Attitudes towards drugs scale, DAS;Drug attitude scale

Table 3: Spearman's rho correlations between Attachment Avoidance, Attitudes towards drug use (ADU), and Drug attitude scale (DAS) split by gender.

	Attachment Avoidance	ADU	DAS
Female			
Attachment Avoidance			

.210*				
.143	.738**			
Attachment Avoidance				
.023				
154	.629**			
	.023			

Note: **p<0.01, *p<0.05 /ADU= Attitudes towards drugs scale/DAS=Drug attitude scale

Preliminary analyses were performed to assess whether the data met the assumption of normality. The outcomes indicated that based on the shape of the histogram, the distribution of each scale did not follow a normal pattern. Consequently, a non-parametric approach was chosen as an alternative.

A Mann Whitney U Test was employed to examine gender differences in attitude scores on the Attitudes Towards Drugs scale. The findings indicated a significant difference in attitude scores between males (Md = 3.58, n = 70) and females (Md = 2.91, n = 115) (U = 5996.5, z = 5.585, p < .001). The effect size was small (r = 0.41).

Similarly, the Mann Whitney U Test was employed to examine gender differences in attitude scores on the Drug Attitude Scale (DAS). The findings indicated a significant difference in attitude scores between males (Md = 3.66, n = 70) and females (Md = 3.00, n = 115) (U = 5348.5, z = 3.748, p < .000). The effect size was small (r = 0.275).

To compare attachment dimensions, a Mann Whitney U Test was conducted to examine gender differences in scores on the Anxiety Attachment scale. The findings indicated a significant

difference in anxiety scores between males (Md = 2.33, n = 70) and females (Md = 2.83, n = 115) (U = 3258.5, z = -2.173, p < .03). The effect size was small (r = -0.159).

Lastly, a Mann Whitney U Test was conducted to examine gender differences in scores on the Avoidant Attachment scale. The findings indicated no significant difference in avoidance scores between males (Md = 2.45, n = 70) and females (Md = 2.64, n = 115) (U = 3501, z = 1.485), p < .138). The effect size was moderate (r = -.109).

Discussion

The present study aimed to investigate the relationship between attachment styles and attitudes towards drug use in males and females, while also exploring potential gender differences in these variables. Attachment styles refer to the unique ways in which individuals form and maintain emotional bonds with others, while attitudes towards drug use encompass an individual's beliefs, values, and perceptions regarding drug use. Given the significant impact of attachment styles on various aspects of social and emotional functioning as well as differences in abuse prevalence rates, it was expected that they may be related to attitudes towards drug use. However, this relationship is complex and not fully understood. Furthermore, research has suggested that gender may play a role in both attachment styles and attitudes towards drug use (Del Giudice, 2019, Mousavi et al., 2014). Thus, this study aimed to contribute to the existing literature by providing further insight into the potential relationship between attachment styles and attitudes towards drug use, while also examining potential gender differences in these variables.

Theoretical framework suggests that a relationship may exist between attachment styles and substance use behavior (Borhani, 2013). This is based on the idea that individuals with insecure attachment are more likely to experience psychological and emotional distress, and as a means of self-medication, may engage in substance use to alleviate distress and regulate emotions (Walant, 1995). To investigate whether this theory can be extrapolated to drug attitude research and whether a relationship exists between anxious and avoidant attachment styles and attitudes towards drugs, a correlation analysis was conducted.

The results showed a moderate significant positive correlation between anxious attachment and drug attitudes in females, indicating that as scores on the anxiety scale increase, scores on the attitude scales also increase, suggesting more positive attitudes towards drug use with increased symptoms of anxiety. This finding was applicable for both drug attitude measures. Furthermore, a small negative correlation was found between attachment anxiety and general attitudes towards drug use (ADU) in males while a small positive correlation was found in the scale addressing specific attitudes towards drug use (DAS) however the effect size was close to zero indicating a very weak correlation. These findings suggest that there may be a connection between anxious attachment styles and attitudes towards drugs, particularly in females. Previous research by Kassel et al. (2006) found that college students with anxious attachment styles had a significant positive association with both the frequency of drug use and stress. Although this study did not explore gender differences, research on common motives for drug use in women has revealed that women tend to use drugs as a form of self-medication to cope with stress (Becker et al., 2017). This corresponds to theoretical explanations of drug use motivations in individuals with insecure attachment styles. In contrast, men are more likely to use drugs for socialization and to fit in with a group (Cooper, 1994).

The application of attachment theory can aid in our understanding of drug use behaviour and the development of attitudes towards drugs. Such an insight can be applied in research highlighting females increased susceptibility to being influenced by their significant other's drug use patterns, across a range of drugs (Brecht et al., 2004), (Hicks et al., 2007). Traditionally, females may conform to the "norm" out of fear of exclusion from their peer group (Aronson, et al., 2005). However, attachment theory can add an additional layer of interpretation of these observations by incorporating anxious attachments characterization of preoccupation with

relationships and a desire to get closer to their partner. In this case, assimilating their partner's drug use patterns may act as a defense against their fear of abandonment associated with non-conformity to normative drug behavior, leading to more positive attitudes towards drug use behavior, especially in females.

The results of the correlational analysis suggest that there is a relationship between attachment avoidance and attitudes towards drug use, and this relationship may differ based on gender. In females, higher levels of attachment avoidance are associated with more positive attitudes towards drug use in general and towards specific drugs. In males, the results are mixed, with a small positive correlation between attachment avoidance and general attitudes towards drug use (ADU), but a small negative correlation between attachment avoidance and specific attitudes towards drugs (DAS).

Individuals with an avoidant attachment style experience attachment-related distress similarly to those with an anxious attachment style, but they do not view closeness-seeking as a viable option. This is because they are afraid of being hurt or rejected in intimate relationships. Additionally, people with an avoidant attachment style often have a deep-seated fear of dependency (Simpson,1990). Consequently, as a response to stress they may engage in deactivating strategies such as substance abuse to cope with distress, which may be perceived as more effective than seeking closeness. Davidson and Ireland's (2009) study support the relationship between the avoidant attachment style and drug use as a coping mechanism to alleviate attachment-related distress. This behavior may result in more positive attitudes towards drug use in individuals with avoidant attachment as illustrated in this study.

The results of the current study revealed a significant difference in attitudes towards drugs between males and females. Specifically, males held significantly more positive attitudes towards drug use than females, as indicated by both the general attitudes towards drug use (ADU) and attitudes towards specific drugs (DAS) scales. While the effect size was small, these results were consistent with previous research indicating that males tend to have more positive attitudes towards drug use than females (Rienzi et al., 1996; Lancaster et al., 2013).

Nevertheless, contradictory evidence exists from research conducted in Sweden, which found that females held more positive attitudes towards drugs in a young student sample (Mousavi et al., 2014). This discrepancy may suggest differences in attitudes towards drug use between nationalities in this Irish sample suggesting a cultural base for the differences.

As discussed previously, attitudes and behaviors can mutually reinforce each other (Gerrard et al., 1996). Therefore, the present study's finding that males hold more positive attitudes towards drug use than females may shed light on research highlighting the higher prevalence of substance use disorders in men (McHugh et al., 2018). Researchers have attempted to explain this relationship by suggesting that engaging in criminal activities, such as drug use, may contribute to a positive masculine identity for men, which can influence their attitudes towards drug use. In contrast, women do not experience a similar enhancement of their personal identity in this context (O'Bryan, 1989; Sznitman, 2007).

Moreover, research has found that the majority of drug dealers are men, while female drug dealers are relatively rare and tend to occupy lower positions in the drug market hierarchy. This suggests that women are, to some extent, excluded from the illicit drug trade, and when they do become involved, their drug use is often controlled by men (Denton & O'Malley, 1999). This

gender-based obstruction may affect females' perception of their perceived behavioral control of accessing drugs, which has been found to influence attitudes and intentions towards drug use (Bashirian, et al., 2012).

Analysis addressing gender differences in attachment style shows a significant difference in the anxious attachment style between males and females in the Irish population. Females scored higher on the anxiety dimension, indicating that they are more likely to experience worry, uncertainty, and fear in close relationships compared to males. These results are consistent with previous studies that also found females tend to score higher on measures of anxious attachment (Gugová & Heretik, 2011). Furthermore, this finding aligns with evolutionary-based theories that suggest females display anxiety as a female-biased strategy aimed at maximizing closeness and investment from partners while, males tend to have an avoidance-based strategy with the goal of reducing commitment and parental investment, which is consistent with previous research on attachment styles (Del Giudice, 2019).

However, the results revealed no significant difference in avoidant attachment style between males and females in the Irish population. This indicates that both genders were equally likely to avoid emotional intimacy and closeness in relationships. It's important to note that previous studies on gender differences in attachment have produced mixed results. While some studies have found that males are more likely to exhibit avoidant attachment than females (Gugová & Heretik, 2011), others have found no significant gender differences (Wei, Russell, Mallinckrodt & Vogel, 2007).

It's crucial to acknowledge that these findings are specific to the Irish population and may not apply to other cultures or populations. Del Giudice (2011) reported differences in avoidant

attachment in males that contradicts traditional gender theory and noted that sample types and geographic regions may contribute to these discrepancies. To explain this, research indicates that culture can influence the development of a child, gender roles, and attachment constructs (Schmitt et al., 2015). Therefore, further research is necessary to fully comprehend and explore the reasons behind these gender differences in attachment in an Irish context.

.The present study's results suggest that drug use motivations within males and females may explain the observed variation in attitudes towards drug use between males and females. Specifically, males may use drugs for socialization purposes, whereas females may use drugs to cope with stress. relationship has been highlighted in which found that "social drinking" is not to be related to attachment whereas "Drinking to cope" was negatively related to secure attachment and positively related to avoidant and anxious attachment (Brennan & Shaver,1995). This may provide evidence for disparities in correlations between males and females, as females share common motivations for drug use that correspond to theory suggesting insecure attachment styles are motivated to use drugs as a coping mechanism to alleviate distress.

It is worth noting that the relationship between attachment dimensions of avoidant and anxious and attitudes towards drug use differ from research that has associated avoidant attachment as being most associated with problematic drug use behavior and distress (Gidhagen et al., 2018, Davidson, & Ireland, 2009). In this study, anxious attachment style shows a stronger positive relationship towards attitudes towards drug compared to avoidant attachment in females. However, previous research suggests a potential bias in the self-report assessment of substance use and attachment styles. (Crowell et al., 2008) reported that avoidant individuals tend to underreport problematic behavior, while anxious individuals tend to overreport problematic

attachment and substance use disorders. Given the close association between substance use and attitudes, it is essential to consider the possible impact of this information on drug use attitudes. Failure to do so may result in underestimating the link between avoidant attachment and attitudes towards drugs and overestimating the link between anxious attachment and attitudes towards drugs.

Implications

Attitudes play an important role in understanding drug use behavior, research (Armitage, et al., 1999). To address the growing drug problem worldwide and reduce its negative psychological, social, and financial costs, practical solutions are needed. The findings of this study revealed that men exhibit more positive attitudes toward drugs than women, suggesting that gender-specific drug interventions could be useful by targeting risk factors that foster unhealthy attitudes and behavior regarding drug use. Previous studies have also indicated that individuals with insecure attachment styles are more likely to engage in substance abuse as a means of coping with psychological distress, and may, therefore, demonstrate more positive attitudes towards drugs. Such an association was supported in this study. Attachment-based therapy models have been shown to reduce anxiety and avoidance in previous research (Van Gordon, Shonin, Garcia et al. 2020). Expansion and integration of such models into drug prevention or intervention programs could aid such individuals in understanding their drugtaking behavior, potentially enhancing the effectiveness of drug prevention and intervention efforts.

This study adopted a quantitative research approach that measured the differences between men and women in their attitudes towards drug use, as well as differences in their attachment styles. The findings of this study suggest that there are significant gender differences in both attitudes towards drug use and attachment styles. To gain a more comprehensive understanding of these gender differences, future research could benefit from using a qualitative or mixed methods research approach. Qualitative research methods allow for a more in-depth exploration of individuals' experiences, beliefs, and attitudes. Interviews with participants could be conducted to explore the underlying reasons for these gender differences in attitudes towards drug use and attachment styles. By gaining a deeper understanding of these factors, future interventions and programs aimed at reducing drug use and promoting healthy attitudes and attachment styles that could be better tailored to address the unique needs and experiences of men and women.

Strengths and Limitations

This study had several notable strengths, one of which was its use of a sizable sample size of 185 participants from Ireland. This approach allowed for a thorough and comprehensive understanding of drug use attitudes among the Irish population. The study's findings were in line with earlier research conducted in other countries, providing valuable and up-to-date information on Irish people's attitudes towards drug use with a particular interest in gender differences. In addition, the study aimed to expand research in this area by integrating the concept of attachment theory, which had not been previously examined in relation to attitudes towards drug use despite its close association with drug use and addiction. Moreover, the study incorporated suggestions from modern research of attachment which suggested gender as a key factor in understanding attachment suggesting that it is beneficial for future research (Del Giudice, 2019). Finally, the

study design was easily replicable, which means that future researchers could replicate the study's findings and conduct similar research on this topic.

While this study had several strengths, it also had certain limitations. One of the main limitations was related to the sensitive nature of the topic of drug use. Ethical considerations prevented the researchers from collecting data on participants' own drug use or exposure to drugs, which is an important aspect to consider as attitudes and behaviors can reciprocally influence each other. Therefore, the lack of information with regards to the participants drug use among participants may have limited the ability to draw more accurate and extensive conclusions regarding the attitude's behavior relationship with respect to drug use. Future research may benefit from incorporating analysis controlling for users and non-users of drug and alcohol.

It is worth noting that this study incorporated the use of self-report measures, which can be prone to dishonesty or response bias. Specifically, in the context of this study, questions related to drug use may push individuals towards giving socially acceptable answers rather than their true feelings. Moreover, the study requires questions related to an individual's experiences of relationships, which places an emphasis on the individual's introspective ability to reflect and analyze their experiences and feelings in relationships.

Conclusion

The role of drug use and its impact on individuals and society has been extensively studied. To investigate attitudes towards drug use in an Irish population, an analysis was conducted which examined potential gender differences and the potential relationship between attachment styles and attitudes towards drugs. An examination of gender differences in attachment styles indicated that females were more likely to exhibit anxious attachment. However, there were no significant differences in avoidant attachment between genders. Furthermore, the study revealed that males tended to have more positive attitudes towards drug use when compared to females, which was consistent with prior research. In addition, the relationship between attitudes towards drug use and attachment styles was examined in this study, which found mixed results for males, whereby a positive and negative relationship was recorded between anxious and avoidant attachment styles and attitudes towards drug use while for females, a positive relationship was observed between attitudes towards drug use and scores of avoidant and anxious attachments. The study suggested that this gender difference may be due to a greater tendency for females to use drugs as a coping mechanism for stress, which is consistent with the theoretical link between insecure attachment styles and motivations towards drug use. However, further research is needed to gain a better understanding of this relationship. This study provides valuable insights into the complex factors that shape attitudes towards drug use, which have been sparsely researched in the Irish population. These findings have important implications for developing effective strategies to prevent and address drug use and related harm, especially by recognizing the influence of attachment styles and gender differences.

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Appendices

Appendix A.

Attitudes to drug use (Harmon, 1993).

1. Using illegal drugs can be a pleasant activity (R)

Strongly Agree	Agree	Neutral	Disagree	Strongly
				Disagree

2. A young person should never try drugs

Strongly Agree	Agree	Neutral	Disagree	Strongly	
				Disagree	

3. There are few things more dangerous than experimenting with drugs

Strongly Agree	Agree	Neutral	Disagree	Strongly
				Disagree

4. Using drugs is fun (R)

Strongly Agree	Agree	Neutral	Disagree	Strongly
				Disagree

5. Many things are much riskier than trying drugs (R)

Strongly Agree	Agree	Neutral	Disagree	Strongly
				Disagree

6. Everyone who tries drugs eventually regret it

Strongly Agree	Agree	Neutral	Disagree	Strongly Disagree
	7. The laws about	illegal drugs shoul	d be made stronger	
Strongly Agree	Agree	Neutral	Disagree	Strongly Disagree
	_	ne of the biggest ev		
Strongly Agree	Agree	Neutral	Disagree	Strongly Disagree
Strongly Agree	Agree	Neutral	Disagree	Strongly Disagree
Strongly Agree	Agree	Neutral	Disagree	
Strongly Agree	Agree	ach about the real h	nazards of taking dru Disagree	gs Strongly
Strongly Agree	Agice	rveuttar	Disagree	Disagree
11. The p	olice should not be	annoying young pe	cople who are trying	drugs (R)
Strongly Agree	Agree	Neutral	Disagree	Strongly Disagree
12.	To experiment with	h drugs is to give a	way control of your	
Strongly Agree	Agree	Neutral	Disagree	Strongly Disagree

To compute scores for the questionnaire, certain items need to be scored on a scale of '1' for 'strongly agree' to '5' for 'strongly disagree'. These items are numbered 2, 3, 6, 7, 8, 10, and 12. The remaining items (1, 4, 5, 9, and 11) should be reversed scored. To determine an individual's attitude score, the scores for all 12 items should be added and then divided by 12. A score of 5 represents a completely favorable attitude towards drug use, while a score of 1 indicates a completely unfavorable attitude. Participants who do not answer all 12 questions should be excluded from analysis, as total scores are calculated by dividing the overall score by 12.

Appendix B:

Adapted Drug attitude scale (Goodstadt, Cook, Magid, Cruson,1978)

1.Its better to let nature take its course than to use tranquilizers (sleeping pills)

1.Strongly	2	3	4	5	6.Strongly
Disagree					Agree

2. If my nerves were really bothering me I would take a tranquilizer (sleeping pill)

1.Strongly	2	3	4	5	6.Strongly
Disagree					Agree

3. I would never take a Benzodiazepine (Poppers, Xanax, Valium)

1.Strongly	2	3	4	5	6.Strongly
Disagree					Agree

4. People who are using heroin are stupid

1.Strongly	2	3	4	5	6.Strongly
Disagree					Agree

5. It is not immoral to use heroin

1.Strongly	2	3	4	5	6.Strongly
Disagree					Agree

6. Occasional use of opiates is okay (Codeine, Morphine, Fentanyl)

1.Strongly	2	3	4	5	6.Strongly
Disagree					Agree
	7 Thana aha	auld be stricter	aantral ayar ne	agamintiang	
	/.There sho	outd be stricter t	control over pre	escriptions.	
1.Strongly	2	3	4	5	6.Strongly
Disagree	2	3	4	3	Agree
	I			1	1 15100
8 There is not	hing wrong with	occasionally r	ısino amnhetam	nines (Sneed/R	italin/Adderall
o. There is nou	ming wrong with	i occasionany c	ising amphetan	imes (Speed/R	nami/Adderan,
		Ecsta	asy)		
1.Strongly	2	3	4	5	6.Strongly
Disagree					Agree
	9 Coca	ine should rema	ain completely	illegal	
1.Strongly	2	3	4	5	6.Strongly
Disagree					Agree
	10. There	is nothing wror	ng with drinking	g alcohol.	
1.Strongly	2	3	4	5	6.Strongly
Disagree					Agree
11. 7	The government	t should put tigl	hter controls on	the sale of alc	ohol
	C	1 0			
1.Strongly	2	3	4	5	6.Strongly
Disagree	-		•		Agree

10	0 1 .	C	• •	1 11	1	1 1 1
12	Smoking	of ma	ırııııana	should	he	legalised.

1.Strongly	2	3	4	5	6.Strongly
Disagree					Agree

13. Its okay to use hallucinogens if you know what you are getting into (LSD, Magic mushrooms, Ecstasy).

1.Strongly	2	3	4	5	6.Strongly
Disagree					Agree

14. All cigarette advertising should be banned

1.Strongly	2	3	4	5	6.Strongly
Disagree					Agree

15. There is nothing wrong with cigarette smoking.

1.Strongly	2	3	4	5	6.Strongly
Disagree					Agree

16. Drugs can help improve relationships among people.

1.Strongly	2	3	4	5	6.Strongly
Disagree					Agree

Appendix C

Revised Adult Attachment Scale (Collins, 1996)

Please read each of the following statements and rate the extent to which it describes your feelings about romantic relationships. Please think about all your relationships (past and present) and respond in terms of how you generally feel in these relationships. If you have never been involved in a romantic relationship, answer in terms of how you think you would feel.

Please use the scale below by placing a number between 1 and 5 in the space provided to the right of each statement.

13	5
Not at all	Very
characteristic	characteristic
of me	of me

1) I find it relatively easy to get close to people.

2) I find it difficult to allow myself to depend on others.

3) I often worry that romantic partners don't really love me.

4) I find that others are reluctant to get as close as I would like.

5)	I am comfortable depending on others.		_
6)	I don't worry about people getting too close to me.		_
7)	I find that people are never there when you need them.		_
8)	I am somewhat <u>un</u> comfortable being close to others.		_
9)	I often worry that romantic partners won't want to stay with me.		_
10)	When I show my feelings for others, I'm afraid they will not feel the same	about me	•
11)	I often wonder whether romantic partners really care about me.		_
12)	I am comfortable developing close relationships with others.		_
13)	I am <u>un</u> comfortable when anyone gets too emotionally close to me.		_
14)	I know that people will be there when I need them.		_
15)	I want to get close to people, but I worry about being hurt.		_
16)	I find it difficult to trust others completely.		_
17)	Romantic partners often want me to be emotionally closer than I feel		
	comfortable being.		
18)	I am not sure that I can always depend on people to be there when	n I need	them

Alternative Scoring:

If you would like to compute only *two* attachment dimensions – attachment *anxiety* (model of self) and attachment *avoidance* (model of other) – you can use the following scoring procedure:

Scale Items

ANXIETY 3 4 9 10 11 1

AVOID 1* 2 5* 6* 7 8 12* 13 14* 16 17 18

^{*} Items with an <u>asterisk</u> should be <u>reverse scored</u> before computing the subscale mean.

Appendix D

Information Sheet

WHO I AM AND WHAT THIS STUDY IS ABOUT

My name is Cathal Bergin, and I am a final year psychology student in the National College of Ireland. This study is aimed to examine the relationship between adult attachment styles and attitudes toward drug use.

WHAT WILL TAKING PART INVOLVE?

This study involves discussing topics around their attitudes and opinions of different elements of drugs and alcohol use. If you participate in this study, you will be asked to answer 3 sets of questions surrounding your attachment style (feelings regarding relationships) and attitudes towards drug use. These questions will take 7- 10 minutes to complete depending on the speed of your answers.

WHY HAVE YOU BEEN INVITED TO TAKE PART?

You have been invited to take part in this study if you are currently are over the age of 18 and living in Ireland as this is the population this study is focusing on

DO YOU HAVE TO TAKE PART?

This study is completely voluntary and if at any point in this study you would like refuse participation you may do so by exiting out of the page without any consequences.

WHAT ARE THE POSSIBLE RISKS AND BENEFITS OF TAKING PART?

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ATTITUDES DRUG USE AND ATTACHMENT STYLE

There are no immediate benefits in taking part in this study however the knowledge gained from

the results of this study may affect drug intervention strategies that may indirectly affect you or

your family with drug related issues in future

WILL TAKING PART BE CONFIDENTIAL?

Taking part in this study will be entirely confidential as the anonymity of each participant will be

maintained as identifiable details will not be required.

WHAT WILL HAPPEN TO THE RESULTS OF THE STUDY?

The results of this study will be submitted for correction for the researcher's final year project

and showcased in front of the researcher's class group. Any further dissemination may result in

publication of the study.

WHO SHOULD YOU CONTACT FOR FURTHER INFORMATION?

If you require any further information, please feel free to contact the supervisor or researcher

using the details below.

Researcher email: x20463844@ncirl.ie

Supervisor email: <u>Julian.dooley@ncirl.ie</u>

Appendix E

Consent form

In agreeing to participate in this research I thoroughly understand the following;

- · I understand that I can withdraw at any time without any consequences of any kind by exiting out of the questionnaire.
- · I understand that once my participation has ended and my data submitted I will not be able to withdraw my data as it has been de-identified.
- · I have been informed as to the nature of the study in writing and I have agreed to voluntarily participate
- · I understand that I will not benefit directly from participating in this research.
- · I understand that all information I provide for this study will be treated confidentially and has been approved by the Departmental Ethics Committee.
- · I understand that in any report or any stage of participation in this research, my identity will remain anonymous.
- ·I understand that you intend to use the data for your final year project

Appendix F

Debrief sheet

Study title: Examining the relationship between adult attachment styles and attitudes towards drug use.

Thank you for participating in this study for my final year psychology project for the National College of Ireland. Firstly, this research aimed to gain a greater understanding of attitudes toward drug and alcohol use and how an individual's attachment styles may affect these attitudes.

The questions that you completed will now be analysed and will undergo a variety of statistical procedures that allow the researcher to make significant observations that can add to the scientific literature. This study was conducted under the supervision of Julian Dooley.

Implications of this study may result in a change in how we approach modern day drug intervention by implementing our understanding of how attitudes may affect our behaviour (drug habits) and the possible variables which may affect its formation (attachment styles).

Once again, the responses you have submitted will remain completely confidential and your identity will remain anonymous. As a result, the data you have submitted will not be able to be redacted once completed. Furthermore, the data collected in this study will be reported to my college class group and possibly published. If you have any further questions or queries about the study, please do not hesitate to contact me using the contact details below.

I nank yo	u,	
Contact 1	Information:	

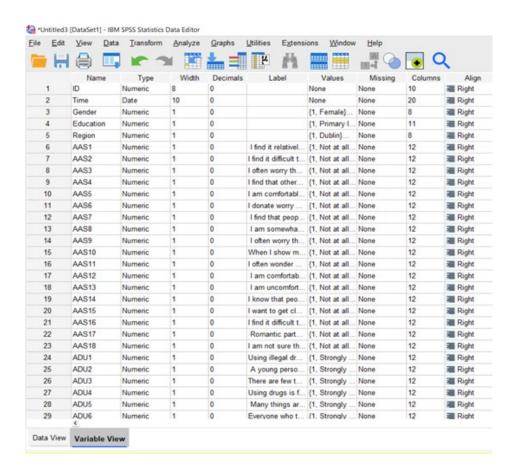
Student Email: _____

ATTITUDES DRUG USE AND ATTACHMENT STYLE

Supervisor email;
If you have been negatively impacted by participating in this study please feel free to use
the following numbers for help
Helpline services;
TEXT 50808 for mental health support

Appendix G

Evidence of Data Collection



ATTITUDES DRUG USE AND ATTACHMENT STYLE

/STATISTICS=MEAN STDDEV MIN MAX. Descriptives **Descriptive Statistics** FREQUENCIES VARIABLES=Gender /ORDER=ANALYSIS. Frequencies Statistics Gender N Valid 185 Missing 0 Gender
 Frequency
 Percent
 Valid Percent
 Cumulative Percent

 115
 62.2
 62.2
 62.2

 70
 37.8
 37.8
 100.0

 185
 100.0
 100.0
 Valid 1 Female 62.2 2 Male 100.0 Total