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RELATIONSHIPS BETWEEN ATTACHMENT STYLE, COGNITIVE FLEXIBILITY AND EMOTION REGULATION

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ÖZET

DİLMEN, Serenay. Bağlanma Stilleri, Bilişsel Esneklik ve Duygu Düzenleme Arasındaki İlişki. Başkent Üniversitesi, Sosyal Bilimler Enstitüsü, Klinik Psikoloji Yüksek Lisans Programı, 2020.

Bu araştırmanın amacı, yetişkin bağlanma tarzlarındaki farklılaşmanın bilişsel esneklik ve duygu düzenleme üzerindeki etkisini incelemektir. Araştırmanın örneklemi gönüllülük esasına dayalı olarak 18-30 yaş arası genç yetişkinlerden oluşmaktadır. Araştırmaya toplam 259 kişi katılmıştır. Çalışmada Yakın İlişkilerde Yaşantılar Envanteri (YİYE), Bilişsel Esneklik Envanteri (BEE), Duygu Düzenlemedeki Zorlantılar Anketi kullanılmıştır. Analiz sonuçlarına göre güvenli bağlanan genç yetişkinlerin daha fazla bilişsel esnekliğe ve korkuyla bağlanan genç yetişkinlerin daha az bilişsel esnekliğe sahip olduğu hipotezi yanlışlanmıştır. Güvenli bağlanan genç yetişkinlerin duygu düzenlemede daha iyi olduğu ve korkuyla bağlanan genç yetişkinlerin duygu düzenlemede daha yetersiz olduğu hipotezleri desteklenmiştir. Araştırmanın güçlü yönleri, sınırlılıkları ve katkıları ilgili literatür ışığında tartışılmıştır.

Anahtar Kelimeler: Bağlanma stilleri, bilişsel esneklik, duygu düzenleme

ABSTRACT

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This study aims to examine the effect of differentiation in adult attachment styles on

cognitive flexibility and emotion regulation. The sample of the study consists of young

adults between the ages of 18-30 voluntarily. A total of 259 people participated in the

research. In the study, the Experiences in Close Relationships Inventory (ECR), The

Cognitive Flexibility Inventory (CFI), Difficulty of Emotion Regulation Scale (DERS)

were used. According to the results of the analysis, the hypothesis was that securely

attached young adults had more cognitive flexibility and fearfully attached young adults

had less cognitive flexibility was not significant. The hypotheses that securely attached

young adults are better at emotion regulation and that fearfully attached young adults are

more deficient in emotion regulation have been confirmed. The strengths, limitations, and

contributions of the study are discussed in light of the relevant literature.

Keywords: Attachment styles, cognitive flexibility, emotion regulation

iii

TABLE OF CONTENTS

ACKNOWLEDGMENTS
ÖZET
ABSTRACTi
TABLE OF CONTENTSiv
LIST OF TABLESvi
LIST OF FIGURESvi
LIST OF ABBREVIATIONSvii
1. INTRODUCTION
1.1. The Problem
1.2. Theoretical Framework
1.2.1. Beginning of the theory
1.2.2. Reflection of attachment styles to adulthood
1.3. Cognitive Flexibility and Emotion Regulation
1.3.1. Cognitive flexibility
1.3.2. Emotion regulation
1.3.3. Relations between components
1.4. Purpose
1.5. Hypotheses
1.6. Importance
2. METHOD1
2.1. Participants1
2.2. Measures1
2.2.1. Informed consent form1
2.2.2. Demographic information form1
2.2.3. Experiences in close relationships inventory1
2.2.4 The cognitive flevibility inventory

2.2.5. Difficulties of emotion regulation scale13
2.3. Procedure
2.4. Statistical Analyses14
3. RESULTS15
3.1. Descriptive Statistics
3.2. Correlation Analysis15
3.3. Inferential Statistics
4. DISCUSSION19
4.1. Overview of the Findings19
4.2. Relationship of Variables with Demographic Information19
4.2.1. Relations with cognitive flexibility19
4.2.2. Relations with emotion regulation19
4.3. Relationship of Main Variables with Attachment Style20
4.3.1. Relations with cognitive flexibility20
4.3.2. Relations with emotion regulation21
4.4. Research' Contributions, Implications, and Limitations22
REFERENCES23
APPENDIX 1: Informed Consent Form
APPENDIX 2: Demographic Information Form
APPENDIX 3: Experiences in Close Relationships Inventory
APPENDIX 4: The Cognitive Flexibility Inventory
APPENDIX 5: Difficulties of Emotion Regulation Scale
APPENDIX 6: Ethics Committee Approval

LIST OF TABLES

Table 1. Frequencies of demographic characteristics	. 11
Table 2. Decriptive statistics	. 15
Table 3. Bivariate relationships among variables	. 18

LIST OF FIGURES

Figure 1. I	Four Category	Model of	Adult Attachment4	Ļ
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LIST OF ABBREVIATIONS

AAI adult attachment interview

ABS attachment behavioral system

AS attachment styles

CF cognitive flexibility

CFI cognitive flexibility inventory

DERS difficulty of emotion regulation scale

ECR experiences in close relationships inventory

ER emotion regulation

1. INTRODUCTION

1.1. The Problem

The period from the first birth to the moment of death, life, is a process in which we collect valuable memories. While some animals can be brought to life as soon as they are born, some animals need a caregiver. The human species needs the presence of a caregiver for a significant part of its life (longer than most animals). Perhaps this is why the concept we call attachment has an important place for individuals. Humans learn to talk, walk, run, perception, etc. concepts in childhood, and use this information in adulthood by adding it to their knowledge. Additionally, attachment is a process that starts from childhood. As a result of the studies, it was found that the attachment process carried over to adulthood. As Bowlby (1973) said, although it's a lifelong process, the impact dimensions of the attachment process in adulthood are generally examined within the scope of romantic relationships (e.g., Fraley & Shaver, 1997). There are many studies describing the difference between adults having different attachment styles (AS). Like attachment, executive functions including cognitive flexibility (CF) and emotion regulation (ER), which are linked to the front of our brain, develop during childhood, which is important for brain development. From this point of view, the effect of differentiation in adult attachment styles on cognitive flexibility and emotion regulation has been investigated in more detail.

1.2. Theoretical Framework

1.2.1. Beginning of the theory

Dorothy Burlingham and Anna Freud (1942, 1944) observed babies and children in a nursery setting about taking care of young children who were out of their mother's care during the second world war. During their observations, they found that when nurses were assigned to children, children were more jealous and intensely possessive towards their 'own' nurse and become hostile towards or rejected by other nurses. After all, the question was why the behaviors of children differ from nurses. Bowlby (1973) started to observe children in two different situations. In one case, it is a nursing home where children are given limited mothering in a residential nursery, in the other case the children are cared for

by a full-time and skilled caregiver in a foster home. After a series of observations mentioned before Bowlby (1973, 1980, 1982/1969) claimed that the attachment mechanism is an inborn regulator mechanism that adapts the newborn's proximity to the attachment figure to assure survival. Bowlby (1982/1969) identified a system and named as *Attachment Behavioral System* (ABS).

In the ABS, the attachment figure, which is the primary caregiver, is suggested to be a shelter from which the infant can emotionally and physically take refuge (Bobwly, 1973). It takes activated when the attachment system detects a physical or emotional threat. This is a goal-corrected motivational mechanism that pushes the infant to proximity seeking the figure of the attachment. In addition, when the attachment figure is in a place that is not easily accessible, it causes separation protest.

The attachment system is triggered where there is a potential danger in the setting and the infant reduces exploratory behavior and seeks proximity, i.e., attachment behavior. The infant can perform 3 different attachments according to different conditions at this stage. If the infant's attachment behavior is reinforced, the ABS's established aim is perceived as "felt security," and the effect is allowed to function as a modulator of adaptive behavior (Sroufe & Waters, 1977). If this cycle happens over and over again, the infant develops a secure attachment style. On the contrary, if the attachment figure exhibits inconsistent behaviors in meeting the infant's physical or emotional needs, the infant develops an insecure AS. In case that the attachment figure consistently rejects proximity, the infant experiences proximity seeking as a non-viable alternative that deactivates the attachment system and attempts to solve problems on his or her own, a phenomenon known as compulsive self-reliance, according to Bowlby (1982/1969). As a result, a high level of attachment avoidance develops. If the attachment figure shows inconsistent approaches to meeting the needs, that is, if it meets the needs at times and does not interfere at other times, the infant increases the attempts to seek closeness to attract the attention of the attachment figure. Since this increases the anxiety level, the infant develops anxious attachment. Ainsworth and her colleagues (1978/2015) characterized these diverse ABS patterns as separate ASs due to series of laboratory investigations that used the "Strange Situation Protocol," a tool created by Ainsworth. These responses were categorized by Ainsworth into three main ASs which are called secure, avoidant, and anxious.

1.2.2. Reflection of attachment styles to adulthood

Attachment, according to Bowlby (1973, 1982/1969), is a lifelong process that occurs "from cradle to grave." It has been suggested that the reinforcement of ASs, moves to advanced ages and affects romantic relationships. Although studies on attachment focused on infancy and childhood when it was first introduced, it was also investigated whether was related to later periods. Main (1996), about 20 years ago, looked at the childhood attachment relationships of adult participants and the loss of attachment figure, and then examined its effects on today's experiences and personality. As a result of these interviews, they developed a scale called *Adult Attachment Interview* (AAI) and it was seen that the results of AAI were consistent with Ainsworth's attachment classification.

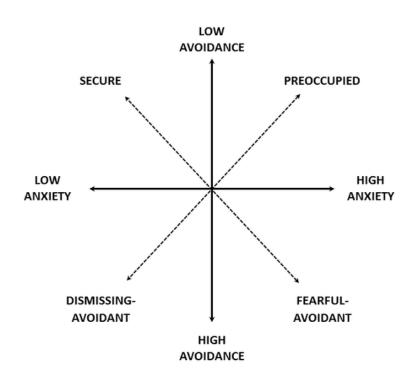
Hazan and Shaver (1987) were the first to define emotional intimacy as an attachment mechanism, arguing that an adult attachment pattern that is analogous to the infant-mother attachment. Adults can be classified into three ASs by romantic relations: secure, avoidant, and anxious/ambivalent, according to Hazan and Shaver (1987), the relative prevalence of the three ASs in adulthood was approximately the same as in infancy, according to research. In addition, adults with a secure AS are self-confident, socially assertive individuals who do not feel comfortable establishing close relationships, anxious/ambivalent adults are those who do not trust themselves and are afraid of rejection and abandonment. On the other hand, avoidant adults seem to avoid close relationships. They are uncomfortable with revealing themselves and socially suppressed (Cooper et al., 1998).

Unlike Hazan and Shaver, Bartholomew and Horowitz (1991) focused on positive /negative self-images or other-images, non-adults' romantic relations. According to Bartholomew and Horowitz (1991), four combinations can be conceptualized if abstraction of a person's image of the self is dichotomized as positive or negative (the self as worthy of love and support or not) and the person's abstract image of the other is also dichotomized as positive or negative (other people are seen as trustworthy and available vs. unreliable and rejecting). While the *model of self* is related to the concepts of whether the individual is worthy of love or not, the *model of others* is related to the concepts related to the individual's view of other people as trustworthy and the degree of closeness with others. As shown in Figure 1, In the model of adult attachment, *securely attached* individuals accept other people in addition to their sense of worthiness (less anxiety and avoidance). Individuals with a *preoccupied attachment* evaluate others positively but show a sense of unworthlessness (much anxiety and less avoidance). In *fearful attachment*, individuals

show worthlessness with anticipation that except themselves will be unreliable and negatively disposed (much anxiety and avoidance). The last AS of the model is the dismissing AS (less anxiety and much avoidance). In this style, it shows a sense of loveworthiness with a negative disposition towards except themselves. Individuals with a dismissing style avoid disappointment by staying away from close relationships. In this way, they maintain their state of independence and immunity.

Figure 1

Four Category Model of Adult Attachment (Fraley, Hudson, Heffernan, and Segal, 2015).



Secure people with a history of positive attachment experiences have been discovered to cope with stress by seeking help from others (Mikulincer & Florian, 1995, 1998; Mikulincer et al., 1993). Furthermore, they were discovered to have positive expectations regarding stress management (Mikulincer & Florian, 1995), a high feeling of self-efficacy (Collins & Read, 1990; Mikulincer & Florian, 1995), and believe in the goodwill of others (Bartholomew & Horowitz, 1991; Collins & Read, 1990). Likewise, Mikulincer and Florian (1998, 1995) observed the insecure people with a negative history of attachment experiences. Insecure people focus excessively on distress signals and mentally fixate over unpleasant experiences. It has been shown that people with an

avoidant AS avoid seeking help and instead believe in repressive mechanisms (Fraley & Shaver, 1997; Mikulincer & Orbach, 1995).

1.3. Cognitive Flexibility and Emotion Regulation

Early childhood is important for attachment as well as for executive functions (Diamond, 2006). Because it is important in the development of the prefrontal cortex, which is critical for executive functions during early childhood. CF and ER are examples of executive functions (Diomand, 2013). Executive function is a type of high-level cognitive processing that involves the authority to manage your goal-directed beliefs and behaviors (for example, prioritizing activities and managing time), organize and use a huge amount of information, and making decisions (Drag and Bieliauskas, 2010).

1.3.1. Cognitive flexibility

People face many difficulties, easy or hard, throughout their life. At this point, the decisive factor is the coping skills we use in the face of difficulties. According to Dennis and Vander Wal (2010), ability of changing cognitions with shifting environments predicts CF. An example of CF is to produce an alternative solution to open the cap when you cannot open the cap of the bottle. People with this ability can replace their challenging and incompatible thoughts with more balanced and harmonious thoughts, produce alternatives, and evaluate difficult situations as more manageable (Gülüm and Dağ, 2012). On the other hand, Martin and Rubin (1995) explained CF in three main areas. Firstly, being aware of alternative ways and options in a situation, the second area is being flexible and willing to adapt to situations, and the last area is feeling competent to be flexible. Martin and Anderson (1998) found that CF was positively related to assertiveness and responsiveness. In addition, individuals who are cognitively flexible feel comfortable in different communications (e.g. public speaking). According to a behavioral response, CF refers to how persistently an individual responds to activities that require shifting mental sets in response to a concrete new stimulus (Dennis & Vander Wal, 2010). If CF is defined as being able to adapt more easily in difficult situations, they can reason more rationally in difficult or traumatic situations. However, after reviewing previous studies, the common point about CF is gathered on responding appropriately to different stimuli (Canas et al., 2006; Hill, 2009; Scoot, 1962; Stevens, 2011).

CF related with psychological disorders such as depression. Beck (1976) stated that individuals with depression remain in a negative cycle. It has been found that individuals who attempt suicide are less flexible cognitively (Deveney & Deldin, 2006). However, CF is not just a concept related to psychological disorders. Our way of thinking, our reactions to events, and our perspective on problems are directly related. Bilgin (2009) said that problem-solving skills and parental attitudes significantly affected the CF level. It has been proven that early life stress, which is associated with concepts such as trust disposition and aggression, is also associated with CF (Zhou et al, 2020).

From the point of view of attachment theory, the individual's AS shapes her mental functions to a great extent, and the individual remains under the influence of her/his cognitive structures in her/his ability to cope with difficult situations or to recover herself/himself in life. Considering that CF is related to performance in shifting tasks, it may be related to flexibility in tasks in individuals with rigid attachment patterns. Odacı and colleagues (2019) conducted a study investigating the relationship between university students' life satisfaction in young adulthood, CF, and ASs. According to the outcomes of the data analysis, there was a positive significant association between student life satisfaction and CF and but a negative significant correlation between life satisfaction and dismissively attach.

1.3.2. Emotion regulation

Emotion is a signal that activates special mechanisms suitable for solving problems, such as fighting, falling in love, and escaping from predators, from an evolutionary point of view (Tooby & Cosmides, 1990). Kleinginna and Kleinginna (1981) analyzed more than a hundred definitions of emotion. After the literature review, researchers have mentioned 4 main components in the definition: expressing what they feel, cognitive process, providing a physiological activation, and leading to the behavior. These four components have said that they explained the emotion of different fields. On the contrary, the cognitive perspective focuses on the instinct and extrinsic components cannot be considered separately, rather than defined as the emotions leading to behavior (Plutchik, 1962).

ER, on the other hand, is about when we have which emotions and how we experience and express the emotions in problems (Gross, 1998). Unlike the first thing that comes to mind, the concept of ER is not only about regulating negative emotions (such as fear, anxiety, anger, and sadness) (Langston, 1994) but also includes maintaining or increasing

positive emotions (Sutton, 1991). Extrinsic and intrinsic mechanisms are involved in ER (Thompson, 1994). Internal mechanisms include self-management. However, an important part of ER involves external influences. External mechanisms include skills such as observing, interpreting, modulating, and monitoring. As infants grow, adults (parents, teachers, etc.) use ER to maintain positive reactions and socialize emotional behavior. In addition, McRae and colleagues (2010) defined ER as the ability to assess, change, and monitor emotions.

Gross (1998) explained ER with a 5-way model. The process model of ER is done by using 5 cognitive strategies as situation selection, situation modification, attentional deployment, cognitive change, and response modulation. Additionally, Lazarus (1999) also said that emotions arise when individuals pay attention to the situation. Gratz and Roemer (2004), ER conceptualizes under four components. Firstly, the individual becomes aware and understands her/his feelings. After, she/he accepts her/his emotions and controls her/his impulses when faced with negative emotions. Finally, she/he regulates her/his emotions and reacts according to the situation. Silver, Hughes, Bornstein, and Beversdorf (2004) explain CF as being able to adapt to new situations using alternative choices, from this point of view, it is difficult to think of it independently of ER, which has characteristics such as attention, directing attention, shifting attention.

1.3.3. Relations between components

According to Bowbly (1973), securely attached individuals interact positively with attachment figures and overcome external problems more easily. Based on attachment theory, they adopt specific ER strategies against stressful events (Mikulincer & Shaver, 2007, 2008). Individuals characterized by insecure AS have more difficulty in ER than individuals characterized by secure AS, and it was found that anxiety is a predictor in the study (Willems, 2011).

Evidence has also been found that behavioral regulation and emotional control along with impairments in attachment in early life can contribute to psychotic-like experiences (the positive and negative symptoms of psychotic disorders such as hearing a voice when you are alone) (Blair et al., 2018). Researchers have stated that those who have psychotic-like experiences have difficulty in ER and have high attachment anxiety because of damage to the regions responsible for their executive functions. In a 10-year longitudinal study examining the role of adult romantic attachment and ER strategies on adult

psychopathology symptoms, it was found that attachment (especially anxious AS) and ER strategies could predict psychopathology (Pascuzzo et al., 2015). It has been observed that the Symptom Checklist 90-Revised, which includes the symptoms of psychopathologies such as anxiety, depression, and obsessive-compulsive disorder, is associated with emotion-focused strategies and different ASs. In a study examining the relationship between ASs and CF levels of MS patients, it was found that there was a negative relationship between anxious attachment / avoidant attachment and CF (Bektaş, 2020). In addition, individuals with anxious attachment felt lonelier.

From a biological perspective, the first years after birth are important for the baby's brain development. Correspondingly, Hositnar, Sullivan, and Gullar (2014) found that early caregiver deficiency affects the hypothalamic-pituitary-adrenal (HPA) axis and increases stress hormones. Similarly, a study found (Hertsgaard et al., 1995) that children with disorganized attachment secrete higher levels of stress hormones than secure attachment. Stress level and CF affect cognitive processes such as ER (Goldfarb et al., 2017; Alexander et al., 2007).

1.4. Purpose

While highlighting the importance of attachment with research, it aims to show how the first years of an infant can affect adulthood. Additionally, this study is to research whether the differentiation in adult ASs correlates with a difference in CF and ER flow. Another aim is to examine that ASs have a relation to emotions and cognition in daily life. The AS we bring from childhood does not have to remain the same for the rest of our lives. It contributes to the literature by going down to the source of the difficulties we experience in our close relationships and daily lives. The secondary and smaller purpose of the research is to raise awareness of individuals' ASs by answering the questionnaire.

1.5. Hypotheses

The hypotheses related to the study are listed below.

H₁: Individuals with a secure AS will have the highest level of CF compared to individuals with the other 3 ASs.

H₂: Individuals with a secure AS will have the highest level of ER among all groups.

H₃: Individuals with a fearful AS will have the lowest level of CF compared to individuals with the other 3 ASs.

H₄: Individuals with a fearful AS will have the lowest level of ER among all groups.

1.6. Importance

As mentioned above, the effects of different ASs in the adult sample are still an issue that needs to be investigated. The importance of this research is to contribute to the literature by looking at the correlational relationship between executive functions and ASs. Although there are many studies on ASs in the literature, there are fewer research that examining the relation between AS and higher-order functions in the brain. When we examine the Turkish literature, the number of research decreases even more. The research allows us to make sense of the relationship between ASs of young adults and cognitive skills such as decision making, problem-solving, emotional awareness, and reflecting emotion.

2. METHOD

2.1. Participants

According to the power analysis made from the G*Power 3.1 Software (Faul et. al., 2007) data is expected to be collected from a minimum of 140 participants (.05 effect size and .80 power with .05 α error probability). There were 343 participants who accepted to voluntarily participate in the study. 82 participants who quitted halfway through the survey were excluded from the data set. Also, two participants using a medicine that could impact executive functions were excluded from the data set. Participants will consist of young adults aged 18-30. According to Erikson, people in this age range have two main conflicts: intimacy versus isolation (Erikson, 2021). Also, this stage covers the period of early adulthood when people are exploring personal relationships (Malone et al., 2016). Final sample consisted of 259 participants aged between 18-30 years (N_{women} = 175; M_{age} = 24.44, SD = 3.63). In addition, not having any diagnosed psychological and/or neurological disease and not using drugs that have the potential to affect cognitive processes are inclusion criteria.

More than half of the participants reported that their educational level is university, [1 = high school (33,8), 2 = two-year degree (1,5%), 3 = university (54,4%), 4 = graduate level (29,7%)]. 60% of participants had a romantic relationship. 25% of those participants reported having more than three years of relationship duration. 8.5% of those participants' relationship duration was between 1-3 years (Table 1).

2.2. Measures

2.2.1. Informed consent form

In the form, the purpose of the study is stated and participants will be informed that the answers will be kept confidential and that the questions will not cause any discomfort, but if they feel uncomfortable for any reason, they can stop answering the questionnaire. Participants will be asked to be sincere and honest in their answers, as their answers will affect the quality and accuracy of the research. It is stated that the participation is entirely voluntary and the e-mail address where the participants can contact the researcher for their questions about the study will be added to the form. Finally, participants will be asked to

confirm that the information they voluntarily participate in the study can be used in scientific publications (Appendix 1).

Table 1. Frequencies of Demographic Characteristics

		Frequency	%
Gender			
	Man	84	32,4
	Woman	175	67,6
Education			
	High school	37	14,3
	Two-year degree	4	1,5
	University	141	54,4
	Graduate level	77	29,7
Relationship Duration			
	0-3 months	31	12,0
	3-12 months	40	15,4
	1-3 years	22	8,5
	More than 3 years	65	25,1

Note: Sixty percent of participants reported that they had a romantic relationship.

2.2.2. Demographic information form

It is developed to determine the socio-demographic characteristics of the participants and to get information about the gender, age, and education level of the participants. In addition, confounding variables were asked in the demographic information form as exclusion criteria (Appendix 2).

2.2.3. Experiences in close relationships inventory

Experiences in Close Relationships Inventory (ECR) was developed by Brennan, Clark, and Shaver in 1998 to measure adult ASs in accordance with Bartholomew and Horowitz's quadruple attachment model. The scale consists of 36 items in total. ECR consists of 2 dimensions. These are the participants' dispositional tendencies to use either hyper-activating (i.e., anxious) or de-activating (i.e., avoidant) strategies in regulating their emotions and behavior in close interpersonal relationships - namely, their levels of attachment anxiety and avoidance. Each dimension is measured with 18 items. The scale

items are 7-point Likert type (1 = does not describe me at all; 7 = completely describes me).

The ECR has been adapted to Turkish, examined in terms of its factor structure in Turkish samples, and shown to have good construct validity (Sümer, 2006). It is the same as the original scale in terms of the number of items, dimensions of the scale, and scoring. As a result of the two-factor solution, 38% of the total variance was explained. According to the data in Sümer's research (2006), high-reliability coefficients were found in both dimensions (.85 for the anxiety subscale, and .92 for the avoidance subscale). The weak and insignificant relationship between anxiety and avoidance (r= .12) dimensions was consistent with the findings of Brennan et al (1998). A low score on the anxiety and scale subscales indicates a secure AS, and a high score indicates a fearful AS. High score on the anxiety dimension and low score on the avoidance dimension are classified as having a preoccupied AS. Low score on the anxiety dimension and high on the avoidance dimension are classified in the dismissive AS. It takes 3-4 minutes to complete the scale (Appendix 3). Turkish version of the scale was found as reliability for anxious (Cronbach's alpha = .92) and avoidant (Cronbach's alpha = .91) subscales in the current study.

2.2.4. The cognitive flexibility inventory

The Cognitive Flexibility Inventory (CFI) was created by Dennis and Vander Wal (2010) to measure CF. The scale consists of 20 items. The scale has three sub-dimensions: (a) the tendency to perceive difficult situations as controllable; (b) the ability to perceive multiple alternative explanations for life occurrences and human behavior; and (c) the ability to generate multiple alternative solutions to difficult situations (Dennis and Vander Wal, 2010). The scale is rated on a 5-point Likert type.

CFI was adapted to Turkish by Gülüm and Dağ (2012). It is the same as the original scale in terms of the number of items. The Turkish version of CFI has two dimensions: control and alternative. The control dimension consists of 13 items and the alternative dimension consists of 17 items. The scale is rated on a 5-point Likert type (1= not suitable at all; 5 = totally appropriate). As a result of the two-factor solution, 49.8% of the total variance was explained. Also in this study, Cronbach's alpha was calculated as .90. It is thought that as the score obtained from the scale increases, CF also increases. It takes 1-2 minutes to complete the scale (Appendix 4). Total CFI scale (Cronbach's alpha = .70) and

the two dimensions (alternative, Cronbach's alpha = .89; control, Cronbach's alpha = .75) were found as reliable in the current study.

2.2.5. Difficulties of emotion regulation scale

The difficulty of Emotion Regulation Scale (DERS) was developed by Gratz and Roemer (2004). It is consisting of 36 items. It consists of 6 sub-scales, namely lack of awareness about emotional responses (awareness), lack of clarity about emotional responses (clarity), non-acceptance of emotional responses (non-acceptance), lack of strategies while dealing with negative emotions (strategies), impulse control difficulties while dealing with negative emotions (impulse), and lack of goal-directed behavior while dealing with negative emotions (goals). The scale is rated on a 5-point Likert type.

The scale was adapted into Turkish by Rugancı and Gençöz (2010). The scale is consisting of 35 items. As a result of their analysis, it was decided that one item (i.e., "when I am upset, I acknowledge my feelings") was excluded in the Turkish version. The Turkish version of DERS consists of 6 sub-scales: awareness, clarity, non-acceptance, strategies, impulse, and goals. The scale is rated on a 5-point Likert type. Higher scores indicate that ER is more difficult. The total variance for six factors was found 62.4%. The reliability of the Turkish version was .94. Higher scores show indicating difficulty of ER. It takes 3-4 minutes to complete the scale (Appendix 5). DERS was found as reliable in the current study (Cronbach's alpha = .95). The six subscales were also found as reliable (awareness, Cronbach's alpha = .75; clarity Cronbach's alpha = .83; non-acceptance, Cronbach's alpha = .92; strategies, Cronbach's alpha = .75; impulse, Cronbach's alpha = .88; goals, Cronbach's alpha = .87).

2.3. Procedure

After obtaining permission from the Başkent University IRB committee, the research began. A link is sent to the participants online via social media. Online questionnaires were sent to the participants through the qualtrics. Participants who have approved the consent form were applied to the Experiences in Close Relationships Inventory (ECR; Brennan et al., 1998) to learn the AS of the participants. Afterward, participants answered the CFI and DERS. Participants completed the test in 20-25 minutes on their computers or mobile phones.

2.4. Statistical Analyses

MANOVA was used because there was more than one dependent variable and the independent variable has 4 levels. The data were analyzed via SPSS 20.0. While the independent variable in this study was AS (secure, dismissing, preoccupied, and fearful), the dependent variable was executive functions (CF and ER).

3. RESULTS

3.1. Descriptive Statistics

In this section, first, descriptive statistics (mean, standard deviation, minimum and maximum values, skewness, kurtosis, and alpha coefficients) of the three scales (including the subscales) were reported (see Table 2). As could be seen from the table, there was not a violation in normality assumption based on skewness and kurtosis values (< +2 or > -2; George and Mallery, 2010). Data were collected from 259 participants aged 18-30. More than half of the participants are university students and are in a romantic relationship.

 Table 2. Descriptive Statistics

Scale/Subscale	M	SD	Min	Max	Skewness	Kurtosis	Alpha
Search Subsearc		52	11111	1/10/1	Site wheels	110110010	- I II piiu
AVOIDANT	3.11	1.17	1.00	6.33	0.37	-0.60	0.91
ANXIOUS	3.50	1.29	1.00	6.72	0.21	-0.52	0.92
CFI	3.63	0.36	2.10	5.00	-0.24	2.10	0.7
CFI_F1	4.02	0.53	2.15	5.00	-0.54	1.20	0.89
CFI_F2	2.90	0.70	1.57	5.00	0.32	-0.37	0.75
DERS	2.39	0.72	1.00	4.68	0.44	-0.22	0.95
DERS_F1	2.14	1.03	1.00	5.00	0.89	0.30	0.75
DERS_F2	3.00	0.98	1.00	5.00	0.12	-0.56	0.83
DERS_F3	2.32	0.92	1.00	5.00	0.58	-0.27	0.92
DERS_F4	2.30	0.71	1.10	4.40	0.50	0.16	0.75
DERS_F5	2.34	0.95	1.00	4.75	0.65	-0.34	0.88
DERS_F6	2.39	0.80	1.00	5.00	0.65	0.34	0.87

Note: CFI = total cognitive flexibility score; CFI_F1 = subscale of CFI regarding alternatives; CFI_F2 = subscale of CFI regarding control; DERS = total score about difficulty in emotion regulation; DERS_F1 = subscale of DERS regarding non-acceptance of emotional responses; DERS_F2 = subscale of DERS about difficulties engaging in goal-directed behavior; DERS_F3 = subscale of DERS regarding impulse control difficulties; DERS_F4 = subscale of DERS regarding lack of emotional awareness; DERS_F5 = subscale of DERS regarding limited access to emotion regulation strategies; DERS_F6 = subscale of DERS regarding lack of emotional clarity.

3.2. Correlation Analysis

Bivariate correlations were interpreted based on Pearson's r as shown in Table 3. Also, relationship duration was negatively associated with avoidant AS, (r = -.192, p = .016).

Total CFI was found as positively associated with its subscales regarding alternatives and control (r = .761, p < .001; r = .406, p < .001, respectively). In addition, it was positively related to non-acceptance of emotional responses (r = .166, p = .008) but there was a negative relationship between total CFI and lack of emotional awareness (r = .240, p < .001). The subscale of CFI regarding alternatives was negatively related to avoidant AS (r = -.163, p = .009), anxious AS (r = -.223, p < .001), total DERS (r = -.416, p < .001), The subscale of CFI regarding control was positively associated with avoidant AS (r = .219, p < .001), anxious AS (r = .460, p < .001), total DERS (r = .692, p < .001). The relationship of the total CFI to the sub-dimensions ranges between -.284 and .177 (see Table 3 for details).

Avoidant AS was positively related to anxious AS (r = .297, p < .001), total DERS (r = .324, p < .001), non-acceptance of emotional responses (r = .346, p < .001), difficulties engaging in goal-directed behavior (r = .165, p < .001), impulse control difficulties (r = .225, p = .008), lack of emotional awareness (r = .253, p < .001), limited access to ER strategies (r = .235, p < .001), and lack of emotional clarity (r = .319, p < .001).

Anxious AS was positively related to total DERS (r = .597, p < .001), non-acceptance of emotional responses (r = .554, p < .001), difficulties engaging in goal-directed behavior (r = .459, p < .001), impulse control difficulties (r = .549, p < .001), lack of emotional awareness (r = .177, p = .004), limited access to ER strategies (r = .574, p < .001), and lack of emotional clarity (r = .335, p < .001).

Total DERS was positively related to non-acceptance of emotional responses (r = .810, p < .001), difficulties engaging in goal-directed behavior (r = .771, p < .001), impulse control difficulties (r = .882, p < .001), lack of emotional awareness (r = .414, p = .004), limited access to ER strategies (r = .927, p < .001), and lack of emotional clarity (r = .897, p < .001). The relationship of the total DERS to the sub-dimensions ranges between .761and .927 (see Table 3 for details).

3.3. Inferential Statistics

Before testing the hypotheses, first, a two-step cluster analysis was conducted to create four attachment dimensions based on anxious attachment and avoidant attachment scores suggested by Sümer (2006). As a result of the analysis, the size of the smallest cluster consisted of participants with a fearful AS (N = 42). The size of the largest cluster

included participants with dismissive AS (N = 83). Sixty-six participants were placed as having preoccupied attachment and 68 participants were defined as having a secure AS.

Subsequently, a MANOVA was conducted to examine whether two executive functions, i.e., CF and difficulty in ER, would differ across the four ASs. Box's test showed that the assumption for equality of covariances matrices was violated, p = .001. As indicated by Field, such a violation would not be a problem unless the p-value is less than .001 (Field, 2018). However, Pillai's trace was reported due to a violation of equality of covariances matrices (Tabachnik & Fidell, 2007).

Using Pillai's trace, there were significant differences across the ASs in terms of CF and difficulty in ER, V = 0.33, F(6, 510) = 17.05, p < 0.001, partial $\eta^2 = .167$. Then, a separate univariate analysis of the two dependent variables was examined. For CF, Levene's test indicated that there was not violation for homogeneity of variances assumption, F(3, 255) = .847, p = .469. Findings suggested that there was no main effect of attachment on CF, meaning that CF scores did not differ across the four attachment dimensions.

For difficulty in ER, Levene's test indicated that homogeneity of variances assumption was violated, F(3, 255) = 3.791, p = .011. Findings suggested that there was a significant main effect of ASs on difficulties in ER strategies, F(3, 255) = 38.568, p < .001, partial $\eta^2 = .312$. A post hoc test via Bonferroni correction was conducted to examine the group differences across the four ASs. It was found that people with secure AS (M = 1.81,SE = 0.07) had significantly the least difficulty in ER compared to participants with preoccupied (M = 2.48, SE = 0.07), dismissive (M = 2.47, SE = 0.07), and fearful ASs (M = 2.48, SE = 0.07)3.04, SE = 0.09), ps < .001. Moreover, all pairwise comparisons across the four attachment dimensions were significant (except for preoccupied vs. dismissive AS) in terms of difficulties in ER, ps < .001. Therefore, people with fearful AS had the highest scores regarding the difficulty in ER. Overall, Hypothesis 1 and Hypothesis 3 failed to be confirmed Hypothesis 2 Hypothesis but and were confirmed.

Table 3. Bivariate Relationships Among Variables

		1	2	3	4	5	6	7	8	9	10	11	12	13	14
1	Age														
2	Education	.473***													
3	Relationship duration	.350***	.240**												
4	CFI	014	.067	022											
5	CFI_F1	.043	.092	114	.761***										
6	CFI_F2	08	031	.123	.406***	284***									
7	AVOIDANT	226***	198**	192*	.007	163**	.219***								
8	ANXIOUS	096	039	.021	.099	223***	.460***	.297***							
9	DERS	192**	103	.011	.071	416***	.692***	.324***	.597***						
10	DERS_F1	101	078	.011	.166**	254***	.603***	.346***	.554***	.810***					
11	DERS_F2	265***	101	.106	.108	312***	.599***	.165**	.459***	.771***	.560***				
12	DERS_F3	152*	068	.013	.077	366***	.628***	.225***	.549***	.882***	.682***	.716***			
13	DERS_F4	077	118	065	240**	396***	.204**	.253***	.177**	.414***	.276***	.117	.225***		
14	DERS_F5	129*	029	.047	.083	366***	.639***	.235***	.574***	.927***	.703***	.720***	.834***	.214**	
15	DERS_F6	208**	169**	099	.012	291***	.428***	.319***	.335***	.697***	.449***	.367***	.480***	.492***	.498***

Note: *p < .05; **p < .01; ***p < .001. CFI = total cognitive flexibility score; CFI_F1 = subscale of CFI regarding alternatives; CFI_F2 = subscale of CFI regarding control; DERS = total score about difficulty in emotion regulation; DERS_F1 = subscale of DERS regarding non-acceptance of emotional responses; DERS_F2 = subscale of DERS about difficulties engaging in goal-directed behavior; DERS_F3 = subscale of DERS regarding impulse control difficulties; DERS_F4 = subscale of DERS regarding lack of emotional awareness; DERS_F5 = subscale of DERS regarding limited access to emotion regulation strategies; DERS_F6 = subscale of DERS regarding lack of emotional clarity.

4. DISCUSSION

4.1. Overview of the Findings

Data were collected from 259 young adults. The majority of the participants in the research are women (67.6%). When evaluated in terms of romantic relationship; it was seen that the majority had a relationship for more than 3 years (25.1%). When the educational status is examined; It has been observed that the education level of the majority is university. In terms of educational status, university students (54.4%) take the first place.

The research aimed to investigate the relationship between adult ASs, cognitive flexibility, and ER. In this direction, 4 hypotheses were determined. The data were collected by snowball sampling management through an online questionnaire. The collected data were analyzed in the SPSS package program. According to the results, the hypotheses that securely attached young adults have more CF (H₁) and fearfully attached young adults have less CF (H₃) have been falsified. The hypotheses were confirmed that securely attached young adults were better at regulating emotion (H₂) and fearfully attached young adults were more deficient in regulating emotion (H₄). Details of the findings are discussed in the following headings.

4.2. Relationship of Variables with Demographic Information

4.2.1. Relations with cognitive flexibility

In the alternatives and control sub-dimension of CFI and total CFI, there was found no significant difference with age. The brain continues to develop until the late twenties (Giedd et al., 199). In addition, it is known that CF decreases with age (Magnusson & Brim, 2014; Tierney & Nelson, 2009). The sample consists of young adults aged 18-30 years. This differentiation in CF level may have been observed because data were collected from a sample that may be at different maturity of brain development.

4.2.2. Relations with emotion regulation

Examining the young adult sample, it was found that ER becomes more difficult as age gets younger (r = -.192, p < .01). In direct proportion to the literature, it is normal for

the younger age group to have difficulty in ER (Baltes & Baltes, 1990; Carstensen et al., 2011; Gross et al., 1997). Individuals gain more emotional experience as they get older. They are more motivated to regulate their emotions (Carstensen, 1992). However, older couples reported less negative affect during the argument (Levenson et al., 1991).

4.3. Relationship of Main Variables with Attachment Style

4.3.1. Relations with cognitive flexibility

As mentioned before, findings suggested that there was no main effect of attachment on cognitive flexibility, F(3, 255) = .847, p = .469. The increase or decrease in CF was not associated with any AS. However, when the literature is examined, many studies find a relationship between the two variables. Martin and Anderson's study (1998) concluded that individuals with high levels of secure attachment also have high cognitive flexibility. In a study by Weidmann and Chopik (2022), it looked at the attachment styles and CF levels of older couples. According to the research, it was found that individuals with anxious attachment had lower CF levels. They stated that insecure attachment is a potential risk for elderly couples in terms of their cognitive levels. In another study, found that there is a balancing role between CF and insecure attachment (Dağ & Gülüm, 2013). They stated that the relationship between CF and ASs is important. When we interpret why CF and ASs are related, we can associate it with authoritarian parental attitudes (Bilgin, 2009). In another study (Dedeler, 2016), findings were obtained in line with the stronger the attachment to parents, the higher the CF levels of individuals. In another study conducted in Turkey, it was found that there was a relationship between the strength of attachment of the participants to their mothers and fathers and their cognitive flexibility levels (Edemen, 2021).

Mikulincer and colleagues (2000) argued that our ASs are not as conscious as we think and should be activated. Therefore, several studies have been carried out to ensure binding activation (Mikulincer & Shaver, 2007, 2008). As a result of researches, they found that the rate of affecting cognitive functions was higher in groups in which he activated attachment. No binding activation manipulation was performed in the study. Therefore, it may not have addressed the consciousness levels of the people. Additionally, in another study, the differentiation of attention and CF processes according to attachment

styles was studied (Gillath et al, 2009). When experiences about insecurity primed, it was found that the performance of the insecurely attached participants decreased.

From another point of view, it has been observed that CF was measured by experimental methods in many studies that found a difference between CF and ASs (Dennis & Wander Val, 2010; Sakman, 2011; Zhang, 2011). In this study, CF was measured by collecting data with a questionnaire. Due to methodological differences, an existing difference may not have been found.

4.3.2. Relations with emotion regulation

In the study, a significant relationship was found between ASs and ER, F(3, 255) = 38.568, p < .001. When the related literature is examined, the studies conducted are in direct proportion with the results. The quality of the attachment relation affects children's ER via the child's expectations (Bowlby, 1969/1982). Likewise, research examining the relationship between ER abilities and ASs has found that people acquire distinct ER strategies based on their ASs (Kobak & Sceery, 1988; Nolte et al., 2011).

Looking at the differences between ER and different types of attachment, it was found that those who had the least difficulty in ER were those with a SAS in the present study, (M = 1.81, SE = 0.07, p < .001). Infants with secure attachment pick up the emotional signal better and learn abilities in regulating not just positive but also negative emotions as a result of the caregiver's consistent attention (Bowlby, 1969/1982). Experience with the caregiver is built over the years and carried into adulthood as an ER skill. Kobak and Sceery (1988) stated that individuals with a SAS seek help in order to accept and cope with emotions when under stress. Moreover, many research has been undertaken in the literature that suggests that securely attached adults have less difficulty in ER (Fonagy et al., 1996; Mikulincer & Florian, 1995, 1998; Nesayan & Gandomani, 2018; Ozeren, 2021).

They can reduce or expand their emotional expression who have insecure attachments (Bretherton, 1990). According to Bartholomew and Horowitz's attachment theory (1991), the avoidant AS is divided into fearful and dismissive. Therefore, research on avoidant attachment was also included when reviewing the relevant literature. On the other hand, in the present study, individuals with fearful attachment were found to have the most difficulty in ER (M = 3.04, SE = 0.09, p < .001). Wei and colleagues (2005) found in their study that avoidant attachment individuals cut off their emotions instead of regulating

their emotions. In a study on ER and ASs of adolescents, it was found that attachment with fear significantly predicted ER (Aydemir, 2020). In summary, the relationship between ER and ASs was found to be similar to the literature.

4.4. Research' Contributions, Implications, and Limitations

A lot of research has been done on ASs, but most of this research involves the childhood process. A significant part of the studies conducted with adult individuals was conducted to look at the effect of attachment on romantic relationships. In this study, it was examined whether the differentiation in ASs had an effect on the daily lives of individuals. As with any research, this research has limitations. Data were collected from the online environment by means of snowball sampling. This means that it can only reach a small group of people. For this reason, a relationship with CF may not be found. In future studies, the in-depth relationship of executive functions can be examined by making attachment activation. If future studies research executive functions, most limitations can be avoided by choosing an experimental method as the method.

In a study conducted with 80 individuals with an anxious attachment style, they were divided into two groups that would receive training for cognitive bias (Doolan & Bryant, 2021). At the end of the study, participants in the group that received training to reduce cognitive biases found that they formed sentences with significantly less cognitive biases. ER was found to be associated with attachment styles. In this case, a training program can be developed for individuals with different attachment styles. In this way, individuals can learn strategies that are unique to them. However, if we know the attachment styles of clients in therapy sessions, we can be more effective in determining the right strategies to use in their daily lives.

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APPENDIX 1: INFORMED CONSENT FORM

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BİLGİLENDİRİLMİŞ ONAM FORMU

Bu çalışma, Başkent Üniversitesi Psikoloji Bölümü Klinik Psikoloji Yüksek Lisans öğrencisi Psk. Serenay Dilmen tarafından, Doç. Dr. Elvin Doğutepe danışmanlığında yüksek lisans tezi olarak yürütülmektedir. 18-30 yaş arasındaki bireylerin bağlanma stillerinin bilişsel işlevlerini nasıl etkilediğini incelemek amacıyla yapılmaktadır. Çalışma gizlilik prensibi ile yürütülmekte olup araştırmacı dışında kimse verdiğiniz yanıtları görmeyecektir. Çalışma esnasında kimliğinize ilişkin her hangi bir bilgi talep edilmeyecektir ve toplanan veriler bireysel olarak değil, toplu analizlerle incelenecektir. Ölçekler kişisel olarak rahatsızlık verecek maddeler içermemektedir. Katılım sırasında ölçek maddelerinden ya da başka bir nedenden kaynaklanan bir rahatsızlık hissederseniz ölçekleri doldurmayı bırakabilirsiniz. Ölçek grubunu doldurmanız yaklaşık yarım saatinizi alacaktır, çalışmanın sağlıklı sonuçlar verebilmesi ve psikoloji alanına amaçladığımız katkıda bulunabilmeniz için maddelere vereceğiniz yanıtların gerçek düşünce ve durumunuzu yansıtması büyük önem taşımaktadır. Ölçek grubunun içerdiği hiçbir soruyu boş bırakmadan yanıtlamanız da verdiğiniz yanıtların değerlendirmeye alınması açısından önemlidir. Araştırma veya araştırma sonuçları ile ilgili bilgi almak isterseniz e-posta adresinden bize ulaşabilirsiniz.

Katılım ve katkınız için teşekkür ederiz.

Danışman: Araştırmacı:

Doç. Dr. Elvin DOĞUTEPE Psk. Serenay DİLMEN

Bu çalışmaya tamamen gönüllü olarak katılıyorum. Verdiğim bilgilerin bilimsel amaçlı yayınlarda kullanılmasını kabul ediyorum.

KABUL EDİYORSANIZ LÜTFEN YANDAKİ KUTUYU İŞARETLEYİNİZ

APPENDIX 2: DEMOGRAPHIC INFORMATION FORM

Doğum yılı:
Cinsiyet:
Öğrenim durumu:
Lise ()
Lisans ()
Lisansüstü ()
Başka bir öğrenim duruma sahipseniz belirtiniz:
Şu an da herhangi bir romantik ilişkiniz (evli, sevgilisi var, flörtü var vb.) var mı? (Bu sorunun cevabı sizin için hayır ise 5 ve 6. Soruları cevaplamayınız.) Evet () Hayır ()
Şu an da herhangi bir romantik ilişki içerisindeyseniz lütfen türünü belirtiniz
Flört () Platonik ()
Sevgili () Evli ()
Romantik ilişkinizin süresini belirtiniz.
0-3 ay () 3-12 ay ()
1-3 yıl () 3 yıldan fazla ()
Herhangi bir ilaç kullanıyor musunuz?
Evet () Hayır ()
Evet ise belirtiniz:
Daha önce psikolojik/nörolojik bozukluklarla ilişkili herhangi bir tanı aldınız mı?
Evet () Hayır () Evet ise belirtiniz:

APPENDIX 3: EXPERIENCES IN CLOSE RELATIONSHIPS INVENTORY

Aşağıda yakın ilişkilerle ilgili bazı durumlar verilmiştir. Lütfen gerekli cümleyi okuyunuz, yanındaki boşluğa 1- hiç katılmıyorum, 7- tamamen katılıyorum olmak üzere puan veriniz.

liç atılmıyorum

Tamamen tatılıyorum

	- -						
	1	2	3	4	5	6	7
1. Gerçekte ne hissettiğimi birlikte olduğum kişiye göstermemeyi tercih ederim.							
2. Terk edilmekten korkarım.							
3. Romantik ilişkide olduğum kişilere yakın olmak konusunda çok rahatım.							
4. İlişkilerim konusunda çok kaygılıyım.							
5. Birlikte olduğum kişi bana yakınlaşmaya başlar başlamaz kendimi geri çekiyorum.							
6. Romantik ilişkide olduğum kişilerin beni, benim onları umursadığım kadar umursamayacaklarından endişelenirim.							
7. Romantik ilişkide olduğum kişi çok yakın olmak istediğinde rahatsızlık duyarım.							
8. Birlikte olduğum kişiyi kaybedeceğim diye çok kaygılanırım.							
9. Birlikte olduğum kişilere açılma konusunda kendimi rahat hissetmem.							
10. Genellikle, birlikte olduğum kişinin benim için hissettiklerinin benim onun için hissettiklerim kadar güçlü olmasını arzu ederim.							

11. Birlikte olduğum kişiye yakın olmayı isterim, ama sürekli kendimi geri çekerim.				
12. Genellikle birlikte olduğum kişiyle tamamen bütünleşmek isterim ve bu bazen onları korkutup benden uzaklaştırır.				
13. Birlikte olduğum kişilerin benimle çok yakınlaşması beni gerginleştirir.				
14. Yalnız kalmaktan endişelenirim.				
15. Özel duygu ve düşüncelerimi birlikte olduğum kişiyle paylaşmak konusunda oldukça rahatımdır.				
16. Çok yakın olma arzum bazen insanları korkutup uzaklaştırır.				
17. Birlikte olduğum kişiyle çok yakınlaşmaktan kaçınmaya çalışırım.				
18. Birlikte olduğum kişi tarafından sevildiğimin sürekli ifade edilmesine gereksinim duyarım.				
19. Birlikte olduğum kişiyle kolaylıkla yakınlaşabilirim.				
20. Birlikte olduğum kişileri bazen daha duygu ve bağlılık göstermeleri için zorladığımı hissederim.				
21. Birlikte olduğum kişilere güvenip dayanma konusunda kendimi rahat bırakmakta zorlanırım.				
22. Terk edilmekten pek korkman				
23. Birlikte olduğum kişilere fazla yakın olmamayı tercih ederim.				
24. Birlikte olduğum kişinin bana ilgi göstermesini sağlayamazsam üzülür ya da kızarım.				
25. Birlikte olduğum kişiye hemen hemen her şeyi anlatırım.				
26. Birlikte olduğum kişinin bana istediğim kadar yakın olmadığını düşünürüm.				

27. Sorunlarımı ve kaygılarımı genellikle birlikte olduğum kişiyle tartışırım.				
28. Bir ilişkide olmadığım zaman kendimi biraz kaygılı ve güvensiz hissederim.				
29. Birlikte olduğum kişilere güvenip dayanmakta rahatımdır.				
30. Birlikte olduğum kişi istediğim kadar yakınımda olmadığında kendimi engellenmiş hissederim.				
31. Birlikte olduğum kişi istediğim kadar yakınımda olmadığında kendimi engellenmiş hissederim.				
32. İhtiyaç duyduğumda birlikte olduğum kişiye ulaşamazsam kendimi engellenmiş hissederim.				
33. İhtiyaç duyduğumda birlikte olduğum kişiden yardım istemek işe yarar.				
34. Birlikte olduğum kişiler beni onaylamadıkları zaman kendimi gerçekten kötü hissederim.				
35. Rahatlama ve güvencenin yanısıra birçok şey için birlikte olduğum kişiyi ararım.				
36. Birlikte olduğum kişi benden ayrı zaman geçirdiğinde üzülürüm.				

APPENDIX 4: THE COGNITIVE FLEXIBILITY INVENTORY

Aşağıdaki ifadelerin size ne kadar uygun olduğunu göstermek için lütfen ifadelerin sağında yer alan ölçeği kullanınız.

	Hiç uygun değil	Pek uygun değil	Kararsızım	Uygun	Tamamen uygun
1. Durumları "tartma" konusunda iyiyimdir.	1	2	3	4	5
2. Zor durumlarla karşılaştığımda karar vermekte güçlük çekerim.	1	2	3	4	5
3. Karar vermeden önce çok sayıda seçeneği dikkate alırım.	1	2	3	4	5
4. Zor durumlarla karşılaştığımda kontrolümü kaybediyormuşum gibi hissederim.	1	2	3	4	5
5. Zor durumlara değişik açılardan bakmayı tercih ederim.	1	2	3	4	5
6. Bir davranışın nedenini anlamak için önce, elimdekinin dışında ek bilgi edinmeye çalışırım.	1	2	3	4	5
7. Zor durumlarla karşılaştığımda öyle strese girerim ki sorunu çözecek bir yol bulamam.	1	2	3	4	5
8. Olaylara başkalarının bakış açısından bakmayı denerim.	1	2	3	4	5
9. Zor durumlarla baş etmek için çok sayıda değişik seçeneğin olması beni sıkıntıya sokar.	1	2	3	4	5
10. Kendimi başkalarının yerine koymakta başarılıyımdır.	1	2	3	4	5
11. Zor durumlarla karşılaştığımda ne yapacağımı bilemem.	1	2	3	4	5
12. Zor durumlara farklı açılardan bakmak önemlidir.	1	2	3	4	5
13. Zor durumlarda nasıl davranacağıma karar vermeden önce birçok seçeneği dikkate alırım.	1	2	3	4	5
14. Durumlara farklı bakış açılarından bakarım.	1	2	3	4	5
15. Hayatta karşılaştığım zorlukların üstesinden gelmeyi becerebilirim.	1	2	3	4	5

16. Bir davranışın nedenini düşünürken mevcut bütün bilgileri ve gerçekleri dikkate alırım.	1	2	3	4	5
17. Zor durumlarda, şartları değiştirecek gücümün olmadığını hissederim.	1	2	3	4	5
18. Zor durumlarla karşılaştığımda önce bir durup çözüm için farklı yollar düşünmeye çalışırım.	1	2	3	4	5
19. Zor durumlarla karşılaştığımda birden çok çözüm yolu bulabilirim	1	2	3	4	5
20. Zor durumlara tepki vermeden önce birçok seçeneği dikkate alırım.	1	2	3	4	5

APPENDIX 5: DIFFICULTIES OF EMOTION REGULATION SCALE

Aşağıda insanların duygularını kontrol etmekte kullandıkları Bazı yöntemler verilmiştir. Lütfen her durumu dikkatlice okuyunuz ve her birinin sizin için ne kadar doğru olduğunu içtenlikle değerlendiriniz. Değerlendirmenizi uygun cevap önündeki yuvarlak üzerine çarpı (X) koyarak işaretleyiniz.

1. Ne hissettiğim konu	ısunda netimdir.			
O Nerdeyse hiçbir zaman	O Bazen	O Yaklaşık yarı yarıya	O Çoğu zaman	O Nerdeyse her zaman
2. Ne hissettiğimi dikl	kate alırım.			
O Nerdeyse hiçbir zaman	O Bazen	O Yaklaşık yarı yarıya	O Çoğu zaman	O Nerdeyse her zaman
3. Duygularım bana d	ayanılmaz ve kor	ntrolsüz gelir.		
O Nerdeyse hiçbir zaman	O Bazen	O Yaklaşık yarı yarıya	O Çoğu zaman	O Nerdeyse her zaman
4. Ne hissettiğim konu	ısunda net bir fik	rim vardır.		
O Nerdeyse hiçbir zaman	O Bazen	O Yaklaşık yarı yarıya	O Çoğu zaman	O Nerdeyse her zaman
5. Duygularıma bir an	lam vermekte zo	rlanırım.		
O Nerdeyse hiçbir zaman	O Bazen	O Yaklaşık yarı yarıya	O Çoğu zaman	O Nerdeyse her zaman
6. Ne hissettiğime dik	kat ederim.			
O Nerdeyse hiçbir zaman	O Bazen	O Yaklaşık yarı yarıya	O Çoğu zaman	O Nerdeyse her zaman
7. Ne hissettiğimi tam	olarak bilirim.			
O Nerdeyse hiçbir zaman	O Bazen	O Yaklaşık yarı yarıya	O Çoğu zaman	O Nerdeyse her zaman
8. Ne hissettiğimi öne	mserim.			
O Nerdeyse hiçbir zaman	O Bazen	O Yaklaşık yarı yarıya	O Çoğu zaman	O Nerdeyse her zaman

9. Ne nissettigim kont	usunda karmaşa y	aşarım.		
O Nerdeyse hiçbir zaman	O Bazen	O Yaklaşık yarı yarıya	O Çoğu zaman	O Nerdeyse her zaman
10. Kendimi kötü hiss	settiğimde, bu duy	gularımı kabul ederim.		
O Nerdeyse hiçbir zaman	O Bazen	O Yaklaşık yarı yarıya	O Çoğu zaman	O Nerdeyse her zaman
11. Kendimi kötü hiss	settiğimde, böyle	hissettiğim için kendim	e kızarım.	
O Nerdeyse hiçbir zaman	O Bazen	O Yaklaşık yarı yarıya	O Çoğu zaman	O Nerdeyse her zaman
12. Kendimi kötü hiss	settiğimde, böyle	hissettiğim için utanırın	1.	
O Nerdeyse hiçbir zaman	O Bazen	O Yaklaşık yarı yarıya	O Çoğu zaman	O Nerdeyse her zaman
13. Kendimi kötü hiss	settiğimde, işlerin	ni yapmakta zorlanırım.		
O Nerdeyse hiçbir zaman	O Bazen	O Yaklaşık yarı yarıya	O Çoğu zaman	O Nerdeyse her zaman
14. Kendimi kötü hiss	settiğimde, kontro	lümü kaybederim.		
O Nerdeyse hiçbir zaman	O Bazen	O Yaklaşık yarı yarıya	O Çoğu zaman	O Nerdeyse her zaman
15. Kendimi kötü hiss	settiğimde, uzun s	üre böyle kalacağımı in	anırım.	
O Nerdeyse hiçbir zaman	O Bazen	O Yaklaşık yarı yarıya	O Çoğu zaman	O Nerdeyse her zaman
16. Kötü hissettiğimde	e, sonuç olarak yo	oğun depresif duygular	içinde olacağımı inar	nırım.
O Nerdeyse hiçbir zaman	O Bazen	O Yaklaşık yarı yarıya	O Çoğu zaman	O Nerdeyse her zaman
17. Kendimi kötü hiss	settiğimde, duygu	larımın yerinde ve önen	nli olduğuna inanırın	1.
O Nerdeyse hiçbir zaman	O Bazen	O Yaklaşık yarı yarıya	O Çoğu zaman	O Nerdeyse her zaman
18. Kendimi kötü hiss	settiğimde, başka	şeyler odaklanmakta zo	rlanırım.	
O Nerdeyse hiçbir	O Bazen	O Yaklaşık yarı yarıya	O Çoğu zaman	O Nerdeyse her

19. Kendımı kötü hiss	ettiğimde, kendin	nı kontrolden çıkmış hı	ssederim.	
O Nerdeyse hiçbir zaman	O Bazen	O Yaklaşık yarı yarıya	O Çoğu zaman	O Nerdeyse her zaman
20. Kendimi kötü hiss	ettiğimde, halen i	şlerimi sürdürebilirim.		
O Nerdeyse hiçbir zaman	O Bazen	O Yaklaşık yarı yarıya	O Çoğu zaman	O Nerdeyse her zaman
21. Kendimi kötü hiss	ettiğimde, bu duy	gumdan dolayı kendim	den utanırım.	
O Nerdeyse hiçbir zaman	O Bazen	O Yaklaşık yarı yarıya	O Çoğu zaman	O Nerdeyse her zaman
22. Kendimi kötü hissi bulacağımı bilirim.	ettiğimde, eninde	sonunda kendimi daha	iyi hissetmenin bir y	olunu/
O Nerdeyse hiçbir zaman	O Bazen	O Yaklaşık yarı yarıya	O Çoğu zaman	O Nerdeyse her zaman
23. Kendimi kötü hiss	ettiğimde, zayıf b	iri olduğum duygusuna	ı kapılırım.	
O Nerdeyse hiçbir zaman	O Bazen	O Yaklaşık yarı yarıya	O Çoğu zaman	O Nerdeyse her zaman
24. Kendimi kötü hiss	ettiğimde, davran	ışlarımı kontrol altında	tutabileceğimi hisse	derim.
O Nerdeyse hiçbir zaman	O Bazen	O Yaklaşık yarı yarıya	O Çoğu zaman	O Nerdeyse her zaman
25. Kendimi kötü hiss	ettiğimde, öyle hi	ssettiğim için suçluluk	duyarım.	
O Nerdeyse hiçbir zaman	O Bazen	O Yaklaşık yarı yarıya	O Çoğu zaman	O Nerdeyse her zaman
26. Kötü hissettiğimde	e, konsantre olma	kta zorlanırım.		
O Nerdeyse hiçbir zaman	O Bazen	O Yaklaşık yarı yarıya	O Çoğu zaman	O Nerdeyse her zaman
27. Kendimi kötü hiss	ettiğimde, davran	ışlarımı kontrol etmekt	e zorlanırım.	
O Nerdeyse hiçbir zaman	O Bazen	O Yaklaşık yarı yarıya	O Çoğu zaman	O Nerdeyse her zaman
28. Kendimi kötü hissinanırım.	ettiğimde, daha iy	yi hissetmem için yapac	cağım hiçbir şey olma	adığına

O Nerdeyse hiçbir zaman	O Bazen	O Yaklaşık yarı yarıya	O Çoğu zaman	O Nerdeyse her zaman
29. Kendimi kötü hiss	ettiğimde, böyle	hissettiğim için kendim	den rahatsız olurum.	
O Nerdeyse hiçbir zaman	O Bazen	O Yaklaşık yarı yarıya	O Çoğu zaman	O Nerdeyse her zaman
30. Kendimi kötü hiss	ettiğimde, kendir	n için çok fazla endişele	enmeye başladım.	
O Nerdeyse hiçbir zaman	O Bazen	O Yaklaşık yarı yarıya	O Çoğu zaman	O Nerdeyse her zaman
31. Kendimi kötü hissolmadığına inanırım.	ettiğimde, kendir	ni bu duyguya bırakmal	ktan başka yapabilec	eğim bir şey
O Nerdeyse hiçbir zaman	O Bazen	O Yaklaşık yarı yarıya	O Çoğu zaman	O Nerdeyse her zaman
32. Kendimi kötü hiss	ettiğimde, davran	ıışlarım üzerindeki kont	trolümü kaybederim.	
O Nerdeyse hiçbir zaman	O Bazen	O Yaklaşık yarı yarıya	O Çoğu zaman	O Nerdeyse her zaman
33. Kendimi kötü hiss	ettiğimde, başka	bir şey düşünmekte zor	lanırım.	
O Nerdeyse hiçbir zaman	O Bazen	O Yaklaşık yarı yarıya	O Çoğu zaman	O Nerdeyse her zaman
34. Kendimi kötü hiss	ettiğimde, duygu	nun gerçekten ne olduğ	unu anlamak için zar	nan ayırırım.
O Nerdeyse hiçbir zaman	O Bazen	O Yaklaşık yarı yarıya	O Çoğu zaman	O Nerdeyse her zaman
35. Kendimi kötü hiss	ettiğimde, kendir	ni daha iyi hissetmem u	zun zaman alır.	
O Nerdeyse hiçbir zaman	O Bazen	O Yaklaşık yarı yarıya	O Çoğu zaman	O Nerdeyse her zaman
36. Kötü hissettiğimde	e, duygularım day	anılmaz olur.		
O Nerdeyse hiçbir zaman	O Bazen	O Yaklaşık yarı yarıya	O Çoğu zaman	O Nerdeyse her zaman

APPENDIX 6: ETHICS COMMITTEE APPROVAL

Evrak Tarih ve Sayısı: 24.01.2022-97470



24.01.2022

Sayı :E-62310886-605.99-97470

Konu : Seranay Dilmen'in Etik Onay Başvurusu

Hk

SOSYAL BİLİMLER ENSTİTÜSÜ MÜDÜRLÜĞÜNE

İlgi : 13.01.2022 tarih ve 94106 sayılı yazınız.

Enstitünüz Klinik Psikoloji Tezli Yüksek Lisans Programı öğrencisi Seranay Dilmen'in, Doç. Dr. Elvin Doğutepe danışmanlığında yürüteceği "Relationships Between Attachment Style, Cognitive Flexibility and Emotion Regulation" başlıklı yüksek lisans tez çalışması değerlendirilmiş ve bilgilerinize ekte sunulmuştur.

Prof. Dr. M. Abdülkadir VAROĞLU Kurul Başkanı

Ek: Değerlendirme Formu

Bu belge, güvenli elektronik imza ile imzalanmıştır

Belge Doğrulama Kodu :BSL42HZT5P

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Sayı : 17162298.600-21 Konu : Tez Çalışması

19 OCAK 2022

İlgili Makama

Üniversitemiz Sosyal Bilimler Enstitüsü Klinik Psikoloji Tezli Yüksek Lisans Programı öğrencisi Seranay Dilmen'in, Doç. Dr. Elvin Doğutepe danışmanlığında yürüteceği "Relationships Between Attachment Style, Cognitive Flexibility and Emotion Regulation" başlıklı yüksek lisans tez çalışması değerlendirilmiş ve yapılmasında bir sakınca olmadığı tespit edilmiştir. Bilgilerinize saygılarımızla sunarız.

Başkent Üniversitesi Sosyal ve Beşeri Bilimler ve Sanat Araştırma Kurulu

Ad, Soyad	Değerlendirme	İmza
Prof. Dr. M. Abdülkadir Varoğlu	Olumlu/Olumsuz	
Prof. Dr. Kudret Güven	Olumlu/Olumsuz	
Prof. Ali Sevgi	Olumlu/Olumsuz	
Prof. Dr. Işıl Bulut	Olumlu/Olumsuz	
Prof. Dr. Sadegül Akbaba Altun	Olumlu/ Olumsuz	
Prof. Dr. Can Mehmet Hersek	Olumlu/Olumsuz	
Prof. Dr. Özcan Yağcı	Olumlu /Olumsuz	
	F	