Depression, Avoidance, & Social Support Interaction in Various Domains in College Students’ Relationship
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Abstract:
Undergraduate students participated in the study. The final sample consisted of 169 students (135 women and 34 men). Participants ranged in age from 17-28 years old and were predominantly non-Hispanic White. Relationship ranged from 1 to 100 months ($M = 15.07$ months, $SD = 15.53$) and 25.4 percent were cohabiting. The primary objective of the current study is to examine the interaction between depressive symptoms, avoidance attachment style, and perceived social support from social networks as it relates to conceptually distinct aspects of relationship domains. Results showed that there is a significant interaction for the various domains. There is a significant main effect for depression and avoidance attachment style.

Introduction:
Previous research has documented a significant association between depression and relationship satisfaction. Research has found a negative correlation between depressive symptoms and couple satisfaction (Whitton & Kuryluk, 2012). Greater relationship satisfaction was predicted by having fewer problems in attachment style. For avoidant attachment, the effect was stronger in women than men (Barry, Seager, & Brown, 2015). As would be expected, greater perceived social support from current partner predicted higher relationship satisfaction (Mak, Bond, Simpson, & Rholes, 2010).

Harper and Sandberg (2009) found that depressive symptoms and poor
communication process in marriage aggravate each other. Husbands and wives that were more depressed impaired both affective communication and problem solving processes. Previous research has found affective communication associated with avoidance attachment. Avoidant attachment tended to evaluate affective skills as less important compared to nonavoidant attachment (Jones 2005). No research has been conducted to examine the affective communication and perceived social support.

There is a variety of research on the association between partner support and depressive symptoms. Most of the research work has been done with expecting couples and with elder populations. Choi and Ha (2011) found that low-level perceived partner support, was significantly associated with higher depressive symptoms among women, but high-level perceived partner support was significantly associated with lower depressive symptoms for both genders. Low perceived partner support and depression can reinforce each other. Research from Brock & Lawrence (2014) found that individuals high in avoidant attachment are less likely to provide support in times of need. Men with high avoidant attachment styles are less capable of being effective support providers because wives reported overprovision (receiving too much support that has been found to be more detrimental to the relationship). Wives avoidant attachment did not emerge as a significant risk factor for support overprovision. There is not research to examine perceived social support from network on partner support given that partner support is the type of support to examine the adequacy of the support received.

According to the Sternberg triangular love scale intimacy is the feeling that fosters closeness, bond, and connection to the partner. It is considered the ‘warm’ component. On the other hand, passion is the motivational and other arousal. In addition,
it is the need for self-esteem, affiliation, dominance/submission and self-actualization. It is considered the ‘hot’ component with the most intense feelings (Sternberg, 1997). There is a lack of research on examining depression and perceived social support on intimacy and passion. Highly avoidant people tend to devalue the importance of closeness and intimacy in relationships and strive to be psychologically emotionally independent from their partners (Mikulincer & Shaver, 2007).

The primary objective of the current study is to examine the interaction between depressive symptoms, avoidance attachment style, and perceived social support from social network as it relates to conceptually distinct aspects of relationship domains.

**Methods:**

Undergraduate students enrolled in an introductory psychology course at the public Midwestern University participated in the study. The final sample consisted of 169 (135 women and 34 men). Participants ranged in age from 17 to 28 years and were predominantly non-Hispanic White. Relationship duration ranged from 1 to 100 months ($M = 15.07$ months, $SD = 15.53$ months), and 25.4% were cohabiting.

Various questionnaires were given to the participants. *Depression* was measured using the Center for Epidemiological Studies- Depression Scale (CES-D; Radloff, 1977) a 20-item self-report questionnaire used to assess depressive symptoms experienced in the past week. Composite scores ranged from 0 to 60, and a higher score is indicative of more frequent depressive symptoms. *Avoidance Attachment* was measured using the Experiences in Close Relationships-Revised (ECR-R; Fraley, Waller, & Brennan, 2000) 18 items measuring avoidance; composite scores range from 18-72, such that a higher score were associated with a higher endorsement of avoidance. *Perceived Support from*
Social Network was measured using the Social Provision Scale (SPS; Cutrona & Russell, 1987) assessing perceived support from one’s social network. Scores range from 4 to 96 with high scores present more positive circumstances. Relationship Satisfaction was measured using the Quality of Marriage Index (QMI; Norton, 1983) a 6-item self-report to assess global relationship satisfaction. Scores are summed with a range from 6 to 45, with high scores meaning high satisfaction. Affective communication was assessed using the Marital Satisfaction Inventory-Revised (MSI-R; Snyder & Aikman, 1999) to assess the level of distress in couples along 11 dimensions of relationships; affective communication measured the degrees of negative communication between partners. Scores ranged from 0 to 13, higher scores indicate more negative communication.

Partner Support Adequacy was measured using the Support in Intimate Relationships Rating Scale-Revised (SIRRS-R; Barry, Bunde, Brock, & Lawrence, 2009; Dehle, Larsen, & Landers, 2001) asking participants whether they wished to have more, less, or the same amount of each supportive act. Scores of support adequacy could range from 0 to 25 with higher scores representing more adequate support. Intimacy and Passion were measured using the Sternberg Triangular Love (Sternberg, 1997) subscales both comprises 15 items. Scores are summed on each scales and scores can range from 15 to 135 with higher scores is indicative of higher levels of the component.

Results:

There is a significant 3-way interaction for global relationship satisfaction $F(4,151) = 6.39, MSe= 29.05, p < .001, r = .38$. For individuals with low depressive symptoms, low perceived social support with low compared to medium levels of avoidance attachment there was not a significant difference in relationship satisfaction,
whereas those with medium avoidance attachment had higher scores of relationship satisfaction compared to high levels of avoidance attachment. Those with low avoidance attachment style report higher levels of relationship satisfaction compared to those with high levels of avoidance attachment. For low depressive symptoms and medium perceived social support there was no difference between low and medium avoidance attachment, whereas those with medium reported higher relationship satisfaction compared to high levels of avoidance attachment. Those with high levels of perceived social support, those with low levels of avoidance attachment reported higher relationship satisfaction compared to medium levels of avoidance. There was no difference in relationship satisfaction reported for medium compared to high and low compare to high avoidance attachment. Individuals with high depressive symptoms, low perceived social support and low compared to medium avoidance attachment did not differ in relationship satisfaction. Medium avoidance attachment reported greater relationship satisfaction compared to high levels of avoidance attachment. Low avoidance attachment reported higher relationship satisfaction compared to high levels of avoidance attachment. Those who report medium levels of perceived social support and low avoidance attachment report higher relationship satisfaction compared to medium levels of avoidance attachment. There was no difference between medium compared to high and low compared to high avoidance attachment in relationship satisfaction. Those with high levels of perceived social support and low avoidance compared to medium avoidance attachment did not differ significantly on relationship satisfaction. Medium avoidance reported higher relationship satisfaction compared to high levels of avoidance and low avoidance reported higher relationship satisfaction compared to high avoidance
attachment (refer to figure 1). There was not a significant 2-way interaction between depression and social support for global relationship satisfaction $F(2, 151) = 1.29, p > .05, r = .13$. There was not a significant 2-way interaction between depression and avoidance attachment $F(2, 151) = 2.68, p > .05, r = .19$. There wasn’t a significant interaction between social support and avoidance attachment $F(4, 151) = 1.24, p > .05, r = .18$. There was a main effect of depressive symptoms $F(1, 151) = 13.80, p < .001, r = .29$. Individuals with low depressive symptoms report higher relationship satisfaction compared to those with high depressive symptoms. There was not a main effect of social support $F(2, 151) = .53, p > .05, r = .08$. There was a main effect of avoidance attachment $F(2, 151) = 30.55, p < .001, r = .54$. Such that those with lower avoidance attachment reported higher relationship satisfaction.

There is a significant 3-way interaction for affective communication $F(4, 151) = 3.85, MSe=5.08, p < .01, r = .30$. Individuals with low depressive symptoms, those with low levels of perceived social support and low avoidance attachment did not differ compared to medium avoidance attachment. Medium levels of avoidance had lower levels of affective communication compared to higher levels of avoidance attachment. Low avoidance did not differ compared to high avoidance individuals. Those with medium levels of perceived social support and low avoidance did not differ compared to medium avoidance attachment. Medium avoidance had lower levels of affective communication compared to high avoidance. Low avoidance had lower levels of affective communication compared to high avoidance attachment. Those with high levels of perceived social support did not differ significantly on affective communication for every avoidance attachment level. For individuals with high depression, those with low
perceived social support and low avoidance did not differ compared to medium avoidance. Medium avoidance had lower affective communication compared to high avoidance. Low avoidance had lower affective communication compared to high avoidance individuals. Those with medium levels of perceived social support there was no significant difference between levels of avoidance on affective communication. Those with high levels of perceived social support, there was no significant difference between low and medium avoidance. Medium avoidance had lower affective communication compared to high avoidance. Low avoidance had lower affective communication compared to high avoidance (refer to figure 2). There was a significant 2-way interaction between depression and social support for affective communication $F(2, 151) = 3.24, p < .05, r = .20$. Individuals with low depressive symptoms did not differ on affective communication for every perceived social support level. Those with high depressive symptoms, low perceived support compared to medium did not differ on affective communication. Medium levels had lower levels of affective communication compared to high. However, low perceived support did not significantly differ compared to high levels of perceived support. There was not a significant 2-way interaction between depression and avoidance attachment $F(2, 151) = 2.46, p > .05, r = .18$. There wasn’t a significant interaction between social support and avoidance attachment $F(4, 151) = 1.29, p > .05, r = .18$. There was a main effect of depressive symptoms $F(1, 151) = 13.56, p < .001, r = .29$. Such that those with lower depressive symptoms reported lower affective communication during conflict. There was not a main effect of social support $F(2, 151) = .96, p > .05, r = .11$. There was a main effect of avoidance attachment $F(2, 151)$
=38.58, \( p < .001, r = .58 \). Such that those with lower avoidance attachment levels report lower levels of affective communication during conflict.

There is a significant 3-way interaction for intimacy \( F(4, 150) = 7.78, Mse = 83.74, \( p < .001, r = .42 \). Individuals with low depressive symptoms, low perceived social support and low avoidance did not significantly differ compared to medium avoidance attachment. Medium avoidance report higher intimacy compared to high avoidance. Low avoidance report higher intimacy compared to high avoidance. Medium perceived social support; low avoidance did not differ compared to medium levels of avoidance attachment. Medium avoidance report higher levels of intimacy compared to high avoidance. Low avoidance report higher intimacy compared to high avoidance attachment. Those with high perceived social support, there was no significant difference between avoidance attachments levels on intimacy. High depressive symptoms and low perceived social support with low avoidance report higher intimacy compared to medium levels of avoidance. Medium avoidance report higher intimacy compared to high avoidance. Low avoidance report higher intimacy compared to high avoidance. Medium levels of perceived social support, low avoidance report greater intimacy compared to medium avoidance levels. There is no significant difference between medium and high avoidance. Low avoidance report high intimacy compared to high avoidance. High level of perceived social support, low with low avoidance did not differ significantly compared to medium avoidance. Medium avoidance report greater intimacy compared to high avoidance. Low avoidance report higher intimacy compared to high avoidance (refer to figure 3). There was a significant 2-way interaction between depression and social support for intimacy \( F(2, 150) = 4.78, p < .05, r = .25 \). However, there is no significant
difference between levels of avoidance and levels of social support on intimacy. There was a significant 2-way interaction between depression and avoidance attachment $F(2, 150) = 3.76, p < .05, r = .22$. Individuals with low depressive symptoms, low avoidance did not differ compared to medium avoidance on intimacy. Medium avoidance reported higher intimacy compared to high avoidance. Low avoidance reported greater intimacy compared to high avoidance. Individuals with high depressive symptoms, low avoidance reported greater intimacy compared to medium, medium reported higher intimacy compared to high, and low reported greater intimacy compared to high avoidance attachment. There wasn’t a significant interaction between social support and avoidance attachment $F(4, 150) = 1.32, p > .05, r = .18$. There was a main effect of depressive symptoms $F(1, 150) = 13.80, p < .001, r = .29$. Such that those with low depressive symptoms report higher levels of intimacy. There was not a main effect of social support $F(2, 150) = .60, p > .05, r = .09$. There was a main effect of avoidance attachment $F(2, 150) =38.58, p < .001, r = .58$. Such those with low avoidance report higher intimacy.

There is a significant 3-way interaction for passion $F(4,150) = 3.84, MSe = 270.88, p < .01, r = .31$. Individuals with low depressive symptoms and low perceived social support, there was no difference between low compared to medium avoidance attachment. Medium avoidance report higher passion compared to high avoidance. Low avoidance reported greater passion compared to high avoidance attachment. Medium levels of perceived social support, there was no difference between low compared to medium avoidance on passion. Medium report higher passion compared to high avoidance. Low reported higher passion compared to high avoidance. High perceived social support, there was no significant difference between avoidance attachment levels
on passion. For high depressive symptoms and low perceived social support, low avoidance report greater passion compared to medium avoidance attachment. Medium did not significantly differ compared to high avoidance on passion. Low reported greater passion compared to high avoidance attachment. For medium levels of perceived support, low reported higher passion compared to medium avoidance. Medium did not differ significantly compared to high avoidance on passion. Low reported higher passion compared to high avoidance attachment. For high perceived social support, low did not differ compared to medium on passion. Medium had greater passion compared to high avoidance attachment. Low reported greater passion compared to high avoidance attachment (refer to figure 4). There was not a significant 2-way interaction between depression and social support for passion $F(2, 150) = .003, p > .05, r = .01$. There was not a significant 2-way interaction between depression and avoidance attachment $F(2, 150) = 1.95, p > .05, r = .16$. There wasn’t a significant interaction between social support and avoidance attachment $F(4, 150) = .83, p > .05, r = .15$. There was not a main effect of depressive symptoms $F(1, 150) = 2.84, p > .05, r = .14$. There was not a main effect of social support $F(2, 150) = .69, p > .05, r = .10$. There was a main effect of avoidance attachment $F(2, 150) = 31.48, p < .001, r = .54$. Such that those with low avoidance reported higher passion in their relationship.

There is a significant 3-way interaction for partner support adequacy $F(4,146) = 2.83, MSe= 37.30, p < .05, r = .27$. There was not a significant 2-way interaction between depression and social support for passion $F(2, 146) = 2.28, p > .05, r = .17$. Those with low depressive symptoms did not differ significantly between low, medium, and high levels of perceived social support and low compared to medium, medium compared to
high, and low compared to high on avoidance attachment on support adequacy. Those with high depressive symptoms, those with low and medium perceived social support did not differ significantly between the different levels of avoidance on support adequacy. Those with high perceived social support, low compared to medium avoidance did not differ on support adequacy. Medium reported higher support adequacy compared to high avoidance. Low avoidance reported higher support adequacy compared to high avoidance attachment (refer to figure 5). There was not a significant 2-way interaction between depression and avoidance attachment $F(2, 146) = 1.01, p > .05, r = .12$. There wasn’t a significant interaction between social support and avoidance attachment $F(4, 146) = 1.25, p > .05, r = .18$. There was a main effect of depressive symptoms $F(1, 146) = 14.04, p < .001, r = .30$. Such that those with low depressive symptoms report greater support adequacy. There was not a main effect of social support $F(2, 146) = 1.40, p > .05, r = .14$. There was a main effect of avoidance attachment $F(2, 146) = 6.92, p < .001, r = .29$. Such that those with low avoidance reported greater support adequacy.

**Figures:**

![Figure 1. Depression, Avoidance, & Social Support as it Relates to Relationship Satisfaction](image)

*Figure 1. Depression, Avoidance, & Social Support as it Relates to Relationship Satisfaction*
Figure 2. Depression, Avoidance, & Social Support as it relates to Affective Communication

Figure 3. Depression, Avoidance, & Social Support as it Relates to Intimacy
Discussion:

There was an interaction between depression, social support, and attachment styles on relationship satisfaction, negative communication, intimacy, passion, and support adequacy. However, the interactions were not strong. There was a main effect of avoidance attachment style such that those with low avoidance tend to have a greater relationship satisfaction, less negative communication during conflict, greater intimacy and passion, and higher support adequacy. There was a main effect of depression such that those with low depressive symptoms have greater relationship satisfaction, less
negative communication during conflict, greater passion, and higher support adequacy. However, there wasn’t a main effect for depression on passion. Taken together the result from the study it is safe to conclude that depression and attachment style, specifically avoidance attachment, have an influence of various domains in the relationship.

Avoidance attachment is formed during infancy and is characterized as infants who avoid the caregiver and exhibit signs of detachment when distressed. Attachment styles are associated with different patterns of emotional experience within relationships (Simpson, 1990). Specifically, those who are high avoidant tend to report lower relationship satisfaction which is in sync with Simpson’s (1990) study in which avoidant attachment style reported being involved in a relationship characterized by less interdependence, trust, commitment, and satisfaction.

Higher depressive symptoms gave lower rating on relationship satisfaction, intimacy, passion, and support adequacy and higher scores for affective communication (negative communication during conflict). Which is consist with previous research there is an association between depression and romantic relationship qualities. Vujeva & Furman (2011) found that higher levels of depressive symptoms in mid-adolescence were associated with less favorable romantic qualities through late adolescence to emerging adults. Higher levels of depressive symptoms were related to less positive problem solving.

There was not a main effect for perceived social support network. College years are very stressful and it’s important to have social support but when it comes to assessing relationship qualities social support is not significant.
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