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The Effects of Fear of Intimacy and Parental Bonding on the Psychological Well-Being of
University aged Women
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Honours Psychology Thesis
School of Behavioural and Social Sciences
Brescia University College
London, Ontario, Canada
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Abstract

This study investigated whether students who had high perceived parental bonding and low fear of intimacy would have a more positive level of psychological well-being. Additionally, the study sought to determine any differences between a single parent household and a two parent household. The sample consisted of 93 female undergraduate students in University in London, Ontario. An independent t-test revealed there was no significant differences in bonding between a single parent household and a two parent household. A multiple regression analysis revealed that perceived parental bonding and fear of intimacy were significant predictors of psychological well-being. A significant positive correlation was found between parental bonding and psychological well-being. Furthermore, a significant negative correlation was found between parental bonding and fear of intimacy. Additionally, a significant negative correlation was found between fear of intimacy and psychological well-being. These findings suggest that parental bonding and fear of intimacy are foundational for an individual's psychological well-being as an adult.

Keywords: parental bonding, fear of intimacy, psychological well-being, undergraduate, interpersonal skills, eudaimonic, attachment

The Effects of Fear of Intimacy and Parental Bonding on the Psychological Well-Being of University-aged Women

Research has established the importance of parental bonding in the formative years of childhood for adult relationships. Research conducted by Weisskirch (2018) made it evident that parental bonding is essential for an individual to develop the necessary skills for intimate relationships. Furthermore, research has emphasized that patterns of attachment predict fear of intimacy (McCarthy, 1999). However, there is a gap in research as to whether parental bonding and fear of intimacy directly impact an individual's later psychological well-being

Family context impacts a child's development. A study conducted by McKinney et al. (2016) reported that effective parenting resulted in higher psychological adjustment with low levels of externalizing and internalizing problems. Furthermore, emotional regulation from authoritative parents resulted in better mental health outcomes and lower delinquent behaviours. Research found strong associations between maternal care, paternal care, maternal overprotection and intrusiveness with serious and moderate depressive symptoms. (Allison et al., 2004). However, paternal overprotection and maternal and paternal restrictiveness only showed a moderate association with depressive symptoms. Lack of parental care has resulted in various mood and anxiety disorders (Clara et al., 2000). Parents responding to a child's needs and understanding their wants supports a child's development in healthy ways. These studies have demonstrated that lack of parental care and overprotection hinders the child's development in significant ways.

The parent-child relationship is foundational for all future relationships a child will have. John Bowlby (2018) developed attachment theory that contributed to our understanding of parent-child relationships (Bretherton, 1992). Attachment theory stated the parent and child

form a reciprocal bond that shapes the child's understanding of future relationships (Weisskirch, 2018). Two dimensions resulted from this theory, attachment anxiety and attachment avoidance (Weisskirch, 2018). Attachment anxiety emphasized an over-concern for the relationship, while attachment avoidance emphasized a lack of a desire for close, intimate relationships. These dimensions contributed to researchers' understanding of parenting styles and child psychosocial development.

In comparison, Ainsworth, Blehar, Waters & Wall (1978) classified three different types of attachment in childhood that could predict the attachment style in adult relationships (McCarthy, 1999). The three styles of attachment were secure, insecure-avoidant, and anxious-ambivalent. Secure attachment demonstrated the healthiest pattern of attachment. As adults, these individuals had intimate relationships, while also maintaining a balance of closeness and autonomy (McCarthy, 1999). Insecure-avoidant and anxious ambivalent demonstrated to be less desired patterns of attachment. Insecure-avoidant adults avoided intimate adult relationships. Anxious-ambivalent adults had a fear of rejection and depended on their partner, therefore having lower levels of autonomy (McCarthy, 1999). These attachment styles applied to not only love relationships, but other close relationships, such as friendships (McCarthy, 1999). These findings have made it evident that the parent-child relationship is important for an individual's childhood development and adult functioning.

John Bowlby and Mary Ainsworth made important contributions to the parent-child relationship. Other theorists have argued for different dimensions. The parenting style model reported having two dimensions, warmth/caring and control/autonomy-granting (Weisskirch, 2018). The warmth dimension comprised how caring, compassionate and communicative the parent was. The control dimensions comprised the parent's concern for rules and regulation of

the child's behaviour. The most desired style of parenting resulted from high levels of warmth and authoritative control. (Weisskirch, 2018). These children developed in a healthier way compared to children exposed to parenting styles involving low levels of warmth and overprotection.

Another theory by Bachar et al. (1997) concluded parental bonding has two main dimensions, parental care and parental control/overprotection. The ideal parental care involved emotional warmth, affection, empathy and closeness (Bachar et al., 1997). Parental control, on one end of the spectrum, involved control, overprotection, intrusion, excessive contact, infantilization and prevention of independent behaviour. The other end of the spectrum involved allowance of independence and autonomy (Bachar et al., 1997). The two dimensions resulted in four potential bonding experiences, high care and high overprotection, high care and low overprotection, low care and high overprotection, low care and low overprotection (Ambruster & Witherington, 2016). They reported optimal parental bonding to be high care and low overprotection. This parental bonding was high in emotional warmth and acceptance and low in psychological control and intrusion. These two dimensions of parental care and parental control/overprotection led to specific parental bonding experiences that impacted an individual in their future intimate relationships.

Interestingly, studies have divided the dimension of overprotection into two sub-factors: protectiveness and authoritarianism (Clara et al., 2000). In other terms, overprotection divided into denial of psychological autonomy and encouragement of behavioural freedom (Fenton et al., 1999). This 3-factored model of parental bonding reported to be more invariant to age and gender (Clara et al., 2000). The 3-factored model allowed researchers to have a more specific understanding regarding parental bonding and the dimension of control. These 4 models have all

been used in research for parental bonding. These different models reflect the complexity of the parent-child relationship.

Erikson's theory of development demonstrated that intimacy is an aspect of healthy relationships and development (Weisskrich, 2018). Furthermore, development of psychosocial intimacy derived from parenting and the parent-child relationship. The quality of intimacy in relationships emphasized patterns of closeness, communication and trust. (Criddle et al, 2022). Intimacy involved interpersonal vulnerability from both individuals in the relationship. (Cordova & Scott, 2001). In simpler terms, each individual is responsible for self-disclosure either verbally or non-verbally, while the other individual provides a reinforcing response. Research has emphasized maintaining intimate relationships is important. This is achieved by an individual's perception of closeness, understanding and affection within the relationship (Criddle et al., 2022). Having low levels of intimacy can decrease the relationship satisfaction regardless if it is a friendship, familial or romantic relationship (Criddle et al., 2022). Intimacy is a quality that greatly impacts a close relationship.

Provided that the parental-child relationship allows for the development of intimacy, it is considered to be built from specific conditions in a relationship. These conditions included trust, perceived feelings of emotional closeness between the members, openly communicating thoughts and feelings and reciprocity within their relationship (Timmerman, 1991). Trust is being secured by sharing thoughts and feelings in confidence with another individual (Timmerman, 1991). Closeness in the relationship referred to couples having an impact on another. A close relationship emphasized strong and frequent interconnections making the individuals interdependent in the relationship (Timmerman, 1991). Self-disclosure, the process of openly communicating thoughts and feelings has been considered essential to intimate

relationships. (Timmerman, 1991). Individuals in intimate relationships shared not only uncomfortable thoughts and feelings, but also happy feelings, accomplishments and hopes (Cordova & Scott, 2001). Reciprocity referred to each individual having mutual responsibility to participate in the relationship based on the other conditions of trust, closeness and self disclosure. (Timmerman, 1991). These conditions are considered to be the foundation of intimate relationships.

The Interpersonal Process Model of intimacy encompassed aspects that contribute to the formation and maintenance of intimate relationships (Criddle et al, 2022). This model stated that feelings communicated with one's social motives and having this interaction repeatedly with an individual contribute to the formation of an intimate relationship. Maintenance of intimate relationships relied on the interaction between the speaker and the listener (Criddle et al., 2022). The speaker expresses emotion and the listener displays a reinforcing response. The speaker then interprets the listener's response. Specifically, the speaker participates in vulnerable self-disclosure (Corey et al, 2020). The listener's response may be verbal or non-verbal. The speaker interprets the listener's response based on conditions of understanding, care and validation. Non-verbal responses have demonstrated to be as effective as verbal responses if the speaker perceives the response as one of the conditions of understating, caring and validating (Corey et al., 2020). This process provided a framework for understanding intimate relationships.

Fear of intimacy hindered an individual's ability to have intimate relationships. Fear of intimacy is described as "the inhibited capacity of an individual because of anxiety to exchange thoughts and feelings of personal significance with another individual who is highly valued" (Corey et al., 2020, p. 1319). In accordance with the Interpersonal Process Model, individuals who had a fear of intimacy would often not give caring or validating responses to the speaker

(Criddle et al., 2022). Corey et al. (2020) reported individuals with a fear of intimacy had fewer intimate interactions, less comfort with self-disclosure, less relationship satisfaction and women had greater likelihood of ending relationships by six months. Experiential avoidance emphasized fear of intimacy in individuals (Maitland, 2020). These individuals avoided unwanted thoughts, feelings and experiences. These individuals are specifically less likely to engage in self-disclosure. However, research demonstrated self-disclosure improved intimate relationships, regardless if an individual had high fear of intimacy (Corey et al, 2020). Intimacy is essential for rewarding relationships that improve an individual's psychological well-being. Having a fear of intimacy could potentially negatively impact an individual's psychological well-being.

Research has demonstrated emotional intimacy is fundamental for psychological well-being. (Akel et al., 2019) Psychological Well-Being is defined by several dimensions. Ryff's Scales of Psychological Well-Being has been defined as eudaimonic well-being that encompasses positive skills that an individual use to have optimal functioning in everyday life (Joshnloo, 2019). Ryff's Scales of Psychological Well-Being defined these dimensions as self-acceptance, positive relations with others, autonomy, purpose in life, environmental mastery, and personal growth (Hauser & Springer, 2006). Self- acceptance referred to having a positive attitude towards one's self. Positive relations referred to having satisfying relationships with others. Autonomy reflected self-determination and being independent. Purpose in life referred to an individual having goals in life and believing that life is meaningful. Environmental mastery referred to managing various life experiences. Personal growth refers to being open to new experiences. These dimensions resulted in benefit to various psychological and physical aspects such as coping skills and global health (Joshnloo, 2019). An eudaimonic well-being helped individuals strive to have a meaningful life.

There is evidence that has shown the need of only four dimensions instead of the six dimensions in Ryff's Scales of Psychological Well-Being (Hauser & Springer, 2006). The dimensions of self-acceptance and environmental mastery overlapped. Also, the dimensions of personal growth and purpose in life demonstrated to be a single factor. The dimensions can be summarized as the following four dimensions, self-confidence, orientation to present, stress and social tension (Celdran et al., 2010). These four dimensions covered the necessary aspects related to measuring an individual's psychological well-being.

The above studies have established an association between parental bonding and fear of intimacy in relationships. However, less is known about an association between an individual with a fear of intimacy and their psychological well-being. Furthermore, there is a greater lack in research establishing an association between perceived parental bond and an individual's psychological well-being.

In the present study, an individual's perceived parental bond was examined based on their experiences with each parent up until they were 16 years old. Responses were compared to determine any association between maternal scoring and paternal scoring. Fear of intimacy was examined by individuals imagining themselves in an intimate relationship and reflecting on past relationships. These responses were analyzed based on the individual's self-assessed psychological well-being. A sample of first-year, female undergraduate students completed a questionnaire that combined a 3-factored version of the *Parental Bonding Instrument* (Fenton et al., 1999), a 35-question version of *The Fear of Intimacy Scale* (Descutner & Thelen, 1991), and a 22-question version of *Ryff's Scales of Psychological Well-Being- Simplified Version* (Celdran et al., 2010) to determine any association between parental bond, fear of intimacy and psychological well-being.

The present study investigated if parental bonding and fear of intimacy related to an individual's psychological well-being. It was hypothesized that individuals who had a stronger parental bond and lower fear of intimacy would have a more positive level of psychological well-being than those with a weaker parental bond and/or higher fear of intimacy. It was also predicted that the stronger the bond an individual has with a parent, the less fear of intimacy in the individual's various relationships. It was predicted the stronger the bond an individual has with a parent, the more positive their psychological well-being will be. It was also predicted that the less fear of intimacy an individual has in their relationships, the more positive their psychological well-being will be.

Methods

Participants

The sample for the current study consisted of 93 female undergraduate students from Brescia University College in London, Ontario. Participants were enrolled in a first year course, Psychology 1015B. Participants were recruited using Brescia's SONA system and filled out the Qualtrics Survey online. Participants indicated whether they lived in a single parent household ($n = 11$) or a traditional two parent household ($n = 82$) in the demographic survey. All participants received one credit toward a course requirement.

Materials

Demographic Survey. The demographic survey asks 8 questions about the participant. It asks about age to ensure the participant is a young adult. It asks about gender to eliminate males from the data since the research focuses on university aged women. It asks about family arrangement to allow context for the Parental Bonding Instrument. The gender of each parent is asked to compare paternal and maternal scores. Ethnicity and where the participant grew up is

important to take into consideration because of cultural values and expectations within a parent-child relationship and intimate relationships. It is important to take into consideration that not all participants will have North American values. Asking if the participant lived with their parents/guardians up until they were 16 years old is essential because the Parental Bonding Instrument relies on their experiences with their parents up until they were 16 years old (See Appendix A).

The Parental Bonding Instrument. This measure consists of 25 questions that are divided into 3 factors. These factors include care and overprotection, which is divided into two factors, denial of psychological autonomy (intrusiveness) and encouragement of behavioural freedom (restrictiveness). Under the care factor, statements such as “appears to understand my problems and worries” or “seems emotionally cold to me” are described. Under the denial of psychological autonomy factor, statements such as “invades my privacy” or “tries to make me dependent on him (her)” are described. Under the encouragement of behaviour freedom factor, statements such as “lets me do things I like doing” or “lets me decide things for myself” are described. Participants will rate each statement on a 4-point Likert scale (1= very unlikely, 2= unlikely, 3=likely, 4= very likely) Participants will rate each statement based on their experiences until they were 16 years old. Participants will complete the Parental Bonding Instrument for each parent. If the participant has only one parent/guardian, they will choose the non-applicable option beside each statement on the second questionnaire. Maternal scores for care are considered low if in the range 0-21 and scores are considered moderate if greater than 22. Paternal scores for care are considered low if in the range 0-18 and considered moderate if greater than 19. Maternal overprotection scores of 0-19 are considered moderate and scores greater than 20 are considered high. Paternal overprotection scores of 0-18 are considered

moderate and scores greater than 19 are considered high. For maternal and paternal intrusiveness, scores in the range 0-10 are considered moderate and scores greater than 11 are considered high. For maternal and paternal restrictiveness, scores in the range 0-10 are considered moderate and scores greater than 11 are considered high.

The Fear of Intimacy Scale. This measure consists of 35 questions divided into a Part A and a Part B. Part A requires participants to imagine they were in a close dating relationship. In the statements, “0” refers to the person they are in an imagined relationship with. Participants will be asked to rate statements such as, “I would find it difficult being open with 0 about my personal thoughts”. Part B requires participants to respond to the statements such as, “I have shied away from opportunities to be close to someone”, in regards to their past relationships. Participants will be asked to rate each statement on a 5-point Likert scale (1= not at all characteristic of me, 2= slightly not at all characteristic of me, 3= moderately characteristic of me, 4= very characteristic of me, 5= extremely characteristic of me). Results will range from having no fear of intimacy to high fear of intimacy. Final scores tend to range from 40-128, with a mean score of 78.75. The higher the score, the higher the fear of intimacy a participant will have. The lower the score, the lower the fear of intimacy a participant will have.

Ryff's Scales of Psychological Well-Being- Simplified Version. This measure consists of 22 questions divided into 4 sub-sections. These sub-sections include self-confidence, orientation to present, stress and social tension. Statements such as “Active in carrying out the plans I set” or “Life has been a process of learning and growth” are placed under the self-confidence sub-section. Statements such as, “Focused on the present, future is a problem” or “Setting goals is a waste of time” are placed under the orientation to present sub-section. Statements such as, “Overwhelmed by my responsibilities” or “Demands of everyday life get me down” are placed

under the stress subsection. Statements such as “Not experienced many warm relationships” or “Most other people have more friends than I do” are placed under the subsection social tension. Participants will rate each statement on a 4-point Likert scale (1= strongly disagree, 2= disagree, 3= agree, 4= strongly agree). Higher scores for the self-confidence section indicate a more positive psychological well-being. Higher scores for the orientation to present section indicate a more negative psychological well being. Higher scores for the stress section indicate a more negative psychological well being. Higher scores for the social tension section indicate a more negative psychological well-being.

Procedure

Students enrolled in Psychology 1015B accessed the Brescia SONA system and was given the Qualtric link to the survey. Participants read the call for participants and signed up to participate in the study. Once students gained access to the study, the Letter of Information to consent to participate was presented. Participants answered the questionnaire in the following order; the demographic survey, the Parental Bonding Instrument for each parent, the Fear of Intimacy Scale and Ryff’s Scales of Psychological Well-Being- the Simplified Version. Participants did not have a time limit to answer the questionnaire. After participants completed the questionnaire, they were presented with the debriefing form. The debriefing form explained the purpose and the hypotheses of the study. Contact information of the primary investigator and thesis advisor was presented to the participants. This was given in case participants had questions about the study. Participants were then given one participant credit through SONA that was eligible to use toward their course requirement.

Results

A total of 93 participants responded to the call for participants. Twelve participants were omitted from the analyses because of blank answers ($n = 12$). Three participants were omitted due to the Parental Bonding Instrument requiring individuals to live with their parent/guardian up until 16 years old and the participants answered that they did not ($n = 3$). Two participants were omitted because the study required an all-female sample ($n = 2$). The data was analyzed using an independent t-test to assess the differences in parental formations and multiple regression to assess the best predictors for psychological well-being.

An independent t-test was conducted to test the differences between individuals with a single parent versus the traditional 2 parents. Family formations with a traditional 2 parent household were labelled as 1. Family formations with a single parent household were labelled as 2. For the test of differences, Levene's test was insignificant, Levene's $F(1,91) = 0.01, p = .919$. Bonding Scores for traditional 2 parent households ($M = 83.01, SD = 13.05$) were similar to the bonding scores for single parent households ($M = 75.36, SD = 12.82$), $t(91) = 1.83, p = .071, d = 0.59$, with a medium effect size.

A multiple regression analysis was conducted for both parents in a traditional two parent household. A regression analysis tested whether perceived parental bonding with parent 1 ($M = 79.13, SD = 14.65$) and fear of intimacy ($M = 85.34, SD = 25.21$) predicts psychological well-being ($M = 63.99, SD = 8.29$). There was a moderate, positive, significant correlation between perceived parental bonding with parent 1 and psychological well-being, $r(91) = .489, p < .001$. Referring to figure 1, as perceived bonding increased, psychological well-being increased. There was a moderate, negative, significant correlation between perceived parental bonding with parent 1 and fear of intimacy, $r(91) = -.383, p < .001$. As shown in figure 2, as perceived parental

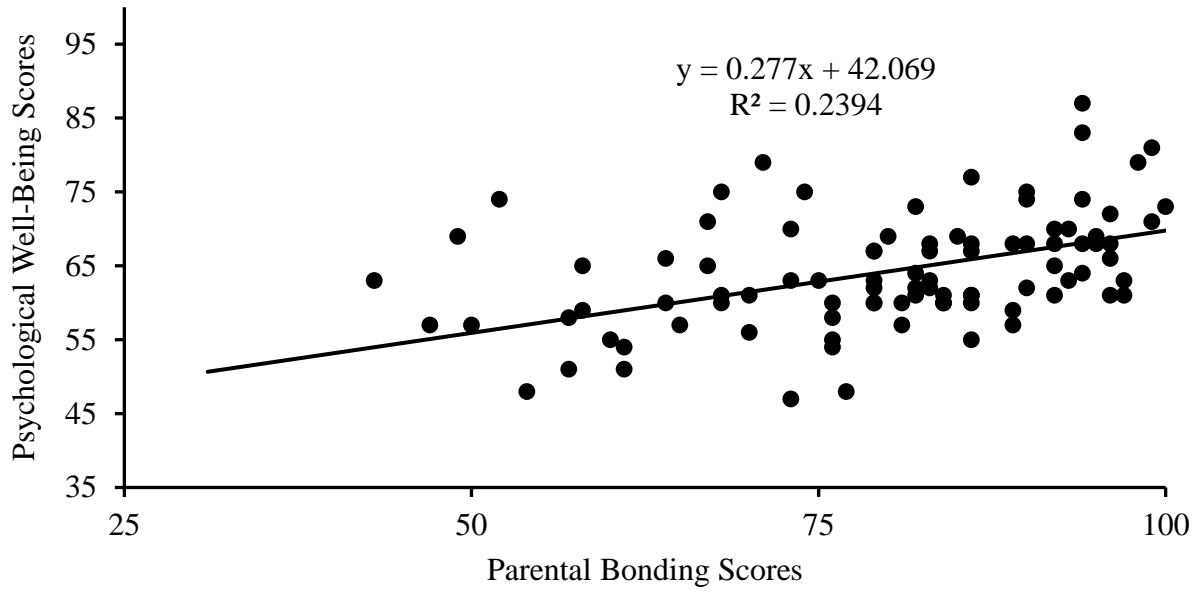


Figure 1. Scatterplot and line of best fit for the relationship between parental bonding scores with parent 1 (x-axis) and psychological well-being scores (y-axis), $r(91) = .489$, $p < .001$.

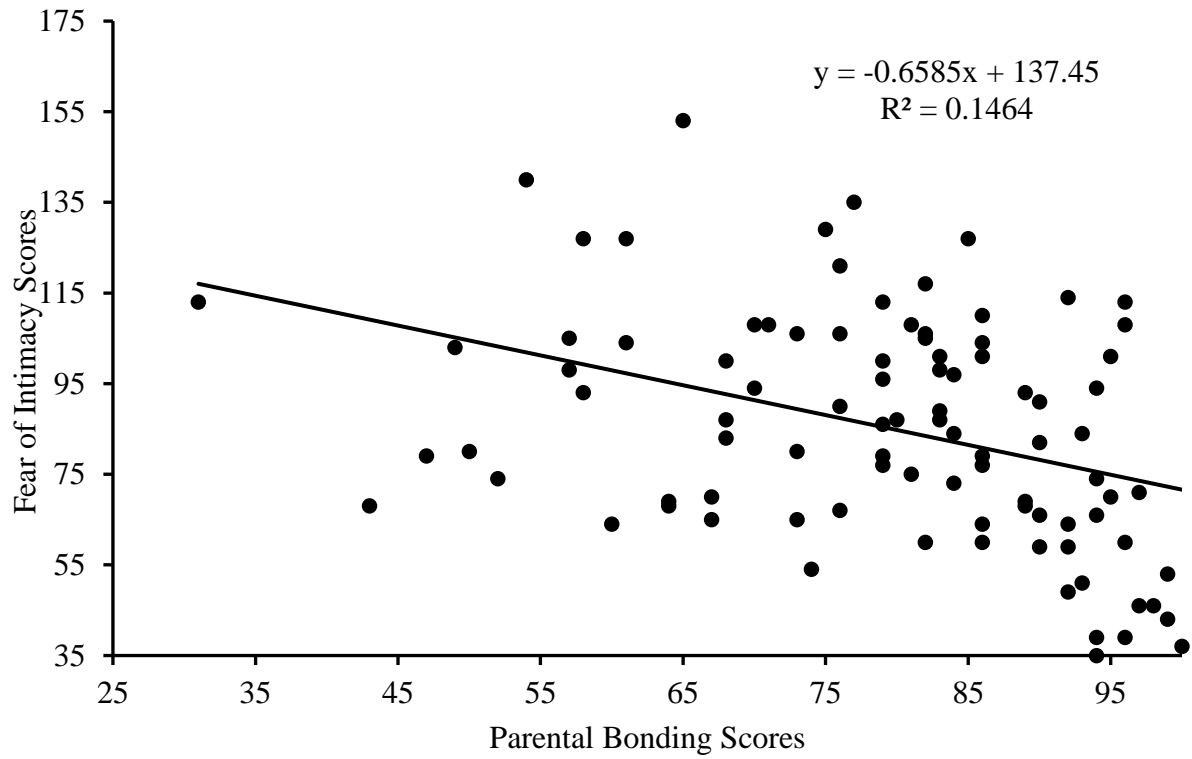


Figure 2. Scatterplot and line of best fit for the relationship between parental bonding scores with parent 1 (x-axis) and fear of intimacy scores (y-axis), $r(91) = -.383$, $p = <.001$.

bonding increased, fear of intimacy decreased. Fear of intimacy showed a moderate, negative, significant correlation with psychological well-being, $r(91) = -.545, p < .001$. Referring to Figure 3, as fear of intimacy decreased, an individual's psychological well-being increased. The regression equation was $\text{psychological well-being} = 61.01 + 0.19(\text{parent 1}) - 0.14(\text{fear of intimacy})$. The model with two predictors accounted for 39% of variance, $R^2 = 0.39, F(2,90) = 28.68, p < .001$. Perceived parental bonding with parent 1 ($\beta = .329, p < .001$) and fear of intimacy ($\beta = -.419, p < .001$) were both good predictors for psychological well-being, with fear of intimacy being the best predictor.

Another regression analysis tested whether perceived parental bonding with parent 2 ($M = 68.28, SD = 28.96$) and fear of intimacy ($M = 85.34, SD = 25.21$) predicts psychological well-being ($M = 63.99, SD = 8.29$). Referring to figure 4, there was a weak, positive, significant correlation between perceived bonding with parent 2 and psychological well-being, $r(91) = .302, p = .003$. As perceived parent bonding increased, psychological well-being increased. Fear of intimacy showed a weak, negative, significant correlation with perceived bonding with parent 2 $r(91) = -.274, p = .008$. As shown in figure 5, as perceived parental bonding increased, fear of intimacy decreased. As stated previously, fear of intimacy showed a moderate, negative, significant correlation with psychological well-being, $r(91) = -.545, p < .001$. As fear of intimacy increased, psychological well-being decreased. The regression equation was $\text{psychological well-being} = 74.77 + 0.05(\text{parent 2}) - 0.16(\text{fear of intimacy})$. The model with two predictors accounted for 32% of variance, $R^2 = .32, F(2, 90) = 21.40, p < .001$. Perceived bonding of parent 2 ($\beta = .166, p = .025$) and fear of intimacy ($\beta = -.499, p < .001$) both were significant predictors of psychological well-being, with fear of intimacy as the best predictor.

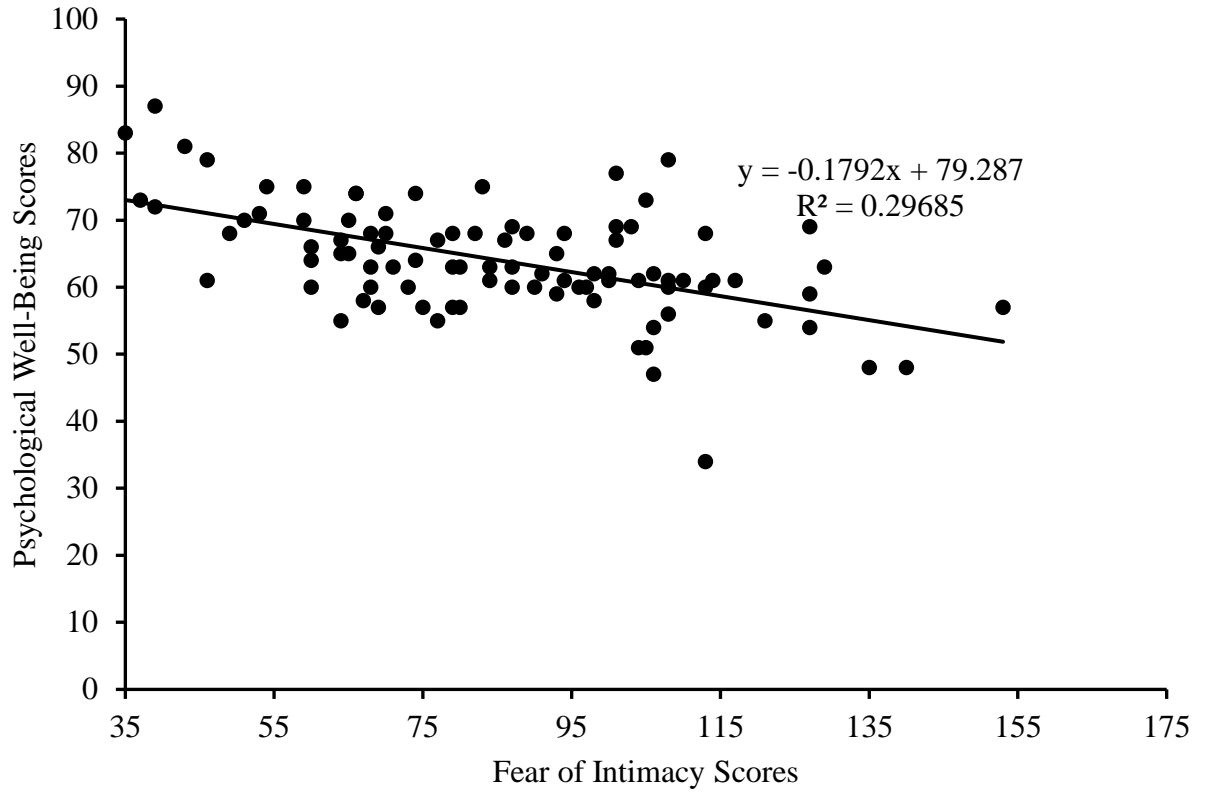


Figure 3. Scatterplot and line of best fit for the relationship between fear of intimacy scores (x-axis) and psychological well-being scores (y-axis), $r(91) = -.545$, $p < .001$.

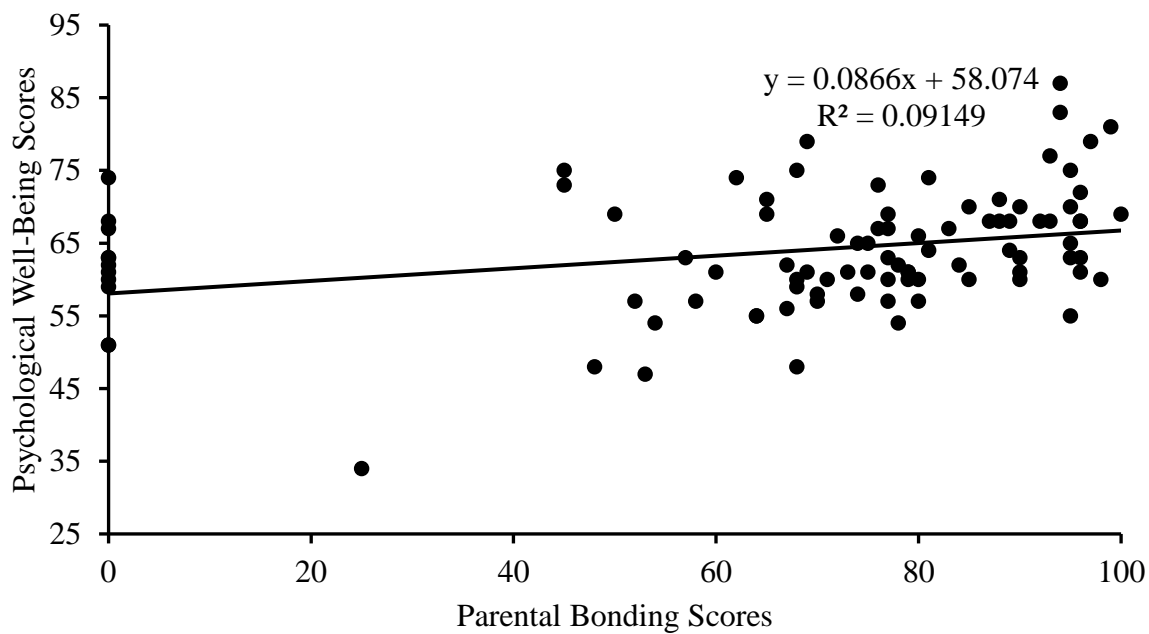


Figure 4. Scatterplot and line of best fit of the relationship between parental bonding scores with parent 2 (x-axis) and psychological well-being scores (y-axis), $r(91) = .302$, $p = .003$.

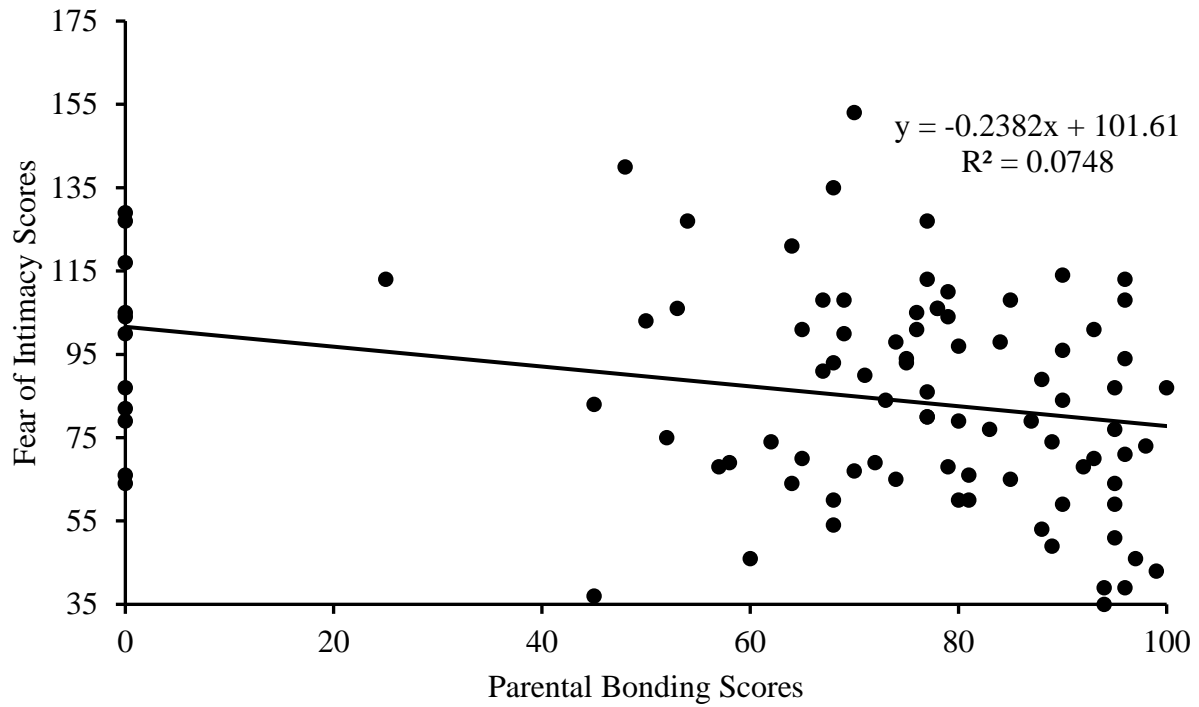


Figure 5. Scatterplot and line of best fit for the relationship between parental bonding scores with parent 2 (x-axis) and fear of intimacy scores (y-axis), $r(91) = -.274$, $p = .008$.

A final regression analysis tested whether perceived parental bonding with the higher bonded parent ($M = 82.11$, $SD = 13.19$) and fear of intimacy ($M = 85.34$, $SD = 25.21$) predicts an individual's psychological well-being ($M = 63.99$, $SD = 8.29$). There was a moderate, positive, significant relationship between perceived bonding with the higher bonded parent and psychological well-being, $r(91) = .509$, $p < .001$. Figure 6 demonstrates as perceived parental bonding increased, psychological well-being increased. There was a weak, negative, significant relationship between perceived bonding and fear of intimacy, $r(91) = -.460$, $p < .001$. Referring to figure 7, as an individual's perceived bonding increased, the individual's fear of intimacy decreased. Fear of intimacy, again, showed a moderate, negative, significant relationship with psychological well-being, $r(91) = -.545$, $p < .001$. As fear of intimacy increased, psychological well-being decreased. The regression analysis equation was psychological well-being = $58.16 + 0.21(\text{bonding score}) - 0.13(\text{fear of intimacy})$. The model with two predictors accounted for 38% of the variance, $R^2 = .38$, $F(2, 90) = 27.74$, $p < .001$. Perceived bonding of the higher bonded parent ($\beta = .327$, $p < .001$) and fear of intimacy ($\beta = -.394$, $p < .001$) were both able to predict psychological well-being, with again, fear of intimacy as the best predictor.

An individual's perceived parental bonding and fear of intimacy related to an individual's psychological well-being. Individuals who had a stronger parental bond and lower fear of intimacy had a more positive level of psychological well-being. Participant's scores on the Parental Bonding Instrument was negatively correlated to their fear of intimacy scores on the Fear of Intimacy Scale. The stronger the bond an individual had with a parent, the less fear of intimacy in relationships that individual had. Participant's scores on the Parental Bonding Instrument was positively correlated to the scores on the Ryff's Scales of Psychological Well-Being. The stronger the bond an individual had with a parent, the more positive their

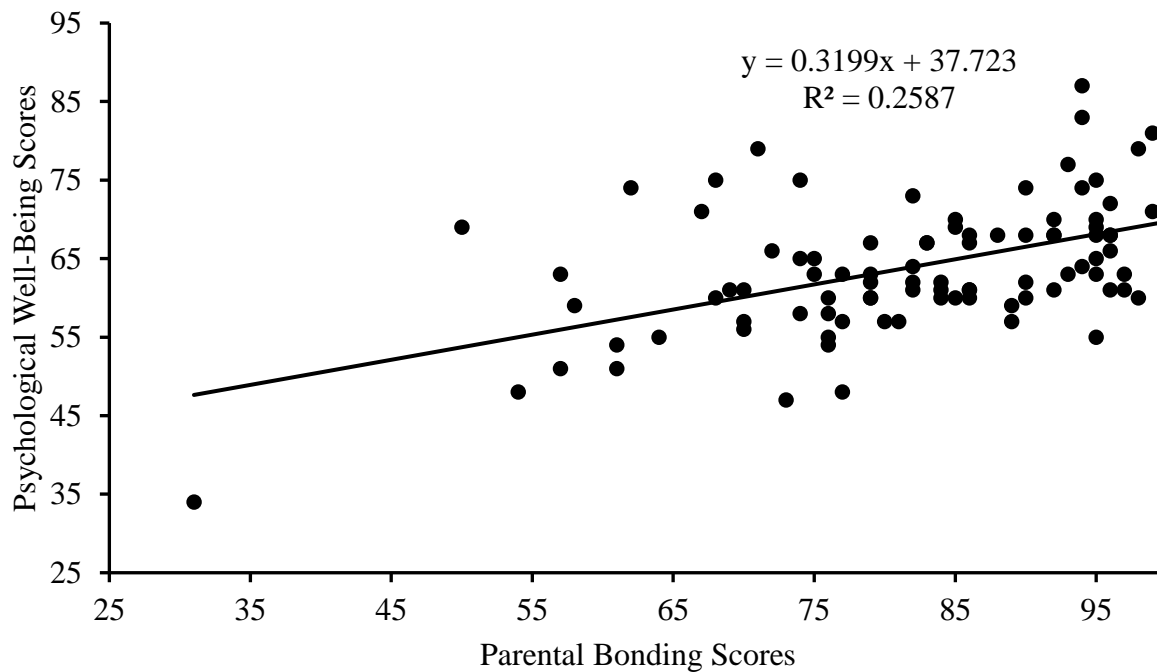


Figure 6. Scatterplot and line of best fit for the relationship between parental bonding scores with higher bonded parent (x-axis) and psychological well-being scores (y-axis), $r(91) = .509$, $p < .001$.

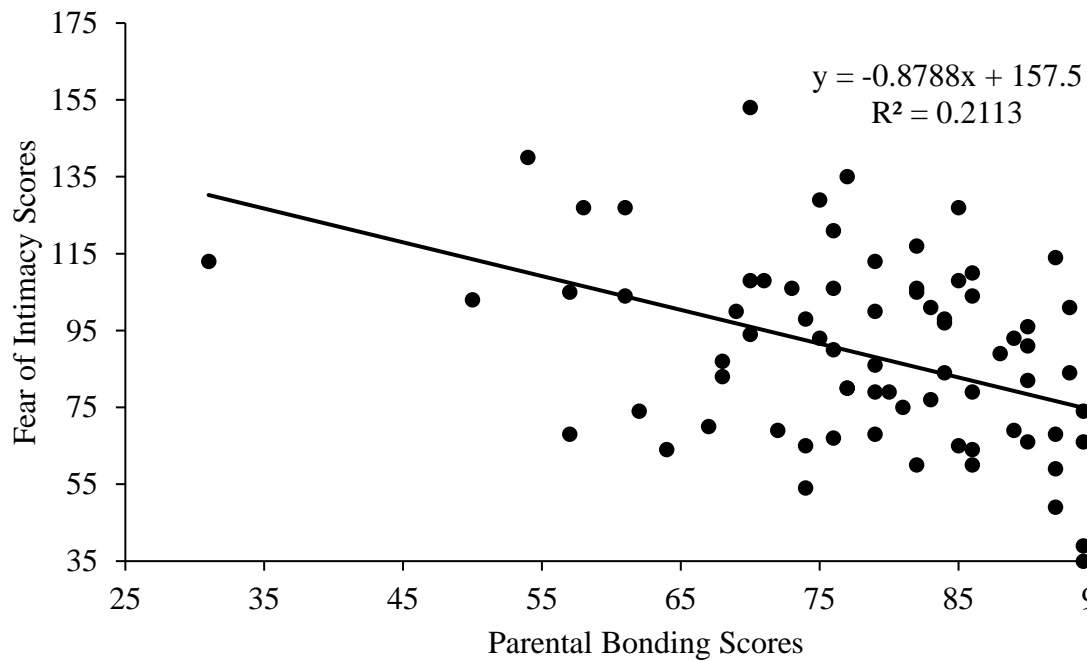


Figure 7. Scatterplot and line of best fit for the relationship between parental bonding scores with higher bonded parent (x-axis) and fear of intimacy scores (y-axis), $r(91) = -.460$, $p < .001$

psychological well-being was. Participant's scores on Ryff's Scales of Psychological Well-Being was negatively correlated to their scores on the Fear of Intimacy Scale. The more positive an individual's psychological well-being was, the less fear of intimacy in relationships the individual will have.

Discussion

This study analyzed different factors that influence psychological well-being. Firstly, the study aimed to determine whether there was a difference between a single parent household and a traditional two parent household in regards to parental bonding scores. The study also aimed to determine whether fear of intimacy and parental bonding were significant predictors of an individual's psychological well-being. The minimum number of 70 participants was reached to have significant statistical power. Therefore, the conclusion reached allows for confidence in the results. Both the primary and all secondary hypotheses have been supported by the present findings, as discussed below.

An independent t-test was used to analyze any differences between a single parent household and a two parent household. The first parent's bonding scores that participants reported was labelled as P1 and the second parent's bonding scores participants reported was labelled as P2, regardless of gender. The independent t-test demonstrated a non-significant relationship between a two parent household and a single parent household for bonding scores. The number of parents was not found to have predictive value for an individual's perceived bonding with a parent.

A multiple regression was analyzed using the bonding scores for P1 in a two parent household. It was found as expected that there was a significant positive relationship between those parental bonding scores and psychological well-being. Another multiple regression was

analyzed, but using the scores for P2 in a two parent household. This relationship was also positive and significant for parental bonding and psychological well-being. A final multiple regression was analyzed using the scores of the higher bonded parent for both single parent and two parent households. The results demonstrated another positive and significant relationship between parental bonding scores and psychological well-being. These findings are consistent with the study conducted by van Wel et al. (2000), in which parent-child relationships were found to have lasting impact on the child's psychological well-being. It also demonstrated to be more impactful for daughters than sons. These relationships in the current study indicated predictive value for parental bonding. Thus, the secondary hypothesis regarding parental bonding and psychological well-being was supported. The individuals who scored higher on the Parental Bonding Instrument, would score higher of Ryff's Scales of Psychological Well-Being. Individuals who had a stronger bond with at least one parent would be more likely to have a more positive psychological well-being in their adult years.

The multiple regression that used the P1 scores had a significant negative relationship with fear of intimacy. The multiple regression that used the P2 scores, also showed a significant negative relationship with fear of intimacy. Finally, the multiple regression that used the score of the higher bonded parent also demonstrated a negative significant relationship with fear of intimacy. An individual's ability to have intimate relationships is often shaped by the experiences they have with their parents (Weisskirch, 2018). These findings were consistent with the study conducted by Criddle et al. (2022). Individuals who had adverse childhood experiences and a poor parent-child relationship were more likely to have poor intimate relationships in the future. These individuals lacked the necessary interpersonal skills for adult intimate relationships. These correlational relationships in the current study indicated the secondary

hypothesis regarding parental bonding and fear of intimacy was also supported. Individuals who scored higher on Ryff's Scales of Psychological Well-Being would also score lower on the Fear of Intimacy Scale. The stronger the bond an individual has with a parent, the less fear of intimacy in relationships the individual would have in their adult years.

Additionally, the relationship between fear of intimacy and psychological well-being was explored. Results demonstrated a moderate, negative significant relationship. This relationship demonstrated predictive value for fear of intimacy and psychological well-being. Psychological well-being involves the development of different skills and abilities that lead to high levels of stability (Joshnloo, 2019). The development of these skills allowed for psychological well-being to be stable over time, meaning an individual's psychological well-being at one point in time is most likely to be similar in the future. Having healthy intimate relationships were vital for a positive psychological well-being (Weisskirch, 2018). Intimate relationships demonstrated to be a part of healthy development of an individual's well-being. This also indicated that the final secondary hypothesis was supported. Individuals who score higher on Ryff's Scales of Psychological Well-Being would also score lower on the Fear of Intimacy Scale. Therefore, the individuals who have a more positive psychological well-being, would be more likely to have less fear of intimacy in various relationships in their adult life.

The results demonstrated that the two predictors of parental bonding and fear of intimacy were significant, with the stronger predictor being fear of intimacy. The primary hypothesis was supported, the factors of parental bonding and fear of intimacy were able to relate to an individual's psychological well-being. The multiple regression analyses of each predictor support parental bonding and fear of intimacy both having predictive value. Both factors had

similar predictive value, with fear of intimacy being a slightly better predictor of psychological well-being.

Limitations

As with every study, there were also limitations. One limitation included the use of only a female university age population. This does not allow for all genders to be accurately represented. It also does not allow for individuals who are typically younger or older than university age to be represented with the data. Another limitation is the use of Fear of Intimacy Scale. The Fear of Intimacy Scale can be used for various types of relationship, but with the way the survey is structured, participants tend to focus on intimate romantic relationships. Even so, there is no way to determine what type of relationship a participant is focusing on when answering this particular survey. This forces the data to be generalized under all intimate relationship types. This does not allow to take in account individual's different relationship styles for different relationship types. A potential limitation could be reporter bias. Individuals had the potential to answer some of the questions with being socially acceptable in mind. Questions referring to their interpersonal skills in relationships and their psychological well-being has the possibility of being bias due to social desirability. Finally, there was also the limitation of generalizability of the specific University population. This does not allow for a full understanding of individuals with various backgrounds, education and differing experiences than individuals in a first-year psychology course at an University level to be represented.

Future Research

Further research can be enhanced by exploring the gender differences in parental bonding. Differences in the parent-child relationship between daughters and sons should be more thoroughly explored. Also, gender differences between parents should be explored further to

expand the understanding of parental bonding. Further research should also focus on the relationship style of parents in a two parent household. Focusing on the parent's relationship will allow for how their romantic relationships reflect onto the parent child relationship. Further research could also be conducted to further our understanding of cultural differences with parental bonding, and intimate relationships. The majority of participants in this study were white and from North America. Further research should focus on differing cultures to allow a deeper understanding of parent-child relationships and intimate relationships expectations and how these factors impact psychological well-being compared to the North American norms. Research can also be enhanced by having a specific focus on different relationship types. It is important to emphasize a difference between intimate friendships and intimate romantic relationships. Separating these two relationships types will allow for specific differences in interpersonal skills to be identified. This will allow further exploration on how the different relationship types impact an individual's psychological well-being. Future research should also focus on individual differences. This could be done by adding an instrument that measures personality to determine any significant relationships with parental bonding, fear of intimacy and psychological well-being.

Conclusion

This study emphasized the different factors that contribute to the development of an individual's psychological well-being in their adult years. Significant relationships were found for fear of intimacy and parental bonding with psychological well-being. Both of these factors are able to be considered important predictors of psychological well-being. The data from this study can be applied to examining the parent-child relationship further as it has demonstrated to be a foundation for intimate relationships and psychological well-being. Using this data and

implementing it in parenting books and/or classes can be beneficial. Further research still needs to be conducted to determine how different relationships types influence psychological well-being. Taking into consideration individual differences, such as personality, will continue to strengthen the findings on factors that predicts a positive psychological well-being.

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