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Association between commitment, positive and negative affects, and depression in romantic relationships

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Abstract

This study examined whether the association between approach-avoidance commitment and depression was mediated by affects toward romantic partner. Path analysis revealed that approach commitment was positively associated with positive affect, in turn positive affect was negatively associated with depression. Although approach commitment was also negatively associated with negative affect, this association was weaker than association between approach commitment and positive affect. Avoidance commitment was positively associated with negative affect, in turn negative affect was positively associated with depression. Although avoidance commitment was negatively associated with positively affect, this association was weak. Furthermore, direct effect of approach-avoidance commitment on depression was not significant. Theses result suggested that positive and negative affects toward romantic partner mediate association between approach-avoidance commitment and depression.

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1. Introduction

Commitment is an important predictor for maintaining romantic relationships (e.g., Le, Dove, Agnew, Korn, & Mutso, 2010). Several researchers have defined commitment in many ways, but the fundamental property of commitment is an intention or motivation to maintain a relationship (Johnson, 1991; Lydon, Burton, & Menzies-Toman, 2005; Rusbult, 1983). Recently, researchers have suggested that commitment has two dimensions: approach commitment and avoidance commitment (Frank & Brandstätter, 2002; Strachman & Gable, 2006). Approach commitment is defined as an “approach goal for rewards, which comes from relational maintenance.”

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Avoidance commitment is defined as an “avoidance goal from punishment, which is associated with relationship dissolution.”

Approach and avoidance commitment differentially impacts on relationship quality. For example, while approach commitment is positively associated with relationship satisfaction, avoidance commitment is negatively associated with it (Frank & Brandstätter, 2002). In addition, research in various domains has indicated that approach goals predict personal adaptation and avoidance goals predict personal maladaptation. For example, social approach goals (e.g., try to deepen my relationship with my friends) are positively associated with subjective well-being, and social avoidance goals (e.g., trying to avoid disagreements and conflicts with my friends) are positively associated with physical symptoms (Elliot, Gable, & Mapes, 2006). Given that approach-avoidance commitment is domain-specific, approach commitment should be associated with personal adaptation and avoidance commitment should be associated with personal maladaptation.

The present study examined whether approach-avoidance commitment was associated with personal adaptation and maladaptation. In present study, depression is assessed as an index of personal adaptation. The following hypothesis is predicted:

**Hypothesis 1:** Approach commitment is negatively associated with depression, and avoidance commitment is positively associated with depression.

Approach and avoidance goals have independent processes that influence relationship and personal adaptation (Elliot et al., 2006; Gable, 2006; Impett, Gordon, Kogan, Obeis, Gable, & Ketner, 2010). In research on affect and emotion, Gable, Elliot, & Reis (2000) found that a strong approach orientation toward rewards (Behavioural Activation System; BAS) was associated with more daily positive affect, and a strong avoidance orientation from punishment (Behavioural Inhibition System; BIS) was associated with more daily negative affect. Gable & Poore (2008) found that individuals who had strong approach goal tendencies evaluated relationship satisfaction by the presence or absence of positive affect toward a romantic partner. Individuals who had strong avoidance goal tendencies evaluated relationship satisfaction by the presence or absence of negative affect toward a romantic partner.

These results suggest that approach goals are associated with relationship and personal adaptation as mediated through positive affect, and avoidance goals are associated with relationship and personal adaptation as mediated through negative affect. For this reason, the association between approach-avoidance commitment and depression (H1) should be mediated by positive and negative affect toward a romantic partner. The present study also examined this mediated process. Thus, the second hypothesis is as follows:

**Hypothesis 2:** Approach and avoidance commitment and depression is mediated by positive and negative affect toward a romantic partner. Specifically, approach commitment is strongly mediated by positive affect, and avoidance commitment is strongly mediated by negative affect.

2. Method

2.1. Participants.

One hundred and forty-five undergraduate students who were involved in a romantic relationship completed a series of questionnaires (57 men and 98 women; average age = 19.98, SD = 2.20). The relationship length among
these individuals was as follows: 27.2% = less than 6 months, 25.9% = 6~12 months, 19.0% = 1~2 years, 10.2% = 2~3 years, and 8.2% = more than 3 years.

2.2. Measures.

Approach-avoidance commitment. Participants completed the Approach-Avoidance Commitment scale (Komura & Toda, 2008). This scale consists of 9 items approach commitment (e.g., “I maintain my relationship because I want to make pleasant memory with my partner.”) and 9 item avoidance commitment (e.g., “I maintain my relationship because I don’t want to be alone.”). These items were scored on 7-point scale. The alpha coefficients were .85 for approach commitment and .83 for avoidance commitment. The correlation between approach and avoidance commitment is $r = .19 (p < .001)$.

Positive and negative affect toward the romantic partner. Participants completed the Affects in Opposite-Sex Relationships scale (Tatewaki, 2007). This scale consists of 10 positive affect items (e.g., “affection,” “respect,” ”rely”) and 10 negative affect items (e.g., “sad,” ”anxiety,” ”irritant”). These items were scored on a 4-point scale. The alpha coefficients were .83 for positive affect and .82 for negative affect. The correlation between positive and negative affect was $r = - .23 (p < .001)$.

Depression. Participants completed the Japanese version of the Center for Epidemiologic Studies Depression Scale (CES-D: Radloff, 1977; Shima, Shikano, Kitamura & Asai, 1985). This scale consists of 20 items that assess depressive symptoms over the past few weeks. These items were scored on a 4-point scale. The alpha coefficient for this scale was .85.

Extraversion and Neuroticism. Participants completed subscales of extraversion and neuroticism from the Short Form Japanese Big-Five scale (Namikawa, Tani, Wakita, Kumagai, Nakane, & Noguchi, 2012). The scales included 4 extraversion items and 6 neuroticism items. The alpha coefficients were .83 for both extraversion and neuroticism. The correlation between extraversion and neuroticism was $r = - .30 (p < .001)$.

3. Result

3.1. Descriptive statistics

Means and standard deviations for each variable are shown Table 1. To examine gender differences among the main variables, t-tests were conducted. The only gender difference that emerged was for the approach commitment score.

<table>
<thead>
<tr>
<th>Variable</th>
<th>Men</th>
<th>Women</th>
<th>95% CI</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>M</td>
<td>SD</td>
<td>M</td>
</tr>
<tr>
<td>Approach commitment</td>
<td>4.94</td>
<td>1.24</td>
<td>5.47</td>
</tr>
<tr>
<td>Avoidance commitment</td>
<td>3.34</td>
<td>1.29</td>
<td>3.31</td>
</tr>
<tr>
<td>Positive affect</td>
<td>3.99</td>
<td>0.61</td>
<td>4.15</td>
</tr>
<tr>
<td>Negative affect</td>
<td>2.13</td>
<td>0.72</td>
<td>2.34</td>
</tr>
<tr>
<td>Depression</td>
<td>1.72</td>
<td>0.47</td>
<td>1.86</td>
</tr>
</tbody>
</table>
3.2. Approach-avoidance commitment and depression

Approach commitment is negatively associated with depression and avoidance commitment is positively associated with it (Hypothesis 1). To test the first hypothesis, a path analysis was performed with approach and avoidance commitment scores as predictors of depression score. In this analysis, participant’s gender, extraversion score, and neuroticism score were entered as control variables. As expected, approach commitment was related to decreased depression ($\beta = -0.24, p < 0.001$), and avoidance commitment was related to increased depression ($\beta = 0.23, p < 0.001$) after controlling for gender ($\beta = -0.19, p < 0.01$), extraversion ($\beta = 0.05, p = 0.46$), and neuroticism ($\beta = 0.49, p < 0.001$). Therefore, Hypothesis 1 was supported.

3.3. Approach-avoidance commitment, affect toward romantic partner, and depression.

The associations between approach-avoidance commitment and depression are mediated by affect toward a romantic partner (H2). Structural equation modeling was used to test the second hypothesis (Figure 1). Approach commitment was positively associated with positive affect ($\beta = 0.69, p < 0.001$) and negatively associated with negative affect ($\beta = -0.34, p < 0.001$). Avoidance commitment was positively associated with negative affect ($\beta = 0.40, p < 0.001$) and negatively associated with positive affect ($\beta = -0.13, p < 0.05$). In turn, positive affect was negatively associated with depression ($\beta = -0.14, p < 0.05$), and negative affect was positively associated with depression ($\beta = 0.23, p < 0.05$). Furthermore, the direct effect of approach and avoidance commitment on depression was not significant ($\beta = -0.13, p = 0.15, \beta = 0.12, p = 0.11$, respectively). To test for indirect effects, a bootstrapping procedure was performed. Bootstrapping results based on 1,000 resamples indicated that the 95% confidence interval did not include 0 (95% CI for approach commitment was $0.017$–$0.065$ and $-0.123$–$-0.029$ for avoidance commitment). On the basis of these results, Hypothesis 2 was supported.

4. Discussion

This study examined whether the association between approach-avoidance commitment and depression was mediated by affects toward the romantic partner, and the results supported it. There some possible reason for this mediate process. First, it is likely that individuals who had strong approach commitment tendencies experience
more positive events, and individuals who had strong avoidance commitment tendencies experience more negative events (e.g., Gable et al., 2000; Kuroda & Sakurai, 2010). Also, in the same event, while approach commitment may facilitate interpretation this event as more positive event, avoidance commitment may facilitate interpretation this event more negative event (e.g., Strachman & Gable, 2006b). Second, Approach commitment promotes pro-relationship behaviors such as sacrifice and forgiveness (Rusbult, Olsen, Davis, & Hannon, 2000). These pro-relationship behaviors enhance individual’s partner’s trust and pro-relationship behaviors (Wieselquist, Rusbult, Agnew, & Foster, 1999). These processes would increase sense of acceptance from romantic partner, and this sense of acceptance decreased depression symptoms. Another, avoidance commitment promote self-protection behavior and relationship destructive behavior (e.g., Downey, Frietas, Michaelis, & Khouri, 1998). These behaviors would increase sense of rejection from romantic partner, and this sense of rejection increased depression symptoms. Future research may benefit from exploring these possible reasons, and developing intervention that reduces depression caused by romantic relationships.

References


