

Emotional clarity, adult attachment and emotional eating

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Abstract

This study aims to investigate the relationship between emotional clarity, adult attachment and emotional eating. The research was carried out during the Coronavirus epidemic, in two periods (self- quarantine and new normal periods) with and without governmental restrictions. The research was carried out with a total of 194 participants; 69 in the self- quarantine period and 125 in the new normal period; between the ages of 20-45. In order to measure emotional eating scores, eating with positive and negative emotions subscale of “Emotional Appetite Questionnaire” were used. Emotional clarity subscale of “Difficulties in Emotion Regulation Strategies” were used to measure emotional clarity. Additionally, in order to measure attachment dimensions, “Experiences in Close Relationships- Revised” were used.

As a result, a positive correlation between attachment anxiety and emotional clarity and attachment avoidance and emotional clarity were found in new-normal period. In this period, no significant relationship was found between emotional eating and attachment dimensions and emotional clarity. In self-quarantine period, a positive relationship between attachment anxiety and eating with positive emotions and attachment anxiety and emotional clarity were found. However, no significant difference was found between avoidant attachment dimension and emotional eating and emotional clarity. The findings were evaluated in the light of the literature and suggestions for future studies were presented.

Keywords: Attachment anxiety; Attachment avoidance; Emotional clarity; Eating with negative emotions; Eating with positive emotions

INTRODUCTION

This study aims at investigating the role of emotions on disordered eating, in particular regulation of the emotions and attachment is studied in relation to emotional eating. In this study, emotional clarity is the focus of attention as an emotion regulation strategy.

Eating habits were subject to many studies throughout years, especially to medical and psychological ones (Ganley, 1989; Bruch, 1964). Today, eating habits are still studied by a large number of researchers with one of the most significant topics under investigation being eating disorders (Kaplan & Kaplan, 1957).

When past studies are examined, we see that until the mid-19th century, research on eating disorders was mostly based on physiological explanations (Kaplan & Kaplan, 1957). As Bruch (1964) mentioned, in latter part of the 19th century, mental factors are added into physiological explanations. Researchers started to reveal different aspects of eating disorders with the help of psychological explanations. For instance, the definition of anorexia nervosa began to take its current form (Bruch, 1964). In addition, during the first years of 20th century, the link between overeating in obesity and emotional disturbances started to be investigated (Kaplan & Kaplan, 1957).

Within years, many studies focused on understanding the sociocultural factors of eating disorders. For example, Stice et. al. (1994) investigated the conditions of thin –ideal media body images influencing women to develop eating disorders. Similarly, Hawkins et. al. (2004) found that culturally imposed body image increases body dissatisfaction and negative affect and decreases self-esteem in female population. Besides sociocultural factors, there are also gender related differences in eating pathology. Many researchers pointed out that females are at more risk compared to males (Hoiberg et. al., 1980; Seven, 2013). In fact, Neumark- Sztainer et.al., (2011) stated that adolescent girls are more likely to continue their disordered eating patterns in adulthood in comparison to adolescent boys.

When it comes to understanding the nature of eating disorders, emotions are also found to be an important element. In several studies, the results showed that both positive and negative emotions elicit changes in eating behavior-- also defined as “emotional eating” (Macht, 2008; Ouwens, et. al., 2009). Disordered eating patterns can be characterized by a lack of ability to differentiate emotions (Vajda & Lang, 2014; Macht & Simons, 2010). Additionally, several studies showed that individual’s emotional development, as well as

eating patterns are strongly affected by the early relationship between the infant and the primary caregiver (Darling & Steinberg, 1993; Birch & Fisher, 1998). Parallel with these overall findings, this study investigates the relationship of adult attachment dimensions, and one emotion regulation strategy, i.e., emotional clarity with emotional eating.

Related Literature

Eating habits are influenced by negative and positive beliefs, thoughts, and emotions about nutrition (Alvarenga et. al., 2012). Emotional eating is furthermore referred to changes in eating behavior as a response to different emotional conditions like anger, anxiety, loneliness, joy...etc. (Timmerman & Acton, 2001; Macht & Simons, 2000). In their experimental study, Chua et. al. (2004) found that negative mood-induced experimental group consumed more food than the control group. Further research showed an increase in food consumption during boredom and depression (Mehrabian, 1980). However, the same study also indicated decreased food consumption during fear and tension (Mehrabian, 1980). Robbins and Fray (1980), in a different study, found that people consumed less when faced with highly intense emotions like frustration and horror.

Looking further into the relationship between eating and emotions, Stice (2001) pointed out that eating serves either regulation or eschewal function from ungovernable emotions. Emotional clarity as an emotion regulation component is also a factor contributing to emotional eating. In their study, Rommel et. al. (2012) found a link between low emotional clarity and emotional eating. Similarly, Bruch (1964) mentioned in her article that people's inability to clarify emotional states is relational to eating disturbances. Also, in a study with people in the eating disorder group results showed significantly lower emotional clarity and dysfunctional emotional regulation (Svaldi et. al., 2012).

Positive or negative mental representations of a person directly influence his understanding of trustworthiness of others and of his own likability, the way he sees himself and others, and these understandings determine a personality trait; his attachment style (Sümer & Güngör, 1999; Main et. al., 1985). Classification of attachment according to individual differences was originally put forward by Ainsworth (1979). Ainsworth (1979) categorized three types of individual differences in attachment behavior. In the lab conditions, *securely attached* children displayed proximity and contact seeking behaviors in the reunion episodes with the mother and showed no avoidant and resistant behavior and

mothers of this group were consistently available, responsive, and sensitive. *Anxious-ambivalently attached* children sought proximity and contact with the mother in the reunion but also showed angry and resistant attitudes against her. In home observations, mothers of this group seemed to be inconsistent in her actions, sometimes unavailable and unresponsive but other times intrusive. *Anxious-avoidantly attached* children sought no contact and proximity with the mother in the lab situation, indeed they showed avoidant behavior against the mother. Mothers of these children avoided close bodily contact and ignored the needs of comfort and proximity (Ainsworth, 1979; Hazan & Shaver, 1994).

Ainsworth & Witting (1969) stated the significance of mothers' *emphatic reading and responding capacity* (understanding and clarifying the emotional states and responding according to that) to infant's changing emotional states in the determination of attachment dimensions (Kobak et.al., 2016). Mother's capacity to clarify the emotional signals that come from the infant, interpret them appropriately as attachment or exploration needs and respond accordingly, leads infant to recognize mother as "secure base" (Ainsworth & Wittig, 1969) and attachment security.

Influenced by the works of Margaret Mahler, Daniel Stern, John Bowlby and Alan Schore, Masterson and Lieberman (2004) suggested focusing on the pre-oedipal phase to understand the emotion regulation capacity of a person. He stated that, infants recognize emotions with the help of the primary caregiver and regulate his/her own emotions with the help of the primary caregiver (generally mother). If the mother is incapable of understanding, clarifying and regulating the emotions of the infant and reflecting them back, infant cannot learn how to understand, clarify and regulate emotions (Masterson & Lieberman, 2004). Supporting this theory, Elibol & Tok (2019) found that people with attachment anxiety and attachment avoidance show more emotion regulation difficulties. Also, Goodall et. al. (2012) showed in their study that people with attachment anxiety and attachment avoidance are less clear about their emotions.

Attachment styles also found to be related with emotional eating. In their study, Taube-Schiff et.al. (2015) found attachment anxiety and avoidance is related to emotional eating in bariatric surgery candidates. Orzolek-Kronner (2002) found that, insecurely attached adolescent females develop eating disorders more than controls. Another study found that participants with low levels of support-seeking behavior (which is a key feature for

avoidant attachment) show more emotional eating and use it as coping mechanism (Mamo & Louka, 2022). In line with this, another study showed that subjects do more emotional eating in order to overcome the pain associated with their insecure attachment (Hernandez-Hons & Woolley, 2011). In line with this purpose, these three main questions were formulated:

1. Is there a relationship between attachment and emotional eating?
2. Is there a relationship between emotional clarity and emotional eating?
3. Is there a relationship between emotional clarity and attachment?

MATERIALS and METHODS

Participant (subject) characteristics

A total of 280 participants answered the online questionnaire. Data were collected in two different time sections to prevent possible effects of Coronavirus pandemic on the study; the first section was collected during the beginning of the pandemic (March-May 2020) in which the participants were in “self-quarantine”. A total of 100 participants attended this part of the study. In the “new normal” section (June – September 2020), data were collected from a total of 180 participants. Due to age criteria (between 20-45), 11 participants from the “self-quarantine” section and 6 participants from the “new normal” section were excluded from the study. Additionally, 69 participants who reported a psychiatric medicine use were also excluded from the study. The final included 194 participants, ages 20-45 years ($M = 26.43$; $SD = 5.17$), 69 participants in the “self-quarantine” section ($M = 25.56$; $SD = 4.4$) and 125 participants in the “new normal” section ($M = 26.84$; $SD = 5.4$).

Procedure

Due to Coronavirus pandemic, data were collected by convenience sampling via Google Forms-which is the one of the most used online data collection tools. The age range was announced as 20-45 years. Data were collected in two different time periods to see the potential differences between self-quarantine and new normal. The first set of data were collected during “self-quarantine period” which was between 10th of March and 31st of May, 2021. The second set of data were collected during the normalization process in which people were no longer in self-quarantine; this section is named as “new normal”

during the study. The period of “new normal” were between the dates of 1st of June and 1st of September 2021.

During the online data collection participants started answering the questions after they have read the Informed Consent (Appendix A) and have accepted attending the study voluntarily. Afterwards, participants completed the sociodemographic form (Appendix B), Emotional Appetite Questionnaire (EMAQ) (Appendix C), Difficulties in Emotion Regulation Scale (DERS) (Appendix D) and Experiences in Close Relationships-Revised Questionnaire (ECR-R) (Appendix E) and Debriefing Form (Appendix E). The whole study took between 5-10 minutes to complete. At the end of the study, participants were informed about the variables and the aims of the study. Participants were given a contact email address in case they wanted to reach out and know the results of the study.

Data Collection Instruments

In this research, the data were collected through Socio-demographic form, Emotional appetite questionnaire (EMAQ), Experiences in close relationships inventory - revised (ECR-R) and Difficulties in emotion regulation scale (DERS).

Socio-demographic Form

In the sociodemographic form (see Appendix B) questions included participants’ age, gender, marital status, educational status, past and present psychiatric and psychological treatment, past and present psychiatric medicine usage, and physical health. The date participants attended the study was also recorded to know which section they belonged to (self-quarantine vs. new normal).

Emotional appetite questionnaire (EMAQ)

This scale was developed to measure emotional eating behavior. In the original scale, there are 22 items: 14 of them measures eating with positive/negative emotions and 8 of them measures eating in positive/negative situations. This is a 9-point Likert scale and participants rate changes in their eating according to different emotions like “sad, bored, secure, angry, happy...etc.” and situations like “under pressure, after a big fight...etc.”. Participants’ scorings between 1-4 show decreased eating, 5 no change and 6-9 increased eating. Participants can also select “not appropriate for me” and “I do not know the as an answer choice which is not included in the total score.

This measure which was named as “Appetite Questionnaire” was originally developed by Geliebter and Aversa (2003) to use in their study in which they aimed to measure the role of both positive and negative emotions and situations on overweight and underweight people. They showed in their study that the measure is reliable and internally consistent with the Cronbach alpha value of .78 for negative emotions, .75 for positive emotions, .65 for negative situations and .57 for positive situations and test- retest reliability is between .71 to .95.

Turkish adaptation of the was conducted by Demirel et. al. (2014) with a Cronbach alpha value of .73. They conducted a factor analysis of the measure and found a two-way factorial structure which is a total of positive emotions and situations and a total of negative emotions and situations. Also, they found high item correlations between the values of $r=.195$ ($p<0.05$) – $r=.883$ ($p<0.01$). Only the 5th item was not significantly correlated so they excluded that item. Thus, the Turkish version of EMAQ consists of 21 items.

In this study ($N=194$), Cronbach alpha value is .74 for the total measure. Also, in line with the purpose of the study, scores for positive and negative situations were not included in the analyses. The questionnaire’s positive emotions subscale includes 5 items and negative emotions subscale includes 8 items.

Difficulties in Emotion Regulation Scale (DERS)

This scale is originally developed by Gratz & Roemer (2004) to measure difficulties in emotion regulation. This is a 5-point Likert-type scale which includes 36 items. Higher scores show more difficulties in the regulation of emotions. This scale aims to measure 6 dimensions of emotion regulation which are *non-acceptance* of emotional responses (NONACCEPTANCE) which consists of items like “When I’m upset, I feel like I’m weak.”, lack of *emotional clarity* (CLARITY) which consists of items like “ I have a difficulty making sense out of my feelings.”, lack of *emotional awareness* (AWARENESS) which consists of items like “I care about what I’m feeling.”, limited access to emotion regulation *strategies* (STRATEGIES) which consists of items like “ When I’m upset, I believe that I’ll end up feeling very depressed.”, difficulties engaging in *goal-directed behavior* (GOALS) which consists of items like “When I’m upset, I have difficulty focusing on other things.” and lastly *impulse control* difficulties (IMPULSE) which consists of items like “When I’m upset, I become out of control”. A total emotion

regulation score can be calculated through summing up all subscales or subscales can be used alone to measure the emotion regulation more specifically. In this study, only lack of clarity (CLARITY) subscale was used. This subscale includes items that reflect the extent to which individuals know and are clear about the emotions they are experiencing.

The scale has an alpha coefficient of .93 and test-retest reliability coefficient is .88. Subscales' alpha coefficients for internal consistency ranges from .80 to .89.

The scales' Turkish adaptation was conducted by Rugancı & Gençöz (2010) The Turkish version of the scale has the same factor structure as the original scale except for one item and that item was excluded from the questionnaire. Thus, the Turkish version of the questionnaire includes 35 items. The Cronbach alpha coefficient for the Turkish population was .94. The subscales' alpha coefficients for internal consistency ranges from .75 to .90 and test- retest reliability is .83. Also, clarity subscale is found to be internally consistent (.82) and reliable (.69).

In this study ($N=194$), emotional clarity subscale has an alpha coefficient of .77 and found reliable.

Experiences in close relationships inventory - revised (ECR-R)

This questionnaire is originally developed by Brennan et. al. (1998) to clarify the basic dimensions of adult. As a result of a factor analysis with 323 items, they clarified two major dimensions of adult attachment which are anxiety and avoidance dimensions.

Revisions of the measure were conducted by Fraley et. al. (2000) by applying "item-response analysis" to the item pool, which was created by Brennan et. al. (1998). They developed the "Experiences in Close Relationships Inventory-Revised" (ECR-R) with higher measurement sensitivity through selecting the most distinctive items. They selected 18 items measuring the anxious attachment dimension and 18 items measuring the avoidant attachment dimension. It is a 7-point Likert-type scale with 36 items in total. It consists of items for attachment anxiety subscale like "I'm afraid that I will lose my partner's love." and "I prefer not to show a partner how I feel deep down." for attachment avoidance subscale. Scoring is being conducted through calculating the mean scores for each subscale. Lower scores on both subscales point to attachment security and increases in scores points to anxious or avoidant attachments. This scale can also be used for categorical measurement of adult attachment and scoring differs accordingly. However, in this study,

attachment dimensions were measured in a continuous fashion and were scored as explained above.

The original scale was adapted to Turkish population by Selçuk et. al. (2005) with a Cronbach alpha value of .90 for attachment avoidance is and .86 for attachment anxiety. In this study ($N=194$), Cronbach alpha value is found .91 for attachment avoidance and .87 for attachment anxiety.

Data Analysis

Statistical analyses were completed using IBM SPSS Statistics Version 22. All the data collected through online were transferred into the program. First, the frequency and percentage values of the demographic characteristics of the participants were examined. Additionally, descriptive statistics of emotional clarity, attachment dimensions and emotional eating levels of participants were calculated. Also, participants' information such as age, height, and weight, and were calculated.

During normality tests, skewness and kurtosis levels of emotional clarity, attachment and emotional eating were analyzed. Since the normal distribution were protected, data were tested parametrically via independent samples t-test and Pearson's correlation.

RESULTS

Analyses Testing the Hypotheses

Hypothesis 1 that there is a positive correlation between attachment anxiety scores and eating with positive emotions scores was supported for the “self-quarantine” group, but not for the “new normal” group (see Table 1 & 2).

Hypothesis 2 that there is a positive correlation between attachment anxiety scores and eating with negative emotions scores was not supported for the “self-quarantine” group, nor for the “new normal” group (see Table 1 & 2).

Hypothesis 3 that there is a positive correlation between attachment avoidance scores and eating with positive emotions scores was not supported for the “self-quarantine” group, nor for the “new normal” group (see Table 1 & 2).

Hypothesis 4 that there is a positive correlation between attachment avoidance scores and eating with negative emotions scores was not supported for the “self-quarantine” group, nor for the “new normal” group (see Table 1 & 2).

Hypothesis 5 that there is a positive correlation between difficulties in emotional clarity scores and eating with positive emotions scores was not supported for the “self-quarantine” group, nor for the “new normal” group (see Table 1 & 2).

Hypothesis 6 that there is a positive correlation between difficulties in emotional clarity scores and eating with negative emotions scores was not supported for the “self-quarantine” group, nor for the “new normal” group (see Table 1 & 2).

Hypothesis 7 that there is a positive correlation between difficulties in emotional clarity and attachment anxiety scores was supported for both the “self-quarantine” group and for the “new normal” group (see Table 1 & 2).

Hypothesis 8 that there is a positive correlation between difficulties in emotional clarity subscale and attachment avoidance scores was not supported for the “self-quarantine” group, and was supported for the “new normal” group (see Table 1 & 2).

DISCUSSION and CONCLUSION

Attachment and Emotional Clarity

Attachment theory highlighted the importance of the mother-child interaction for the regulation of emotions. When the mother and child bonding develops in an insecure base, the infant could have difficulties in clarifying emotions (Schore, 1994; Siegel & Germer, 2012). In this study, a positive relationship between attachment anxiety and difficulty in emotional clarity, as well as attachment avoidance and difficulty in emotional clarity were found in the “new normal” group. Higher attachment anxiety and avoidance were found to be related with higher difficulty in clarifying emotions during the “new normal” period. In the “self-quarantine” group, a positive relationship between attachment anxiety and difficulty in emotional clarity were found. Only higher attachment anxiety was found to be related to higher difficulty in emotional clarity in the “self-quarantine” group. No significant relationship between attachment avoidance and difficulty in emotional clarity were found in this group.

The present significant results found in the “new normal” group are consistent with the findings of previous studies (Saribal, 2017; Shaver & Mikulincer, 2016; Elibol & Tok, 2019) that people with attachment anxiety and attachment avoidance have more difficulty in clarifying emotions. Similarly, Stevens et. al (2014) found that people with attachment

anxiety are more aware of their emotions but have struggle to identify and differentiate their emotions. Also, Kim (2005) found that, attachment avoidance is related to inattention to emotions and lack of emotional clarity.

Unexpectedly, no significant relationship was found between difficulty in emotional clarity and attachment avoidance in the “self-quarantine” group. One of the possible effects of Coronavirus pandemic was that it was fostering more stress over individuals (Polizzi et.al., 2020). People with avoidant attachment are known to depend on more deactivating strategies which means suppression and denial of worries, needs and vulnerabilities during stressful events (Cassidy & Shaver, 2016). According to Mikulincer and Orbach (1995), avoidant people inhibit cognitive processing of emotions during distress-eliciting inner or outer stimuli. Similarly, Wilkinson, Rowe & Heath (2013) stated that, avoidant people suppress and distance themselves from any internal or environmental distressing cue and since they experience no distress in the first place, they need no need to manage and clarify emotions.

Attachment and Emotional Eating

In this study, the results showed that, higher attachment anxiety was significantly correlated with eating with positive emotions during the “self-quarantine” period. Studies related to attachment and emotional eating showed that, there is a significant relationship between attachment anxiety and emotional eating. For example, in a study, to manage feelings of insecurity, anxiously attached people exhibited more emotional eating (Wilkinson, et. al. 2013).

Unlike in the “self-quarantine” group, there was no significant relationship between attachment dimensions and emotional eating in the “new normal” group. On the one hand, this can be in line with the findings, of Phillips et. al.(2012) who also found that, there was no significant relationship between attachment anxiety and emotional eating and with the findings of Stapleton & Mackay (2014) who found no significant relationship between fearful avoidant and dismissive avoidant attachment styles and emotional eating. On the other hand, one of the possible explanations to this could be the “self-quarantine” effect. Most of the participants of this study spent most of their time at home and with family during the “self-quarantine” period. Since people with higher attachment anxiety need more support and reassurance (Cassidy & Shaver, 2016) and intense and frequent

proximity seeking from attachment figures (Ainsworth, Blehar et.al., 1978; Fraley & Shaver, 1998); spending most of the time with attachment figures could lead to initially experiencing fewer negative emotions (Vowels et.al., 2022). This also could be the explanation to why no relationship was found between attachment anxiety and eating with negative emotions during both periods. Also, Bowlby (1973; 1980) stated that, reunion with attachment figure leads to feelings like love, joy, tenderness. So, spending most of the time close to attachment figures could have led to an increase in positive emotions.

Differently than expected, no significant relationship was found between emotional eating and attachment avoidance. Since the pandemic was a stress evoking situation, deactivating strategies for attachment avoidance might have been triggered. As mentioned before, people with higher attachment avoidance use more deactivating strategies, such as repression of emotions, depending mostly on the self and ignoring the need for support from an attachment figure (Cassidy & Shaver, 2016). This could be one of the explanation of the pandemic which may have prevented them from feeling emotions openly and led them to withdraw (Vowels et.al., 2022)

Emotional Clarity and Emotional Eating

In this study, the expected results were that there was a positive correlation between eating with positive and negative emotions and difficulty in emotional clarity. Previous studies in literature, showed that there is a significant relationship between emotional clarity and emotional eating (Giannini et.al., 2013; Rommel et. al., 2012; Svaldi, 2012). Surprisingly, no significant relationship was found between emotional eating and emotional clarity. However, in line with our findings, Braden et.al. (2018) found in their study that, eating in response to positive and negative emotions is not related to difficulties in emotion regulation. Also, Merwin et. al. (2010) found in their study with eating disorder patients that there is no significant relationship between lack of clarity and binge eating disorder.

Limitations and Suggestions for Future Research

Since there are limited studies on eating, attachment and emotional clarity conducted during Covid-19 outbreak, it was a challenge to support the findings of this

study. In the future, more studies can be developed related to emotional eating during Covid-19 epidemic.

Despite this limitation, the present study enhanced our understanding of the relationship between attachment dimensions, emotional clarity and emotional eating. It also helped us to discover the difference between two pandemic periods. This study is important since it is one of the limited studies to work with emotional eating, emotional clarity and attachment dimensions during Covid-19 outbreak.

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REFERENCES

- Ainsworth, MDS, Blehar, MC, Waters, E, & Wall, S. (1978). Patterns of attachment: A psychological study of the Strange Situation. Hillsdale, NJ: Erlbaum.
- Ainsworth, MDS. (1979). Attachment as related to mother-infant interaction. *Advances in the Study of Behavior*, 9:1-49
- Ainsworth, MDS, & Wittig, BA. (1969). Attachment and exploratory behaviour of one-year-olds in a strange situation. In B. M. Foss (Ed.), *Determinants of Infant Behaviour*, 4:111–136.
- Alvarenga, MS, Scagliusi, FB &Philippi, ST. (2012). Comparison of eating attitudes among university students from the five Brazilian regions. *Ciência & Saúde Coletiva*, 17(2):435-444.
- Birch, LL & Fisher, JO (1998). Development of eating behaviors among children and adolescents. *Pediatrics*, 101(3): 539-549.
- Bowlby, J. (1973). *Attachment and loss: Vol. 2. Separation: Anxiety and anger*. New York: Basic Books.
- Bowlby, J. (1980). *Attachment and loss: Loss, sadness and depression (Vol.3)*. Basic Books.
- Braden, A, Musher-Eizenman, D, Watford, T, & Emley, E. (2018). Eating when depressed, anxious, bored, or happy: Are emotional eating types associated with unique psychological and physical health correlates? *Appetite*, 125, 410–417.
- Brennan, KA, Clark, CL, & Shaver, PR. (1998). Self-report of measurement of adult attachment: An integrative overview. In J. A. Simpson & W. S. Rholes (Eds.), *Attachment theory and close relationships*, The Guilford Press, 46-76.

- Bruch, H. (1964). Psychological aspects in overeating and obesity. *Psychosomatics*, 5: 269-274.
- Cassidy, J, & Shaver, PR. (Eds.). (2016). *Handbook of Attachment: Theory, Research, and Clinical Applications* (3rd ed.). The Guilford Press.
- Chua, JL, Touyz, S & Hill, AJ. (2004). Negative mood-induced overeating in obese binge eaters: an experimental study. *International Journal of Obesity*, 28: 606–610
- Darling, N & Steinberg, L. (1993). Parenting style as context: An integrative model. *Psychological Bulletin*, 113: 487-496.
- Demirel, B, Yavuz, KF, Karadere, ME, Şafak, Y & Türkçapar, MH. (2014). Duygusal İştah Anketi'nin türkçe geçerlik ve güvenilirliği, beden kitle indeksi ve duygusal şemalarla ilişkisi. *Bilişsel Davranışçı Psikoterapi ve Araştırmalar Dergisi*. 3:171-181.
- Elibol, Ş & Tok, ESS. (2019). Bağlanma stilleri, duygu düzenleme, reddedilme duyarlılığı, yakınlık korkusu ve kendini saklamanın kırılğan narsisizm ile ilişkisi. *Ayna Klinik Psikoloji Dergisi*, 6(2): 127-148.
- Fraley, RC, & Shaver, PR. (1998). Airport separations: A naturalistic study of adult attachment dynamics in separating couples. *Journal of Personality and Social Psychology*, 75: 1198–1212.
- Fraley, RC, Waller, NG, & Brennan, KA. (2000). An item response theory analysis of self-report measures of adult attachment. *Journal of Personality and Social Psychology*, 78: 350-365.

- Ganley, RM. (1989). Emotion and eating in obesity: A review of the literature. *International Journal of Eating Disorders*, 8: 343-361.
- Geliebter, A & Aversa, A. (2003). Emotional eating in overweight, normal weight, and underweight individuals. *Eating Behaviors*, 3: 341-347.
- Gianini, LM, White, MA. & Masheb, RM. (2013). Eating pathology, emotion regulation, and emotional overeating in obese adults with binge eating disorder. *Eating Behaviors*, 14: 309-313.
- Goodall, K, Trejnowska, A & Darling, S. (2012). The relationship between dispositional mindfulness, attachment security and emotion regulation. *Personality and Individual Differences*, 52: 622-626.
- Gratz, KL & Roemer, L. (2004). Multidimensional assessment of emotion regulation and dysregulation: Development, factor structure, and initial validation of the difficulties in emotion regulation scale. *Journal of Psychopathology and Behavioral Assessment*, 26(1): 41-54.
- Hawkins, N, Richards, PS, Granley, HM & Stein, DM. (2004). The impact of exposure to the thin-ideal media image on women. *Eating Disorders*, 12: 35-50.
- Hazan, C & Shaver, PR. (1994). Attachment as an organizational framework for research on close relationships. *Psychological Inquiry*, 5(1): 1-22.
- Hernandez-Hons, A, & Woolley, SR. (2011). Women's experiences with emotional eating and related attachment and sociocultural processes. *Journal of Marital and Family Therapy*, 38(4): 589-603.
- Hoiberg, A, Berard, SP & Watten, RH. (1980). Correlates of obesity. *Journal of Clinical Psychology*, 36(4): 983-991

- Kaplan HI, & Kaplan HS. (1957) The psychosomatic concept of obesity. *The Journal of Nervous and Mental Disease*, 125(2):181–201.
- Kim, Y. (2005). Emotional and cognitive consequences of adult attachment: The mediating effect of the self. *Personality and Individual Differences*, 39: 913–923.
- Kobak, R, Zajac, K & Madsen, SD. (2016). Attachment disruptions, reparative process, and psychopathology: Theoretical and clinical implications. In J. Cassidy & P.R. Shaver (Eds.), *Handbook of Attachment: Theory, Research and Clinical Applications*. The Guilford Press, 25-39.
- Macht M & Simons, G. (2000). Emotions and eating in everyday life. *Appetite*, 35: 65–71.
- Macht, M. (2008). How emotions affect eating: A five-way model. *Appetite*, 50(1): 1-11.
- Macht, M & Simons, G. (2010). Emotional eating. *Emotion Regulation And Well-Being*, Springer, 281-295.
- Main, M, Kaplan, N, & Cassidy, J. (1985). Security in infancy, childhood, and adulthood: A move to the level of representation. *Monographs of the Society for Research in Child Development*, 50: 66–104.
- Mamo, HI. & Louka, P. (2022) The experience of emotional eating in individuals with insecure attachment style: An Interpretative Phenomenological Analysis (IPA) approach. *Dialogues in Clinical Neuroscience & Mental Health*, 5(1): 35-49.
- Masterson, JF & Lieberman, AR. (2004). *Terapistler için Kişilik Bozuklukları Rehberi: Masterson Yaklaşımı Rehber ve Çalışma Kitabı*. Psikoterapi Enstitüsü Yayınları (İstanbul), 1-35
- Mehrabian, A. (1980). Basic dimensions for a general psychological theory. Oelschlager, Gunn & Hain Publishers Inc.

- Merwin, RM, Zucker, NL, Lacy, JL, & Elliott, CA. (2010). Interoceptive awareness in eating disorders: Distinguishing lack of clarity from non-acceptance of internal experience. *Cognition & Emotion*, 24(5): 892–902.
- Mikulincer, M, & Orbach, I. (1995). Attachment styles and repressive defensiveness: The accessibility and architecture of affective memories. *Journal of Personality and Social Psychology*, 68: 917–925.
- Neumark-Sztainer, D, Wall, M, Larson NI, Eisenberg, ME & Loth, K. (2011). Dieting and disordered eating behaviors from adolescence to young adulthood: Findings from a 10-year longitudinal study. *Journal of the American Dietetic Association*, 111(7): 1004–1011.
- Orzolek-Kronner, C. (2002). The effect of attachment theory in the development of eating disorders: Can symptoms be proximity-seeking? *Child and Adolescent Social Work Journal*, 19: 421–435.
- Ouwens MA, (2009). Possible pathways between depression, emotional and external eating. A structural equation model, *Appetite*, 53: 245-248.
- Phillips, AL, Gibson, EL, Slade, L. (2012). Anxious attachment predicts uncontrolled eating independently of emotional eating, *Appetite*, 59 (2): 633.
- Polizzi, C, Lynn, SJ, & Perry, A. (2020). Stress and Coping in the Time of Covid-19: Pathways to Resilience and Recovery. *Clinical neuropsychiatry*, 17(2): 59–62.
- Robbins, TW, & Fray, PJ. (1980). Stress-induced eating: Fact, fiction or misunderstanding? *Appetite*, 1: 103–133.

- Rommel, D, Nandrino, JL., Ducro, C, Andrieux, S, Delecourt, F & Antoine, P. (2012). Impact of emotional awareness and parental bonding on emotional eating in obese women. *Appetite*, 59(1): 21–26.
- Rugancı, N & Gençöz, T. (2010). Psychometric properties of a Turkish version of the difficulties in emotion regulation scale. *Journal of Clinical Psychology*, 66(4): 442—455.
- Saribal, İ. (2017). *Kişilerarası ilişkilerin, duygu düzenleme güçlüğünün ve kaygının bağlanma stilleri ile ilişkisi*. Yayınlanmamış Yüksek Lisans Tezi, İstanbul: Maltepe Üniversitesi Sosyal Bilimler Enstitüsü.
- Schore, AN. (1994). *Affect regulation and the origin of the self*. Hilldale, NJ: Erlbaum
- Selçuk,E, Günaydın,G, Sümer, N & Uysal, A. (2005). Yetişkin bağlanma boyutları için yeni bir ölçüm: Yakın İlişkilerde Yaşantılar Envanteri-II'nin Türk örnekleminde psikometrik açıdan değerlendirilmesi. *Türk Psikoloji Yazıları*, 8(16): 1-11.
- Seven, H. (2013). Yetişkinlerde duygusal yeme davranışının beslenme durumuna etkisi, Yüksek Lisans Tezi. İstanbul: Haliç Üniversitesi Sosyal Bilimler Enstitüsü.
- Shaver, PR & Mikulincer, M. (2016). Adult attachment and emotion regulation. In J. Cassidy & P.R. Shaver (Eds.), *Handbook of Attachment: Theory, Research and Clinical Applications*, The Guilford Press, 507-533.
- Siegel, R, & Germer, C. (2012). Wisdom and compassion: Two wings of a bird. In C. K. Germer & R. D. Siegel (Eds.), *Wisdom and compassion in psychotherapy*, Guilford Press (New York), 7–35.

- Stapleton, P & Mackay, E. (2014). Psychological determinants of emotional eating: The role of attachment, psychopathological symptom distress, love attitudes and perceived hunger. *Current Research in Psychology*, 5(2): 77-88
- Stevens, FL. (2014). Affect regulation styles in avoidant and anxious attachment. *Individual Differences Research*, 12: 123–130.
- Stice, E. (2001). A prospective test of the dual-pathway model of bulimic pathology: Mediating effects of dieting and negative affect. *Journal of Abnormal Psychology*, 110(1): 124-135.
- Stice, E, Schupak-Neuberg, E, Shaw, HE & Stein, RI. (1994). Relation of media exposure to eating disorder symptomatology: an examination of mediating mechanisms. *Journal of Abnormal Psychology*, 103(4): 836-840.
- Sümer, N & Güngör, D. (1999). Yetişkin bağlanma stilleri ölçeklerinin Türk örneklemini üzerinde psikometrik değerlendirmesi ve kültürlerarası bir karşılaştırma. *Türk Psikoloji Dergisi*, 14(43): 71-106.
- Svaldi, J, Griepenstroh, J, Tushen-Caffier, B & Ehring, T. (2012). Emotion regulation deficits in eating disorders: A marker of eating pathology or general psychopathology? *Psychiatry Research*. 197: 103-111.
- Taube-Schiff, M, Exan, JV, Tanaka, R, Wnuk, S, Hawa, R & Sockalingam, S. (2015). Attachment style and emotional eating in bariatric surgery candidates: The mediating role of difficulties in emotion regulation. *Eating Behaviors*, 18: 36-40.
- Timmerman, GM, & Acton, GJ. (2001). The relationship between basic need satisfaction and emotional eating. *Issues in Mental Health Nursing*, 22(7): 691–701.

Vajda, A & Lang, A. (2014). Emotional abuse, neglect in eating disorders and their relationship with emotion regulation. *Social and Behavioral Sciences*, 131: 386-390.

Vowels, LM, Carnelley, KB, Stanton, SCE. (2022). Attachment anxiety predicts worse mental health outcomes during COVID-19: Evidence from two studies. *Personality and Individual Differences*, 185.

Wilkinson, LL, Rowe, AC & Heath, GH. (2013). Eating me up inside: Priming attachment security and anxiety, and their effects on snacking. *Journal of Social and Personal Relationships*. 30(6): 795–804.

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TABLES

Table 1: The Relationship between Difficulties in Emotional Clarity, Attachment and Emotional Eating During Self-Quarantine Period

		DERS-EC	Attachment Avoidance	Attachment Anxiety	Emotional Eating- PE	Emotional Eating-NE
DERS-EC	r	1				
Attachment Avoidance	r	.121	1			
Attachment Anxiety	r	.335**	.403**	1		
Emotional Eating-PE	r	.060	.025	.274*	1	
Emotional Eating- NE	r	.085	-.182	.082	-.122	1

Note: DERS-EC: Difficulties in Emotion Regulation Strategies- Emotional Clarity Subscale

Emotional Eating-PE: Emotional Eating Positive Emotions Subscale

Emotional Eating-NE: Emotional Eating Negative Emotions Subscale

Table 2: The Relationship between Difficulties in Emotional Clarity, Attachment and Emotional Eating During New Normal Period

		DERS-EC	Attachment Avoidance	Attachment Anxiety	Emotional Eating- PE	Emotional Eating- NE
DERS-EC	r	1				

NOTE: This preprint reports new research that has not been certified by peer review and should not be used as established information without consulting multiple experts in the field.

	DERS-EC	Attachment Avoidance	Attachment Anxiety	Emotional Eating- PE	Emotional Eating- NE
Attachment Avoidance	r .193*	1			
Attachment Anxiety	r .340**	.337**	1		
Emotional Eating- PE	r .104	-.082	.143	1	
Emotional Eating- NE	r -.008	-.154	.038	-.276**	1

Note: DERS-EC: Difficulties in Emotion Regulation Strategies- Emotional Clarity Subscale
 Emotional Eating-PE: Emotional Eating Positive Emotions Subscale
 Emotional Eating-NE: Emotional Eating Negative Emotions Subscale