

THE IMPACT OF ATTACHMENT STYLES, HEALTH DISTRESS, AND PROXIMITY ON TREATMENT OUTCOMES IN AN HIV-POSITIVE COHORT

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Abstract

Attachment theory has been invoked as a means of gaining insight into the adherence and healthcare behaviors of the chronically and persistently ill. The primary research focus has been on the attachment style of the patient or client. Healthcare consumers, patients, or clients identified as having insecure styles are typically associated with poorer outcomes in correlational research. However, both attachment and adherence are relationship constructs that involve a caregiver and a care-recipient. This study examines how attachment theory contributes to a client's success in meeting health-related treatment outcomes by incorporating a more complete array of attachment components. It extends prior research by assessing the interplay between the attachment styles of both the client and a preferred provider, contact between both members of the relationship, and distress manifested by self-reported health distress. The participants were 168 HIV-positive adults receiving services at a busy outpatient case management program in the South Bronx, NYC, and 55 case manager providers who help clients address an array of medical and non-medical goals that impact overall HIV health. The average client age was 46; race was 51% Latino/Latina, 42% African American, and 3 % White. Individual attachment styles were measured by the Bartholomew and Horowitz Relationship Questionnaire. Health Distress was measured by the Stanford Patient Education Research Center's modified version of the Medical Outcomes Study Health Distress Questionnaire. Using ANOVA, Pearson correlations, and means testing, the research questions analyzed were the percentage of goals met according to the styles of the client and the client's preferred provider; various relationships among attachment styles, goals met, and contacts with one's preferred provider; the relationship between health distress and contacts in relation to attachment style, and the relationship between health distress and goals met as related to style. The results suggest an interplay of attachment components beyond that of the client's individual style alone, notably the impact of health distress and the provider's attachment style. Insights gleaned from this study suggest that the healthcare consumer's ability to achieve health-related goals and maintain optimal health may be a characteristic of the partnership between the provider and consumer, as well as context.

Keywords: Attachment style, health distress, proximity, client-provider relationship, HIV, AIDS, adherence.