Understanding the Contribution of Abnormal Inferiority Feelings on Insecure Attachment Through Gender and Culture: A Study of University Students Seeking Psychological Support

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Abstract

Inferiority feelings, attachment styles, and gender are some of the variables influenced by culture. In this study, relationships between the three variables were examined with regression analysis in 154 university students who were seeking counseling for close relationships problems. The results indicated that abnormal inferiority feelings significantly predicted both attachment anxiety ($R^2 = .30$, $p \leq .01$, Cohen's $f^2 = .42$) and attachment avoidance ($R^2 = .10$; $p < .01$, Cohen's $f^2 = .12$) for all participants. Abnormal inferiority feelings significantly predicted attachment avoidance for males ($\beta = .31$; $p < .05$), and predicted only attachment anxiety for females ($\beta = .36$; $p < .01$). While the discouragement subscale of abnormal inferiority feelings was a significant predictive factor of insecure attachment for both males and females, useless superiority effort was a significant predictive factor only for males. The results are discussed in terms of culture, and recommendations are provided for culturally sensitive therapeutic processes.

Keywords: Abnormal inferiority feelings, insecure attachment, gender, help seeking

As culture is influential in people's lives, most contemporary psychological approaches agree that culture must be considered in the therapeutic process (Corey, 1996; Corsini & Wedding, 1989). Indeed, cultural differences are influential in all phases from the attitudes related to psychological help to the process of counseling and termination (Kim & Omizo, 2003; Komiya, Good, & Sherrod, 2000; Türküm, 2005). The influence of culture is evident in biological sex expectations in many societies. Thus, gender roles in modern societies seem to be less separated than in societies where traditional culture is very dominant, such as Turkey (Dökmen, 2006), where gender roles are significantly separated for males and females (Bem, 1993). Gender role expectations may be influential in seeking psychological help (Türküm, 2005). The dynamics of the problems that cause male and female clients to seek psychological help differ even for similar complaints. Theoretical explanations suggest that abnormal inferiority feelings and insecure attachment types may be some of these dynamics.

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Inferiority feelings (Adler, 1979) and attachment style (Bowlby, 1984) are determining factors in close interpersonal relationships, and both concepts can be affected by cultural factors such as gender role expectations. Individuals in societies where individualism is important and modern life is dominant are competing with each other or trying to be dominant over others. This situation may activate abnormal inferiority feelings of individuals more in individualistic societies than in individuals in collectivistic societies (Mosak, 1989). Similarly, in collectivistic cultures, gender discrimination may activate abnormal inferiority feelings of women in particular (Mosak & Schneider, 1977). In contrast, attachment styles may also vary on the basis of societal values (Agishtein & Brumbaugh, 2013; McLeod, 2014). For example, individualistic countries that support independence have high levels of anxious avoidant attachment styles, whereas collectivist countries have quite high levels of ambivalent-resistant attachment styles (McLeod, 2014). In Turkey, where the traditional lifestyle is dominant, the attachment processes are expected to be ambivalent-resistant styles.

This study explored the relationships between the variables of gender, abnormal inferiority feelings, and attachment styles, all of which are affected by cultural features. The research was conducted with university students who were receiving psychological help for problems in close relationships. In this study, primarily the effect of abnormal inferiority feelings as a predictor of insecure attachment styles was examined. Then, any gender differentiations were investigated.

University Students and Problems of Close Relationships

University students tend to receive psychological support for various problems, some of which are specific to the developmental period (Gotlib, 1984; Güneri, 2006; Herken, Bodur, & Kara, 2000; Özgüven, 1992). These problems may be severe enough to drive students to suicide (Güneri, 2006). Most of the problems are related to interpersonal relationships, including loneliness (Bernardon, Babb, Hakim-Larson, & Gragg, 2011; Cheng & Furnham, 2002; Onur, 1995; Wiseman, Mayseless, & Sharabany, 2006), communication problems (Cheng & Furnham, 2002; Onur, 1995), social anxiety, and low self-esteem (Jay & Daugelli, 1991). To establish satisfying interpersonal relationships, individuals are affected by their perceptions toward themselves and others, and some dynamic or inner processes. One of these processes is the style of attachment to others based on early experiences (Sümer & Güngör, 1999; Sümer & Şendağ, 2009; Uytun, Öztop, & Esel, 2013).

Attachment Styles and Early Childhood Experiences

Attachment may be a significant determinant for being in a relationship (Margalit, 2010). Hence, many theoreticians of attachment have proposed that the quality of social relationships the individual may establish in adulthood takes form based on the attachment styles established in the early childhood period (Bowlby, 1973, 1980, 1984; Çalışır, 2009; Hazan & Shaver, 2000; Sayar & Tüzün, 2006).

According to attachment theory, even if the childhood period shows differences from the adulthood period in many aspects, people are attached to the adults who provide their care (Weiss, 1982), and the style of this attachment has become the start of a process that affects close relationships of the individual in the ensuing periods (Deniz, 2006; Margalit, 2010). A basic tenet of attachment theory indicates that confident behavior is correlated with fulfillment of the basic needs of the individual and the achievement of intimacy (Margalit, 2010). Securely attached people are those who feel confident and who are sociable and who do not feel discomfort in establishing close relationships (Çalışır, 2009; Karakurt, 2012; Sümer & Güngör, 1999; Yoraz, 2010). At the same time, these individuals perceive others as reliable, supportive, and accessible, as well as lovable and able to develop close relationships (Akbağ & İmamoğlu, 2010). In the early developmental process, when the secure attachment basis is not formed, the baby feels the fear of abandonment by the care provider and develops a feeling that other people may show the same reaction in the following periods of life. Therefore, the social relationships established later in life may be shaped accordingly (Margalit, 2010). In such cases, people exhibit unhealthy attachment styles, such as attachment anxiety and attachment avoidance (Hazan & Shaver, 1987; Selçuk, Günaydın, Sümer, & Uysal, 2005; Sümer & Güngör, 1999).

While anxiously attached people feel rejection and abandonment, they tend to be very jealous or frequently establish close or emotional relationships with others. Avoidant attached people tend to protect themselves and therefore avoid establishing close relationships (Çalışır, 2009; Hazan & Shaver, 1987; Karakurt, 2012; Yoraz, 2010). Individuals who have attachment anxiety style and/or avoidance prefer avoiding social environments and contact in stressful environments with the aim of protecting their sense of security (Bartholomew, 1990; Bartholomew & Horowitz, 1991; Hazan & Shaver, 1994; Shaver & Brennan, 1992), and therefore they experience various psychological stresses (Ergin & Dağ, 2013). In other words, anxious and/or avoidant attached individuals are those who believe less in themselves and others. These theories suggest that inferiority feelings, as a key concept of Individual Psychology, may have a significant effect on the attachment style of the individual.

Abnormal Inferiority Feelings and Early Childhood Experiences

As in the attachment process, inferiority feelings also take form on the basis of early life experiences, and these feelings determine social and emotional relationships of the individual in adulthood (Adler, 2009b; Corey, 1996). Theoretically, there is a sense of incompetence, with a balancing effort toward being superior at a certain level of inferiority feeling. In this sense, it is a motivating factor for individuals (Adler, 1996, 1998; Mosak & Schneider, 1977). However, very severe, intense, and prolonged experiences, or orientation to superiority against others, are accepted as indicators of abnormality of inferiority feelings (Adler, 2009a). In this context, inferiority feelings can be experienced at different levels and contexts. According to Adler (1998), abnormal inferiority feelings cause the individual to retreat in the face of difficulties, causing various psychological problems or symptoms. Thus, many negative feelings, such as anger, guilt, helplessness in the face of life difficulties, dissatisfaction with relatives, lack of self-confidence, or denial of one's own value, can be signs of abnormal inferiority feelings (Adler, 1998; Mosak, 1989). As a result, while a normal sense of inferiority is universal and functional, a sense of abnormal inferiority is a mood that is seen in a limited segment of society and that makes life difficult for the individual (Mosak, 1989).

Adler (2009b) suggested that inferiority feelings that can be characterized as abnormal develop in association with incorrect approaches shown by the parents to the natural inferiority of an infant, such as punishment or humiliation. An infant exposed to these incorrect approaches will show psychological symptoms in later life such as anxiety, shyness, embarrassment, and fear of being alone (Adler, 2009b; Dreikurs, 1997; Yao et al., 1998).

This function of inferiority feelings is discussed theoretically in the framework of social interest. As social interest is a commitment to contribute to the welfare of others in one's family, friendship group, and community (Dolev & Shifron, 2016), or the interest of the individual in other people in general (Ansbacher, 1982; Brough, 1994); it is the opposite of loneliness and demonstrates a need to establish relationships with other people (Akdoğan & Ceyhan, 2014). According to Adler (1979, 2009a), low social interest is a reflection of abnormal inferiority feelings. In other words, low social interest is correlated to high inferiority feelings (Corey, 1996; Ferguson, 2001). Among the most significant results of abnormal inferiority feelings is that it damages the quality of relationships of the individual in adulthood (Brough, 1994). Abnormal inferiority feelings also prevent the individual from fulfilling basic life tasks (Adler, 2009b). In this context, developing close relationships is one of the most important life tasks (Adler, 2009a) and is affected by abnormal inferiority feelings. Hence, on the one hand, abnormal inferiority feelings

are characterized by discouragement of social relationships, life, and self-devaluation, while on the other hand, they are characterized by the struggle to be superior to others with the aim of overcoming embarrassing feelings (Akdoğan & Ceyhan, 2014). As a result, abnormal inferiority feelings should be considered in the context of healthy social relationships. Therefore, when examined more closely, both anxiety and avoidance in close relationships can be considered within the scope of abnormal inferiority feelings.

Current Study

The problems related to insecure attachment and abnormal inferiority feelings may be the reasons people seek psychological help. Both insecure attachment and abnormal inferiority feelings are known to be related to loneliness (Akdoğan, 2017), and loneliness is closely related to the tendency to seek help (Cacioppo et al., 2000). For example, because individuals with insecure attachment styles perceive less social support, they experience more distress. Accordingly, their tendency to seek help is also increasing (Vogel & Wei, 2005). In addition, the abnormal inferiority feelings cause other psychological symptoms, which then lead to seeking psychological help (Akdoğan & Ceyhan, 2014; Goodwin & Marusic, 2003; Yao et al., 1998). In the literature, gender is considered an important factor for both attachment styles and psychological help seeking attitudes. For example, in close relationships, insecure attachment is especially peculiar to males in both childhood (Del Giudice, 2009) and adulthood (Feeney, 1999). As females are perceived as wanting more closeness than males (Feeney, 1999), males show higher avoidance and lower anxiety than females (Del Giudice, 2011). Females also have more positive attitudes than males toward receiving psychological support (Good, Dell, & Mintz, 1989; Juvrud & Rennels, 2017; Komiya et al., 2000; Leong & Zachar, 1999; Türküm, 2005). It is also known that in individualistic societies, where individuality is dominant, inferiority feelings may be more activated than in collectivistic societies (Mosak, 1989) and that women experience more inferiority feelings than men in collectivistic societies (Mosak & Schneider, 1977). Therefore, it can be assumed that psychological help seeking, attachment, and inferiority feelings are affected by cultural context. This study examined whether abnormal inferiority feelings have any predictive role in insecure attachments on close relationships and also examined possible gender differences.

Method

The predictive power of abnormal inferiority feelings on adult insecure attachment styles was investigated in this study. Beyond the descriptive statistics, *t*-test, and correlations between variables, stepwise and multiple

linear regression analysis were used to explore the predictive power of abnormal inferiority feelings on insecure attachment.

Participants and Procedure

The total participant group of 154 university students comprised 56 males (36%) and 98 females (64%), with a mean age of 20.73 ±2.15 years. All participants were seeking psychological support in the psychiatric department of a hospital in Turkey. In the selection process of the participants, the hospital management and psychiatry department were informed of the purpose of the study and official permission was requested. Participants without any acute or chronic psychiatric diagnosis were selected by a psychiatrist for participation in the study. These students were experiencing problems in intimate relationships, with parents or in other close relationships. Each participant who volunteered to participate in the study was informed of the purpose of the research and given the questionnaire set that included a demographic data sheet, and the two measurement instruments. The data collection process lasted for more than a year.

Measures

Experiences in Close Relationships–Revised (ECR-R). The ECR-R, which measures adult attachment dimensions, is a 7-point Likert-type scale. The ECR-R was developed by Fraley, Waller, and Brennan (2000) and adapted to Turkish by Selçuk et al. (2005). The scale has attachment anxiety (ANX) and attachment avoidance (AVO) subscales. Each subscale consists of 18 items. The total items of the scale explain 38% of total variance. In validity and reliability studies of the ECR-R Turkish Form, internal consistency coefficients were found to be .86 and .90 for the ANX and AVO subscales, respectively, and test–retest reliability coefficients were found to be .82 and .81, respectively. The results of confirmative factor analysis confirmed the two-factor structure of the original form of ECR. The fit indices were calculated as follows: goodness-of-fit index = .86; nonnormed fit index = .86; comparative fit index = .89; and root mean square residual = .087 (Selçuk et al., 2005).

Inferiority Feelings Scale (IFS). The Inferiority Feelings Scale (IFS) is a 20-item, 5-point Likert type developed on the basis of the Adlerian approach. The scale measures abnormal inferiority feelings with discouragement (DC), negation of self-value (NSV), and useless superiority effort (USE) subscales (Akdoğan & Ceyhan, 2014). The total score is obtained by adding all item scores. High scores indicate high abnormal inferiority feelings of the individual. In the validity study, it was determined that 20 items in the scale explain 43.63% of total variance. Cronbach's alpha internal consistency coefficient of the scale was determined as .86 and internal consistency coefficients of subscales as .80, .71, and .73, respectively. Test–retest reliability was calculated as .88 (Akdoğan & Ceyhan, 2014).

Statistical Analyses and Data Screening

The IFS subscales were taken as independent variables and the subscales of ECR-R entered as dependent variables. Analyses were carried out for all participants and for males and females separately. Before the analysis, 13 missing values were identified, and missing values were replaced with series means. Mahalonobis distances were calculated to check whether extreme values existed in the regression. The results showed that there were extreme values (Çokluk, Şekercioğlu, & Büyüköztürk, 2010). The researchers then reviewed whether the attachment and inferiority feeling levels of the participants differed on the basis of gender. The Levene test was used to compare gender-based averages. The results showed that the data were normally distributed for males (for ECR-R score, $F = .07$; for IFS score, $F = 4.07$; $p > .05$) and for females (for ECR-R score, $F = .05$; for IFS score, $F = .80$; $p > .01$). The Kolmogorov-Smirnov (F between .03 and .20; $p > .01$) and Shapiro-Wilk (F between .33 and .60; $p > .05$) tests showed meaningful results for all participants. Comparison of averages showed no significant difference in attachment and inferiority feeling levels of the participants based on gender. The results of the t-test and descriptive statistics about the variables are given in Table 1.

Table 1
Descriptive Statistics and t-Test Results ($df = 152$)

		N	$\bar{X}$	SD	t	p
Attachment anxiety	Female	98	71.39	18.59	0.95	0.34
	Male	56	74.50	21.16		
Attachment avoidance	Female	98	59.40	18.40	0.92	0.36
	Male	56	56.61	17.30		
Discouragement	Female	98	23.88	6.12	0.17	0.86
	Male	56	23.69	7.16		
Negation of self-value	Female	98	15.17	4.47	2.16	0.03*
	Male	56	16.77	4.29		
Useless superiority effort	Female	98	19.93	3.87	1.52	0.13
	Male	56	21.00	4.70		

*$p < .05$.

Before regression analysis, the researchers determined whether the data fulfilled stepwise or multiple linear regression analysis conditions. The scatter diagram created to determine whether the variables were homogeneous showed that data points clustered on an axis close to one another, and the *Box M* test showed no significant clustering in the distribution of the data (*Box M* = .79; $p > .05$). One of the normality assumptions in the stepwise or linear regression analysis was that there was no multicollinearity between the variables (Albayrak, 2012; Büyüköztürk, 2010; Çokluk et al., 2010; Tabachnick & Fidell, 2001), as multicollinearity may negatively affect the interpretability of the results (Frazier, Tix, & Barron, 2004; Petrocelli, 2003). Indicators of multicollinearity were accepted as correlation among the variables at very high levels ($r > .90$), along with a high variance inflation factor (*VIF* > 10), and tolerance value among the variables (*TV* > 10) and condition index (*CI* > 30) (Çokluk et al., 2010). In this study, the highest correlation (*r*) value of the variables was .49, the highest *VIF* value as 2, *TV* value as 8, and *CI* value as 15. Therefore, we concluded that the data were appropriate for stepwise and multiple linear regression analysis. In the calculation of the effect size of R^2 values, the Cohen's f^2 was preferred and reported following Cohen's (1988) criterion.

Results

Separate regression analysis was performed for each subdimension of IFS to determine the predictive power of abnormal inferiority feelings on both attachment anxiety and attachment avoidance, and to determine whether gender is a significant moderator on this effect. The results of the stepwise regression analysis for each subscale of IFS indicated that abnormal inferiority feelings had a significant and large effect on attachment anxiety ($R = .55$, $R^2 = .30$, $p < .01$, Cohen's $f^2 = 0.42$) and a significant but small effect on attachment avoidance ($R = .31$, $R^2 = .10$; $p < .01$, Cohen's $f^2 = 0.12$) styles, but gender did not make any statistically significant contribution to this predictive effect (R^2 change between 0.007% and 0.001%; *F* change between 1.4 and 0.2; $p > .05$). In other words, the stepwise analysis results revealed that gender is not a moderator variable on abnormal inferiority feelings and attachment anxiety or attachment avoidance. As the sample size was small in each gender group (male = 56, female = 98), the multiple linear regression analysis was run for the study group as a whole and for each gender separately.

The Predictive Effect of Abnormal Inferiority Feelings on Attachment Anxiety

Analyses were applied for attachment anxiety; the ANX subscale of ECR-R as a dependent variable, and the subscales of the IFS (DC, NSV, and

USE) as predictor variables were entered into the multiple linear regression model. The results of the multiple regression analysis are given in Table 2.

Table 2 shows a statistically significant positive relationship between ANX and DC ($r = .50$; $p < .01$) and ANX and USE ($r = .39$; $p < .01$) for the whole study group. The correlation coefficient between attachment ANX and NSV subscale of IFS was not significant. When the NSV and USE variables were controlled, the relevant correlation coefficient decreased to the level of .20 for the ANX-DC relationship, and when the DC and NSV variables were controlled, the correlation coefficient decreased to .20 for the ANX-USE relationship. When the predictive powers of the independent variables were reviewed, the three subscales of IFS together predicted attachment anxiety at the level of 30% ($R = .55$, $R^2 = .30$, $p < .01$, Cohen's $f^2 = 0.42$). The standardized regression coefficient (β) showed that the most powerful predictive variable for ANX level was DC (β = 29%), followed by USE (β = 22%) and NSV (β = 17%).

When gender is considered, the USE subscale of IFS significantly predicts ANX, with 31% as the most powerful predictor for males (β = .31; $p < .05$). The DC (26%) and NSV (10%) subscales of IFS do not significantly predict ANX ($p > .05$). These three subscales explain 31% of variance of ANX ($R = .56$; $R^2 = .31$; $p < .05$, Cohen's $f^2 = 0.45$). DC is the most powerful predictor for ANX, with 36% of variance for female participants (β = .36; $p < .01$). NSV and USE subscales of IFS predict 16% and 14% of ANX variances, respectively, but were not statistically significant ($p > .05$). These three subscales together significantly and largely predict 30% of variance of ANX ($R = .55$, $R^2 = .30$; $p < .01$, Cohen's $f^2 = 0.42$).

The Predictive Effect of Abnormal Inferiority Feelings on Attachment Avoidance

Table 3 shows the multiple regression analysis for attachment avoidance for the whole study group and for males and females separately. The AVO subscale of ECR-R as a dependent variable, and the subscales of the IFS (DC, NSV, and USE) as the predictor variables, were entered into the multiple linear regression model. The results of this analysis are given in Table 3.

As seen in Table 3, when the whole study group was taken into consideration, a statistically significant positive relationship was determined between attachment avoidance and the DC subscale of IFS ($r = .30$; $p \leq .01$). When the NSV and USE variables were controlled, the relevant correlation coefficient decreased to the level of .20 for the AVO-DC relationship. The correlation values of AVO-NSV ($r = .23$; $p > .05$) and AVO-USE ($r = .20$; $p > .05$) were not statistically significant. It can also be understood from Table 3 that the three variables together were significant predictors of attachment avoidance ($R = .31$, $R^2 = .10$; $p < .01$), although the effect size of R^2 was small (Cohen's $f^2 = 0.12$).

Table 2
The Multiple Linear Regression Analysis Results Related to the Predictive Effect of Abnormal Inferiority Feelings on Attachment Anxiety (ANX)

	N	Variable	*B*	*sd B*	β	*P*	Dual *r*	Part *r*	R^2	Cohen's f^2
Female	98	Constant	22.21	9.51		0.02*				
		DC	1.08	0.40	0.36	0.00**	0.53	0.27		
		NSV	0.67	0.50	0.16	0.18	0.42	0.14	0.30	0.42
		USE	0.66	0.48	0.14	0.17	0.32	0.14		
Male	56	Constant	17.92	12.65		0.16				
		DC	0.78	0.50	0.26	0.11	0.47	0.22		
		NSV	0.52	0.78	0.10	0.51	0.40	0.09	0.31	0.45
		USE	1.41	0.58	0.31	0.02*	0.47	0.32		
Total	154	Constant	19.13	7.36		0.01***				
		DC	0.88	0.29	0.29	0.00**	0.50	0.20		
		NSV	0.78	0.40	0.17	0.06	0.42	0.13	0.30	0.42
		USE	1.02	0.35	0.22	0.00**	0.39	0.20		

*$p < .05$. **$p < .01$. ***$p \leq .01$.

Table 3
The Multiple Linear Regression Analysis Results Related to the Predictive Effect of Abnormal Inferiority Feelings on Attachment Avoidance (AVO)

	N	Variable	*B*	*Sd B*	β	*p*	Dual *r*	Part *r*	R^2	Cohen's f^2
Female	98	Constant	46.18	10.94		0.00**				
		DC	0.60	0.46	0.20	0.20	0.22	0.13		
		NSV	0.25	0.58	0.06	0.66	0.19	0.05	0.05	0.29
		USE	0.24	0.55	0.05	0.66	0.04	0.05		
Male	56	Constant	39.63	11.48		0.00**				
		DC	0.83	0.42	0.34	0.05*	0.39	0.26		
		NSV	0.87	0.68	0.21	0.20	0.37	0.18	0.21	0.26
		USE	0.82	0.51	0.22	0.11	0.00	0.22		
Total	154	Constant	45.51	7.71		0.00**				
		DC	0.80	0.31	0.29	0.01***	0.30	0.20		
		NSV	0.28	0.42	0.07	0.50	0.23	0.06	0.10	0.12
		USE	0.53	0.37	0.12	0.16	0.20	0.17		

*$p \leq .05$. **$p < .01$. ***$p \leq .01$.

In Table 3, it can be seen that the DC subscale of IFS predicted AVO with 34% at the highest level and was significant for male participants (β = .34; $p \leq .05$). The NSV and USE subscales of inferiority feelings were not statistically significant but predicted AVO at 21% and 22%, respectively. These three subscales together predicted AVO at the level of 21% (R = .46; R^2 = .21; $p < .01$, Cohen's f^2 = 0.26). For the female participants the IFS subscales alone made no significant contribution to AVO ($p > .05$), although the three variables together predicted AVO at the level of 5% (R = .23; R^2 = .05; $p < .01$, Cohen's f^2 = 0.29).

Discussion

This study investigated the predictive power of abnormal inferiority feelings on adult insecure attachment styles. The results showed that abnormal inferiority feelings were significant predictors of the attachment styles of university students seeking psychological support. The study confirmed the theory that both attachment and inferiority feelings are formed by early experiences. The results varied according to participant gender, which may indicate that cultural factors play a role in attachment styles and inferiority feelings. It is possible that in a collectivist culture like that of Turkey, the attachment problems of men and women have different dynamics. Therefore, gender in the cultural context must be considered in the therapeutic process.

This study revealed that the IFS subscales of discouragement (DC) and useless superiority effort (USE) were significant predictive factors of attachment anxiety (ANX). Discouragement means that the self-confidence of the individual has been weakened (Adler, 1937/2011). Secure attachment, which is the opposite of attachment anxiety, is related to the self-confidence of the individual (Çalışır, 2009; Ergin & Dağ, 2013; Sümer & Güngör, 1999; Yoraz, 2010). It may be assumed that a person who has been discouraged has low self-confidence and high inferiority feelings. Therefore, such people may not develop a secure attachment with others. Inferiority feelings continuously direct the individual to overcome this feeling as they are destructive and discomforting (Adler, 1937/2011; Mosak, 1989; Sweeney, 1989). Although this effort is natural and to be expected in some ways (Adler, 2009b), struggling to be superior to others leads the individual to the useless side of life (Mosak, 1989). Taking part in the useless side of life or making useless superiority effort means that the individual may not establish security-based relationships with others. When viewed from this aspect, those who may develop relationships are perceived by these individuals as competitors rather than as emotional support and therefore insecure attachment occurs. Consequently, while the natural need of the individual is to develop an emotional closeness with others (Bowlby, 1973, 1980, 1894; Hazan & Shaver,

1994), the individual may perceive others as competitors to overcome the inferiority feelings. Hence, such individuals may experience intense anxiety in close relationships.

When gender is taken into consideration, while the most predictive variable in attachment anxiety for males is useless superiority effort, the most predictive variable for females is discouragement. In other words, males experience anxiety in the attachment process when they are making a useless superiority effort, and females experience anxiety when they are discouraged. This situation seems to be related to gender but may also be related to collectivist culture. There is a latent pressure in cultures such as Turkey where traditional structures predominate and there is a societal expectation of behavior based on gender roles (Akdoğan, 2007). Moreover, the people in such cultures are directed to behave "appropriately" to their biological sex (Aşılı, 2001). Consequently, assertiveness is an expected behavior from males and abstention from females (Zimbardo, 1979). The findings of this study showed that the inferiority feelings of the participants were formed within the light of societal expectations and the attachment styles differed accordingly. In other words, in close relationships males try to be superior to others according to expectations of society. This may prevent males from developing secure attachments, especially in romantic relationships. It is understood that in terms of behaving assertively, females have less courage than males, which also causes them to experience more anxiety in attachment relationships with the opposite sex.

In this research, statistically significant correlations were also found between attachment avoidance and inferiority feelings. The statistics determined regardless of gender showed that inferiority feelings explained approximately 10% of attachment avoidance for the total sample. However, the standardized regression coefficient (β) showed that discouragement predicted attachment avoidance at the highest rate (29%). As for attachment anxiety, this finding indicated that discouragement was also a significant predictor for all the participants in the attachment avoidance processes. This subscale of inferiority feelings is characterized by preventing individuals from facing their inferiorities. In other words, discouraged persons may prefer to abstain from or avoid relationships rather than face what they perceive as their own inferiority (Adler, 2009a).

The results based on gender revealed that all subscales of inferiority feelings predicted attachment avoidance at the level of 21% for males and 2% for females. This result showed that inferiority feelings are much more influential in attachment avoidance for males than for females. This may be explained by the difference between females and males in terms of gender-specific behavior, such as seeking psychological support. As in anxiety attachment, it is possible to say that males avoid facing their inferiorities, and therefore, discouragement is the highest predictor of attachment avoidance for males.

As in anxiety attachment, differences were revealed between males and females in attachment avoidance. Females are known to have more positive attitudes toward receiving psychological support, which may depend on the given culture (Good et al., 1989; Komiya et al., 2000; Leong & Zachar, 1999; Türküm, 2005). The participants in this study were those who had sought out psychological support, which means they could not avoid searching for psychological support for their problems. Although both males and females sought psychological help instead of avoiding problems, the inferiority feelings of females with attachment avoidance were much lower than those of their male counterparts. This suggests that avoidant attitudes of males in the attachment processes (Del Giudice, 2009, 2011; Feeney, 1999) may be fed from the same source as their attitudes toward coping with difficulties, even though they had asked for and received support. In this context, new studies might be carried out in which inferiority feelings and attachment styles are taken into consideration, along with the tendencies to seek help. In contrast, abnormal inferiority feelings being a lower predictor in attachment avoidance may indicate the possibility of other mediating variables on attachment avoidance. It has been reported that a significant correlation between attachment style and social skills indicates that other factors such as assertiveness, endurance, and indomitability, which are correlated with attachment avoidance, may be significant latent variables. There is a need for future research to take other relevant variables into consideration (Deniz, Hamarta, & Arı, 2005).

Attachment style is considered a significant variable in the psychological support process (Bucci, Roberts, Danquah, & Berry, 2015; Taylor, Rietzschel, Danquah, & Berry, 2014). In this study, abnormal inferiority feelings were determined to be a significant predictor in both anxiety and avoidance, especially for male participants. Hence, the gender differences in the predictive power of abnormal inferiority feelings on the attachment styles proved in the subscales shows that inferiority feelings have different functions in the attachment process for females and males. Discouragement for females in anxiety attachment and discouragement for males in attachment avoidance suggests that one of the causes directing the male participants to seek psychological support may result from their attachment avoidance tendencies. These differences can also be explained by cultural context.

Limitations

This study investigated the predictor effect of abnormal inferiority feelings subscales on attachment types. However, it is a limitation that the variables such as loneliness, shyness, low self-esteem, and social phobia—correlated to both attachment and inferiority feelings—were not taken into consideration. Therefore, a new study could be conducted taking into consideration the mediating variables that may be correlated with both variables.

In this study cultural characteristics of individualistic and collectivistic societies were not included in the regression analyses as variables. Instead, it was assumed that the country (Turkey) where the study was conducted has collectivistic features. In future research, the individualistic and/or collectivistic features could be taken into account as mediator or mediation variables.

It might also be said that the number of participants of this study was limited. Indeed, the number of participants was low, and the disproportion between male and female numbers prevented testing the moderator role of gender under the predictive effect of abnormal inferiority feelings on attachment styles.

Implications for Practice

During the therapeutic process, it must be considered whether the clients come from a traditional culture, and the relationship between inferiority feelings and attachment processes can be differentiated according to gender. For example, while men in traditional cultures are expected to display avoidant behaviors in close relationships, the possibility of displaying discouragement by women is higher.

The outbreak of attachment problems in the therapeutic process should remind professionals of abnormal inferiority feelings. Professionals should foresee that those being counseled may be discouraged in the counseling process and may therefore experience attachment problems.

In close relationships, the dimensions of abnormal inferiority feelings experienced by university students with attachment problems may vary by gender. For example, abnormal inferiority feelings causing avoidance for males indicate that they need to be encouraged much more in close relationships.

It should be kept in mind that abnormal inferiority feelings may show as a useless superiority effort in close relationships especially in males undergoing counseling.

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