

Research Paper

## Exploring the Dimensions of Attachment Styles, Impulsivity and Psychological Distress among Substance Users with Different Intervention Needs

Khushi Agarwal<sup>1\*</sup>, Dr. Smriti Sethi<sup>2</sup>

### ABSTRACT

The aim of the study is to study the relationship between Attachment Styles, Impulsivity and Psychological Distress in Substance Users. In the research, sample of 117 was collected from individuals using substances within the past three months. Participants completed self-report measures including Alcohol, Smoking and Substance Involvement Screening Test (ASSIST), Adult Attachment Scale – Close Relationship, Barratt Impulsiveness Scale- 11 and Kessler Psychological Distress Scale -10. Data was analysed using Analysis of Variance (ANOVA). The findings revealed a significant difference in the impulsivity ( $F(2,114) = 8.185, p < 0.001$ ) and psychological distress ( $F(2,114) = 14.359, p < 0.001$ ) in different intervention need. Further it found no significant difference in the attachment styles sub scales. The study helps in understanding the factors affecting substance use within young adults. The study also highlights the importance of tailored intervention according to the individuals severity of substance use.

**Keywords:** *Substance Use, Young Adults, Attachment Style, Impulsiveness, Psychological Distress, Intervention Needs*

Young adulthood is the peak incidence time for a variety of diagnosable conditions, most notably alcohol use disorder. Therefore, recognising the significance of early detection of substance use is pivotal to forestall its development into a disorder.

Substance use is defined as the intake of psychoactive substances and other substances that change one's mood, cognition, or behaviour. While substance usage does not necessarily have negative repercussions, it can develop into substance addiction or dependency. People may turn to substance as a kind of comfort in response to physiological demands. According to Dowell et al. (2016), physical discomfort and limited access to medication or healthcare services can also lead to substance use as a form of self-medication.

Substance use can be triggered by emotions such as hopelessness, loneliness. According to, Substance use can be made worse by emotional discomfort (Khantzian, 1997) and influence by social isolation and peer pressure where substance use is deemed acceptable. (Borsari and

<sup>1</sup>Post Graduate Student, Amity University Noida, Uttar Pradesh

<sup>2</sup>Assistant Professor - II, Amity University Noida, Uttar Pradesh

\*Corresponding Author

Received: April 26, 2024; Revision Received: May 01, 2024; Accepted: May 05, 2024

## Exploring the Dimensions of Attachment Styles, Impulsivity and Psychological Distress among Substance Users with Different Intervention Needs

Carey, 2001). Moreover, biological variables might heighten susceptibility, such as a hereditary inclination towards substance use. The use of substances causes dizziness, confusion, and impaired judgment, serious physical illnesses. Substance use can also lead to mood fluctuations exacerbating pre-existing mental health issues.

Young adults, often aged 18 to 35 are more likely to develop mental illnesses and substance use problems while many studies have investigated these phenomena separately, there is still a lack of research that combines substance use with critical characteristics such as psychological distress, attachment patterns, and impulsivity. According to the National Survey on Extent and Pattern of Substance Use in India (2019), the alcohol is the most widely used substance. It includes about 14.6% of the population and within the age range of 10-7 yrs. Additionally, the percentage for other substances are- Cannabis (2.8%), Opioids (2.1%), Sedatives (1.08%), Inhalants (0.7%).

According to Bowlby, attachment refers to the deep psychological bond that exists between people. Through the attachment types formed by the bond between the infant and caregiver, early events in childhood have a substantial impact on behaviour and development later in life. Ainsworth distinguish three primary patterns or styles of attachment: secure (Healthy self-esteem and confidence, openness to receiving and giving love) anxious-resistant (sensitivity to miscommunication, jealousy and deceptive actions) or avoidant (Reluctance to commit, emphasis on one's own needs). Attachment style affects the quality of relationships. Lack of experiences with secure attachment can make it difficult for people to build healthy relationships and even lead them to participate in dangerous activities when they are adolescents.

Impulsivity is defined as a lack of behavioural inhibition that causes people to act on impulse. It is another crucial factor related to substance use and can be characterised by quick, impulsive decisions that are made with little thought to the consequences. Impulsivity, according to Eysenck, is characterised by rash decisions and unexpected, risky acts. Barratt separates the three aspects of impulsivity: non-planning, motor, and cognitive. According to Nigg et al., it is the act of responding rashly when considered responses would be preferable.

Research has linked impulsivity—especially when it comes to decision-making—to the prefrontal cortex. Early substance use for recreational purposes may be influenced by impulsive actions. Because they are more receptive to the short-term benefits or satisfaction that substances might provide, people with impulsive tendencies may take substances more frequently. Those who already struggle with impulsivity may turn to substance as a coping mechanism or way out of emotionally challenging situations.

Psychological Distress can further increase the use of substances. According to the Diagnostic and Statistical Manual of Mental Disorders, Fifth Edition (DSM-5), psychological distress is characterised by a wide range of symptoms, including functional impairment, personality features, behavioural problems, and anxiety and depression. Five crucial traits have been identified by a thorough review of the literature regarding psychological distress, which includes the perceived incapacity to cope, emotional status fluctuations, uncomfortable experiences, communicating those experiences, and the possibility of harm.

## **Exploring the Dimensions of Attachment Styles, Impulsivity and Psychological Distress among Substance Users with Different Intervention Needs**

Personal life events can leave lasting psychological scars, resulting in distress symptoms (Hammen et al., 2005). Sudden and unexpected occurrences or continuing stressors such as work-related demands or interpersonal disputes can contribute to prolonged stress. Additionally, continuous psychological distress has been linked to the development of severe health issues, Barry et al (2019).

It is crucial to comprehend the intricate relationships that exist between impulsivity, attachment styles, psychological distress, and substance use in order to create effective preventative and intervention plans. Clinicians and researchers can better assist people in navigating the difficulties related to use of substances and mental health issues by addressing these interrelated aspects.

### **REVIEW OF LITERATURE**

Yang (2023) further emphasised that attachment style is a major significant contributor of substance use. It has been found that secure attachment style is correlated with lesser likelihood of substance use later in life.

Patel et al. (2022) research suggested that there was a strong association between high level of impulsivity and external locus of control with substance use particularly alcohol.

Chang et al. (2021) did a research based on the campus survey for the substance use and psychological distress using The Kessler Psychological Distress Scale (K-10), the Drug Abuse Screening Test (DAST), and the Alcohol Use Disorders Identification Test (AUDIT). A significant association was seen between moderate-to-severe mental distress and high-risk alcohol use, as well as between moderate-to-severe substance use and the same psychological state.

Kumar et al. (2023) found out that the anxiety and depression score were significantly higher for the individual with substance users in comparison to the non-substance users.

Nayyeri et al (2022) conducted a research to explore the relationship between impulsivity and attachment style with the factors of narcissism playing a mediating role which indicated a positive relationship between insecure attachment style, impulsiveness and narcissism.

Koshy and Vimla M. (2023) conducted a research on attachment style, psychological distress and acculturation on Indian students studying internationally. The following scale was used for the research - Adult Attachment Scale, Kessler Psychological Distress Scale-10 and SL-ASIA on a sample size of 73 students. The research indicated that attachment style and psychological distress were significantly correlated along with the fact that the former was a predictor of the later. Acculturation was also strongly associated with the insecure attachment style.

Research conducted by Maccombs-Hunter and Bhat (2022) found out that only impulsivity can be considered as a predictor for problematic use of alcohol whereas psychological distress plays no role in the same. The research was conducted on undergraduate college student aging from 18-25.

Gidhagen et al. (2018) conducted the research to find out the relation between self-assessed attachment style, psychological distress, and substance use among outpatients. Their

## Exploring the Dimensions of Attachment Styles, Impulsivity and Psychological Distress among Substance Users with Different Intervention Needs

findings revealed that individuals requiring intensive treatment had insecure attachment styles in comparison compared to those in non-clinical groups. Moreover, patients characterised by a fearful attachment style displayed high levels of psychological distress as compared to those with a secure attachment style.

Khodarahimi et al. (2021) explored the relationship between impulsivity, self-efficacy and attachment style with help of the following tools - "Attachment Style Measure, Barratt Impulsiveness Scale and General Self -Efficacy Scale". Analysis revealed a substantial positive correlation between attitudes toward substance abuse and avoidance, ambivalent attachment patterns, and impulsiveness. Conversely, beliefs toward substance use were strongly inversely correlated with secure attachment type and self-efficacy.

### **METHODOLOGY**

#### *Objectives*

- To measure attachment styles in substance users with different intervention needs: no intervention, brief intervention and intensive treatment
- To measure impulsivity in substance users with different intervention needs: no intervention, brief intervention and intensive treatment.
- To measure psychological distress in substance users with different intervention needs: no intervention, brief intervention and intensive treatment.

#### *Hypothesis*

- **H<sub>0</sub>1:** There will be no difference in the sub-scales of attachment styles in substance users with different intervention needs: no intervention, brief intervention and intensive treatment.
- **H<sub>0</sub>2:** There will be no difference in impulsivity in substance users with different intervention needs: no intervention, brief intervention and intensive treatment.
- **H<sub>0</sub>3:** There will be no difference in psychological distress in substance users with different intervention needs: no intervention, brief intervention and intensive treatment.

#### *Participants*

In the conducted research, a total of 117 individuals were selected to participate from Delhi and Delhi NCR region. The sampling method employed was purposive sampling, which aimed to target individuals meeting specific criteria. Participants age range was 19 to 35 years along with a history of using substances either occasionally or regularly within the past three months. Additionally, proficiency in English was essential for participation, allowing for effective communication and data collection.

#### *Instruments*

##### **The Alcohol, Smoking and Substance Involvement Screening Test (ASSIST)**

It used as a technical instrument to assist detect early health risks connected with substance use. There are eight major elements and seventy sub-items in the Participation Screening (ASSIST). Each subject's score is categorised into three categories: low, medium, and high risk. WHO assist (2002), found that the test-retest reliability coefficient ranges from 0.90 to 0.58. Additionally, the test-retest reliability ranged from 0.61 for sedatives to 0.78 for opioids.

## Exploring the Dimensions of Attachment Styles, Impulsivity and Psychological Distress among Substance Users with Different Intervention Needs

### Adult Attachment Scale -Close Relationship

It contains 18 items which measure the dimensions of attachment style - secure attachment style, avoidant attachment style and anxious attachment style. “Collins and Read (1990) found Cronbach's alpha values of.69 for Close,.75 for Depend, and.72 for Anxiety. Test-retest correlations over a two-month period were.68 for Close,.71 for Depend, and.52 for Anxiety.”

### Barratt Impulsiveness Scale -11

It is a self-report measure of impulsiveness. Three second-order components (non-planning impulsiveness, motor, and attentional) and six first-order factors (attention, self-control, persistence, cognitive complexity, and cognitive instability) make up this construct. The test- retest reliability was found to be 0.83(Stanford et al., 2009). the internal consistency was found to be 0.82 with the convergent validity to be 0.357.

### Kessler Psychological Distress Scale 10

It is a measure of psychological distress in non-clinical population. It is a 10 items scale with questions about emotional state (negative) - depressive symptoms along with anxiety that were encountered in the past four weeks. The Psychological Distress Scale's overall internal consistency was cronbach alpha =0.844.  $\rho=0.722$  ( $p<0.001$ ) indicated concurrent validity between this measure and the Self Reporting Questionnaire.

### Procedure

A quantitative design was used for the research on the basis of the purpose of the study. The study included three variables - attachment style, psychological distress and impulsivity. Attachment style served as the independent variable, while psychological distress and impulsivity were the dependent variables. Moreover, the research design employed a repeated measure approach, ensuring that each subject underwent administration of all questionnaires. For the research participations, the individuals were first told about the aim and the nature of the study. Secondly, they were also informed about the confidentiality and informed consent was taken from the participants.

## RESULTS

A one-way ANOVA was used to test the following. There was sample size of 39 in each of the category.

*Table 3.1-Attachment Style Sub-scales in substance users with different intervention needs*

Serial No.	Variable (Attachment Style)	F	Significance
1	Close Sub-scale	0.248	0.781
2	Depend Sub-scale	1.230	0.296
3	Anxiety Sub-scale	2.359	0.099

The difference in the sub-scales of attachment styles (close, depend and anxiety) in substance users with different intervention needs: no intervention, brief intervention and intensive treatment. It demonstrated no significant difference in any of the intervention need at 0.05 level for the attachment sub-scale: Close -  $F_{(2,114)} = 0.248$ ,  $p > 0.05$  ; Depend -  $F_{(2,114)} = 1.230$ ,  $p > 0.05$  and Anxiety -  $F_{(2,114)} = 2.359$ ,  $p > 0.05$ . (Refer to Table 3.1)

**Exploring the Dimensions of Attachment Styles, Impulsivity and Psychological Distress among Substance Users with Different Intervention Needs**

**Table 3.2- Impulsivity and it's type in substance users with different intervention needs**

Serial No.	Variable (Impulsivity)	F	Significance
1	Attentional	3.068	0.050
2	Motor	7.301	0.001
3	Nonplanning	4.706	0.011
4	Overall Impulsivity	8.185	<.001

**Table 3.21 - Post Hoc test between Impulsivity and it's type in substance users with different intervention needs**

Variable	(I) groups	(J) groups	Mean Difference (I-J)	Sig.
Attentional	No Intervention	Brief Intervention	-1.026	0.477
		Intensive Intervention	-2.179*	0.039
	Brief Intervention	No Intevention	1.026	0.477
		Intensive Intevention	-1.154	0.392
	Intensive Intervention	No Intevention	2.179*	0.039
		Brief Intervention	1.154	0.392
Motor	No Intevention	Brief Intevention	-0.359	0.933
		Intensive Intevention	-3.513*	0.002
	Brief Intervention	No Intevention	0.359	0.933
		Intensive Intevention	-3.154*	0.006
	Intensive Intervention	No Intevention	3.513*	0.002
		Brief Intervention	3.154*	0.006
Nonplanning	No Intevention	Brief Intervention	-0.846	0.742
		Intensive Intevention	-3.385*	0.011
	Brief Intevention	No Intevention	0.846	0.742
		Intensive Intervention	-2.538	0.074
	Intensive Intervention	No Intevention	3.385*	0.011
		Brief Intervention	2.538	0.074
Total Impulsivity	No Intevention	Brief Intevention	-2.231	0.607
		Intensive Intevention	-9.077*	<.001
	Brief Intervention	No Intevention	2.231	0.607
		Intensive Intervention	-6.846*	0.011
	Intensive Intervention	No Intevention	9.077*	<.001
		Brief Intervention	6.846*	0.011

The difference in the impulsivity of substance users with different intervention needs: no intervention, brief intervention and intensive treatment. It demonstrated a significant difference in the impulsivity of the individuals at 0.05 level with different intervention needs-  $F_{(2,114)} = 8.185, p < 0.001$ . Furthermore, the post hoc test shows that the significant difference exists in the no intervention need group and intensive intervention group (mean difference = 9.077,  $p = < 0.001$ ) along with the intensive intervention group and brief intervention group (mean difference = 6.846,  $p = 0.011$ ). There is no difference for impulsivity in the no intervention group and brief intervention group (mean difference = 2.231,  $p = 0.607$ ). (Refer to Table 3.2 and 3.21)

**Exploring the Dimensions of Attachment Styles, Impulsivity and Psychological Distress among Substance Users with Different Intervention Needs**

**Table 3.3- Psychological Distress in substance users with different intervention needs**

Serial No.	Variable	F	Significance
1	Psychological Distress	14.359	<0.001

**Table 3.31- Post Hoc test between Psychological Distress in substance users with different intervention needs**

Variable	(I) groups	(J) groups	Mean Difference (I-J)	Significance
Psychological Distress	No Intervention	Brief Intervention	-2.641	0.264
		Intensive Intervention	-8.795	<0.001
	Brief Intervention	No Intervention	2.641	0.264
		Intensive Intervention	-6.154*	0.001
	Intensive Intervention	No Intervention	8.795*	<0.001
		Brief Intervention	6.154*	0.001

The difference in the psychological distress of substance users with different intervention needs: no intervention, brief intervention and intensive treatment. It demonstrated a significant difference in the psychological distress of the individuals at 0.05 level with different intervention needs-  $F_{(2,114)} = 14.359, p < 0.001$ . Furthermore, the post hoc test shows that the significant difference exists in the no intervention need group and intensive intervention group (mean difference = 8.795,  $p = < 0.001$ ) along with the intensive intervention group and brief intervention group (mean difference = 6.154,  $p = 0.001$ ). There is no difference for psychological distress in the no intervention group and brief intervention group (mean difference = 2.641,  $p = 0.264$ ). (Refer to Table 3.3 and 3.31)

## **DISCUSSION**

### **Hypothesis 1-**

According to the results, it can be seen that no significant difference exists in the attachment style sub-scale of individual with different intervention need. Thus, for H1, the null hypothesis will be accepted. (Refer to Table 3.1)

Owino et al. (2021) suggested that attachment style can act as a predictor of substance use, while Kassel et al. (2007) found a connection between anxious attachment and increased substance use. However, our study suggests that while attachment styles may influence substance use behaviours, they may not accurately predict the level of intervention, in other words it can also mean that the frequency of usage of substances cannot be predicted just because of the attachment style of the person.

### **Hypothesis 2-**

According to the results, it can be seen that a significant difference exists in the impulsivity of substance users with different intervention need. Thus, for H2 the null hypothesis will be rejected and alternative hypothesis will be accepted i.e. there is a difference in impulsivity in substance users with different intervention needs: no intervention, brief intervention and intensive treatment. (Refer to Table 3.2)

## Exploring the Dimensions of Attachment Styles, Impulsivity and Psychological Distress among Substance Users with Different Intervention Needs

The Barrett Impulsiveness Scale -11 has divided impulsivity into three second order factors and the one way ANOVA for impulsivity has demonstrated that all the three factors are significantly different for the substance users with intervention need: attentional-  $F_{(2,114)} = 3.068$ ,  $p=0.05$ , motor -  $F_{(2,114)} = 7.301$ ,  $p=0.001$ ; non planning -  $F_{(2,114)} = 4.706$ ,  $p=0.011$ .

Interestingly, these findings are consistent with past studies. Shin et al. (2013) investigated numerous aspects of impulsivity connected with substance use. The current study contributes to this body of information by revealing that impulsivity levels fluctuate with intervention requirements, rather than concentrating simply on one element.

### Hypothesis 3-

According to the result, it can be seen that a significant difference exists in the psychological distress of substance users with different intervention need. Thus, for H3 the null hypothesis will be rejected and alternative hypothesis will be accepted i.e. there is a difference in psychological distress in substance users with different intervention needs: no intervention, brief intervention and intensive treatment. (Refer to Table 3.3)

These findings are consistent with previous research, notably the study of Booth et al. (2010), which found that improvements in psychological distress correspond with decreased substance use.

An intriguing finding emerged from the significant differences found in intervention needs across variables H2 (impulsivity) and H3 (psychological distress). While significant overall differences were observed across groups, post-hoc tests revealed a consistent pattern: the most pronounced differences existed between individuals needing no intervention and those requiring intensive treatment as well as with individuals needing brief intervention and those necessitating intensive intervention. A notable absence of significant differences was observed between the no intervention and brief intervention groups.

One possible explanation is that people who have just started using substances may not have experienced major changes in impulsivity, distress, or even their own usage frequency. This lack of knowledge may place them in the "no intervention" category. Substance use issues frequently emerge gradually. Impulsivity and distress may increase gradually over time, reflecting the increased frequency of usage. This might explain why the "brief intervention" group does not exhibit a significant change from the "no intervention" group, but there is a distinct difference between "brief intervention" and "intensive treatment." On the other hand, it is possible that the gradual progression of substances causes individuals to suffer a greater sense of distress and impulsivity as their usage escalates.

DiClemente et al. (2000) put forward a theory (the Transtheoretical Model) that defines stages of behavioural change, including pre contemplation (not considering change) and contemplation (thinking about change). Individuals in the early phases of use of substances may fall into these groups, possibly correlating with the "no intervention" category (Rahim et al.2019).

Longitudinal studies can be used in future study to learn more about the same meaning individuals can be tracked over time to see how impulsivity, distress, and intervention specifications vary as using substances progresses.



## Exploring the Dimensions of Attachment Styles, Impulsivity and Psychological Distress among Substance Users with Different Intervention Needs

### *Limitations*

During the data collecting phase, several participants responded quickly, possibly without completely understanding the questions, as shown by their relatively quick completion times which may have an effect on the responses of the individuals. While the ANOVA findings showed differences between the groups, they did not define the direction of the differences—whether one group had greater or lower levels than the others.

### **CONCLUSIONS**

The study aimed to explore how Attachment Styles, Impulsivity and Psychological Distress differs among Substance Users. The research findings indicated that the null hypothesis was accepted for H1 and alternative hypothesis was accepted for H2 and H3. The research can be used to understand that there is a difference in substance users impulsiveness level and psychological distress with different intervention needs. Further research can be done to understand the attachment styles of substance users. The research canals help in building intervention plans which is tailored according to every individuals need.

### **REFERENCES**

- Ambekar A, Agrawal A, Rao R, Mishra AK, Khandelwal SK, Chadda RK on behalf of the group of investigators for the National Survey on Extent and Pattern of Substance Use in India (2019). Magnitude of Substance Use in India. New Delhi: Ministry of Social Justice and Empowerment, Government of India.
- Attachment Styles as Predictors of Substance Use Among Secondary School Students in Nairobi County, Kenya. (2021, October). *Journal of Education and Practice*. <https://doi.org/10.7176/jep/12-30-11>
- Barry, V., Stout, M. E., Lynch, M. E., Mattis, S., Tran, D. Q., Antun, A., Ribeiro, M. J., Stein, S. F., & Kempton, C. L. (2019, April 11). The effect of psychological distress on health outcomes: A systematic review and meta-analysis of prospective studies. *Journal of Health Psychology*, 25(2), 227–239. <https://doi.org/10.1177/1359105319842931>
- Booth, B. M., Curran, G., Han, X., Wright, P., Frith, S., Leukefeld, C., Falck, R., & Carlson, R. G. (2010, March). Longitudinal Relationship Between Psychological Distress and Multiple Substance Use: Results from a Three-Year Multisite Natural-History Study of Rural Stimulant Users. *Journal of Studies on Alcohol and Drugs*, 71(2), 258–267. <https://doi.org/10.15288/jsad.2010.71.258>
- Borsari, B., & Carey, K. B. (2001, December). Peer influences on college drinking: A review of the research. *Journal of Substance Abuse*, 13(4), 391–424. [https://doi.org/10.1016/s0899-3289\(01\)00098-0](https://doi.org/10.1016/s0899-3289(01)00098-0)
- Chang, W. P., Stuart, H., & Chen, S. P. (2021, March 17). Alcohol Use, Drug Use, and Psychological Distress in University Students: Findings from a Canadian Campus Survey. *International Journal of Mental Health and Addiction*, 20(4), 2366–2381. <https://doi.org/10.1007/s11469-021-00519-w>
- Dowell, D., Haegerich, T. M., & Chou, R. (2016, April 19). CDC Guideline for Prescribing Opioids for Chronic Pain—United States, 2016. *JAMA*, 315(15), 1624. <https://doi.org/10.1001/jama.2016.1464>
- Eysenck S. Development of a measure of impulsivity and its relationship to the super factors of personality. 17th ed. Washington, D.C:American Psychiatric Association; 1993
- Faraj-Pour-Nayyeri S, Ahmadi Z, Bakhshesh-Borojeni M. The mediating role of vulnerable and grandiose narcissism in the relation between attachment styles and impulsivity among university students. 3 2022; 12 (2) :8-19
- Gidhagen, Y., Holmqvist, R., & Philips, B. (2018, February 5). Attachment style among outpatients with substance use disorders in psychological treatment. *Psychology and*

## Exploring the Dimensions of Attachment Styles, Impulsivity and Psychological Distress among Substance Users with Different Intervention Needs

- Psychotherapy: Theory, Research and Practice, 91(4), 490–508. <https://doi.org/10.1111/1/papt.12172>
- Hammen, C. (2005, April 1). Stress and Depression. *Annual Review of Clinical Psychology*, 1(1), 293–319. <https://doi.org/10.1146/annurev.clinpsy.1.102803.143938>
- Kassel, J. D., Wardle, M., & Roberts, J. E. (2007, June). Adult attachment security and college student substance use. *Addictive Behaviours*, 32(6), 1164–1176. <https://doi.org/10.1016/j.addbeh.2006.08.005>
- Khantzian, E. J. (1997, January). The Self-Medication Hypothesis of Substance Use Disorders: A Reconsideration and Recent Applications. *Harvard Review of Psychiatry*, 4(5), 231–244. <https://doi.org/10.3109/10673229709030550>
- Khodarahimi, S., Ghadampour, E., Pourkord, M., Sheikhi, S., & Mazraeh, N. (2021, August 15). The Roles of Attachment Style, Self-Efficacy, and Impulsivity on the Prediction of Attitudes toward Substance Use in Male Adolescents. *Journal of Psychoactive Drugs*, 54(3), 217–223. <https://doi.org/10.1080/02791072.2021.1957185>
- Koshy, J. & Vimala, M. (2023). Acculturation, Adult Attachment Style and Psychological Distress in Indian International Students. *International Journal of Indian Psychology*, 11(3), 1300-1310. DIP:18.01.124.20231103, DOI:10.25215/1103.124
- Kumar, P. C. P., Antony, S., Murthy, P., Thirumoorthy, A., & Philip, M. (2023, August). Relationship of personality, psychological distress, and substance use with social network characteristics of college going young adults. *Indian Journal of Psychiatry*, 65(8), 832–838. [https://doi.org/10.4103/indianjpsychiatry.indianjpsychiatry\\_182\\_23](https://doi.org/10.4103/indianjpsychiatry.indianjpsychiatry_182_23)
- Maccombs-Hunter, S., & Bhat, C. S. (2022, June 24). Exploring psychological distress and impulsivity as predictors of undergraduate problematic alcohol use. *Journal of Addictions & Offender Counseling*, 43(2), 111–124. <https://doi.org/10.1002/jaoc.12111>
- Patel, N., Sharma, H., Mahida, A., & Mistry, H. (2022). Relationship of alcohol use pattern with locus of control and impulsivity: A cross-sectional study in hospitalized alcohol use disorder patients in Western India. *Journal of Family Medicine and Primary Care*, 11(3), 987. [https://doi.org/10.4103/jfmpc.jfmpc\\_1181\\_21](https://doi.org/10.4103/jfmpc.jfmpc_1181_21)
- Yang, J. (2023, May 17). The Role of Attachment Style in Substance Use Disorder. *Lecture Notes in Education Psychology and Public Media*, 6(1), 680–684. <https://doi.org/10.54254/2753-7048/6/20220635>

### **Acknowledgment**

To My Family: I will always be grateful to my family for their constant support, love, and encouragement, which have allowed me to follow my goals and succeed in life. I would like to thank them for everything. To my Mentor: I would want to express my sincere gratitude to Dr. Smriti Sethi, whose advice, and understanding have greatly influenced my development on both a personal and professional level.

### **Conflict of Interest**

The author(s) declared no conflict of interest.

**How to cite this article:** Agarwal, K. & Sethi, S. (2024). Exploring the Dimensions of Attachment Styles, Impulsivity and Psychological Distress among Substance Users with Different Intervention Needs. *International Journal of Indian Psychology*, 12(2), 875-884. DIP:18.01.083.20241202, DOI:10.25215/1202.083