

Article

Relationship Between Attachment and Social Skills in Adulthood Education in the Digital Society

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Abstract: In the midst of the Knowledge Society, where social interactions, contact, and the establishment of relationships—whether face to face or through the use of new technologies—prevail, isolation is detected as a consequence of the global COVID-19 pandemic, due to which both interpersonal relationships and attachment bonds are negatively affected. It is for all this that the need arises in this study to analyze the possible existence of a correlation between both variables. The objective of this work is to analyze the relationship between social skills and the type of attachment in a sample of subjects over 18 years of age. After carrying out the analyses, the existence of a statistically significant relationship was detected between the social skills variable and Attachment Scale 3, corresponding to subjects with good abilities to express feelings and comfort with relationships (secure attachment). It is concluded by stating that subjects who have developed a secure attachment will have more satisfactory social relationships.

Keywords: social skills; attachment; Social Skills Scale; adult attachment questionnaire



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1. Introduction

The Knowledge Society frames us in the context of a globalized world that promotes the importance of innovation, research, and knowledge. For this reason, the need arises to deepen the study of the individual and how he/she develops in this society. After the COVID-19 world pandemic, both interpersonal relationships and attachment bonds have been affected in a very negative way, consequences derived from the social isolation that we have suffered even though we belong to the era of new technologies.

It is for this reason that the need arises to carry out this study, research on the relationship between the type of attachment developed by an individual and its possible relationship with the quality of the social skills that he/she will perform in the future. According to a recent study on parental attachment, self-regulation, and social skills in young adults, it is observed that attachment with parents continues to significantly influence the ability of individuals to socialize and regulate their emotions, although interactions with peers and the environment are also key factors in the development of these skills [1].

1.1. Attachment: Definition and Types of Attachment

Attachment is a relationship through which human beings establish and maintain special relationships with other individuals who are considered better in relation to their

abilities to face the world [2]. This bond is created not only for the purpose of establishing relationships, but is considered essential for human development, the acquisition of competencies, social and emotional skills, and the establishment of positive and affectively meaningful relationships [3]. Although human beings establish numerous relationships of various kinds throughout their lives, attachment is considered to be a relationship of great importance, since it can generate various sensations in the individual who feels it, such as security or isolation and restlessness [4].

Attachment is born in early childhood, and the intensity of the attachment relationship between the infant and his or her primary attachment figure is based mainly on the capacity of the primary attachment figure to respond to the child’s needs, although it will also be influenced by the child’s personal characteristics [5,6]. The quality of this attachment relationship will be determinant in the early development of the person and in the subsequent establishment of other types of relationships (social and personal) throughout life. In fact, attachment theory is not restricted only to the first years of life; its long-term repercussions significantly influence the way in which adults manage their intimate and social attachments [7].

There are several classifications of attachment types, with the models of Bolwby [2] and Bartholomew and Horowitz [8] being the most widely accepted (see Figure 1). Their models are presented as an alternative to dimensional/categorical models [9]. We distinguish three types of attachment: secure, avoidant/preoccupied, ambivalent/fearful, and disorganized/disengaged (see Figure 1). Insecure attachment, which includes both avoidant and anxious attachment, can generate difficulties in interpersonal relationships, promoting dynamics of isolation or dependence that negatively affect the development of social skills [7]. This type of insecure attachment in adulthood has been associated with a reduced capacity to establish satisfactory and stable relationships, both in the intimate and social spheres [7,10]. Furthermore, it has been observed that adults with insecure attachment tend to experience problems in emotional regulation, making it even more difficult to manage satisfactory interpersonal attachments [11].

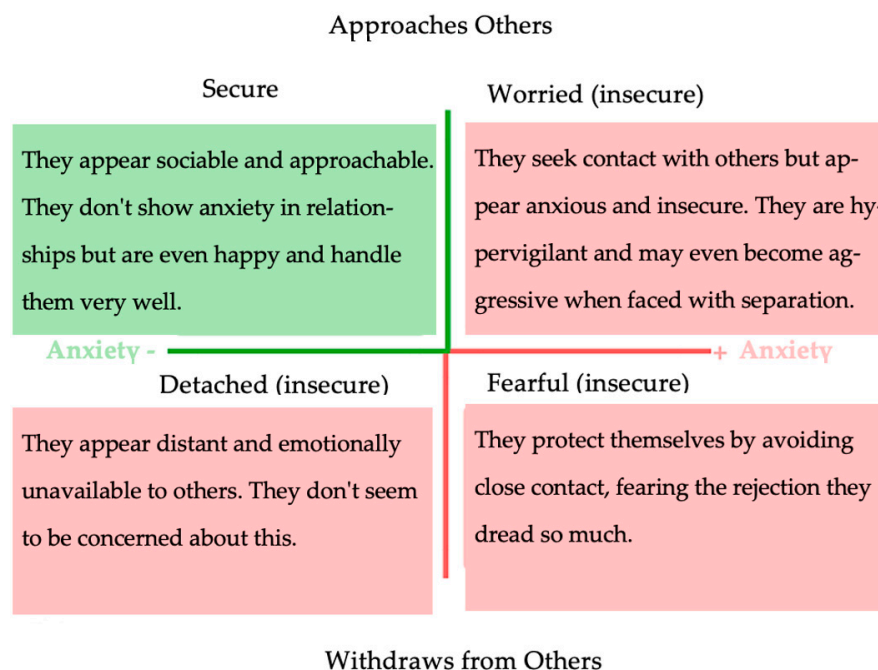


Figure 1. Types of Attachment and Main Characteristics [8].

Therefore, the quality of early attachment impacts not only infancy but also the development of social skills in adulthood, serving as a key determinant of the quality and stability of human relationships within the knowledge society.

1.2. Social Skills: Definition and Classification

According with Caballo [12], social skills are the set of behavioural strategies and techniques that allow us to resolve social situations in a satisfactory and effective manner for the subject and in accordance with the social context in which he/she finds him/herself. Through them, it is possible to express feelings, attitudes, desires, and opinions, as well as to respect and understand the opinions and behaviors of others.

The learning process of these behaviors begins in childhood, the first context in which social behaviors are developed is the primary environment [13], and in adolescence begins the period of learning the most complex social skills, since the contexts faced at this time respond to more critical and elaborated behaviors [14].

Social skills are classified into six different categories [15]:

- Basic social skills: primordial to develop effective communication (initiating a dialogue, listening, maintaining a conversation. . .).
- Advanced social skills: enable the successful establishment of social relationships and membership in different groups (asking for help, participating, giving and following instructions. . .).
- Affective skills: allow us to manage and identify one's own feelings and those of others (expressing feelings, affection, self-reward. . .).
- Alternative skills to aggression or negotiation. They allow us to solve interrelated problems in an adequate way, avoiding or correctly managing the conflict (asking permission, negotiating, avoiding problems. . .).
- Skills to cope with stress: making complaints, defending loved ones, persuasion. . .
- Planning skills: taking initiative, discernment, setting goals, collecting and processing information. . .

1.3. Relationship Between Attachment and Social Skills

Several studies show that those who have managed to develop a secure attachment bond with their primary attachment figure are able to establish healthier relationships with others, manage emotions and stress, overcome anxiety, and show more flexibility in situations of change [16]. This is because children develop their social behavior thanks to the interaction of different biological, cognitive, and emotional factors that allow for competent development [17], and the formation of attachment behavior is highlighted as one of the experiences most closely linked to psychosocial behavior [18,19] that will determine the success in the development of later relationships and the degree of security that the individual will feel before them [20].

The relationship between attachment and the development of social competencies has also been the subject of recent analyses. According to Zayia et al. [21], attachment styles influence a child's ability to adapt to social contexts, highlighting that those with secure attachment tend to be more cooperative and less prone to aggressive or withdrawn behaviors compared to children who develop insecure attachment styles. In this sense, the development of social skills such as cooperation and emotional control is related to the capacity for emotional self-regulation and the recognition of emotions in themselves and others.

In addition, Junge et al. [22] highlight the importance of empathy and social problem solving as key skills that develop in relation to secure attachment. Children who have grown up in a secure attachment environment have a greater ability to understand others'

perspectives and respond appropriately in social situations. In fact, deficits in emotional regulation and empathy have been frequently associated with problems in social competence in those with insecure attachment styles, highlighting the importance of early attachment for the development of social skills across the lifespan.

On the other hand, attachment theory has been shown to be one of the explanatory bases for various emotional and personality disorders, highlighting anger, depression, and anxiety as the most uncontrolled emotions [23] in children who have established insecure attachment relationships. This link also influences the way in which people manage interpersonal relationships in adulthood, with studies showing how people with anxious or avoidant attachment present difficulties in managing their emotions in romantic and social relationships [24].

In turn, it is observed after numerous studies that individuals who established avoidant, ambivalent, or disorganized attachments present a greater correlation with the appearance of social problems [25], behavioral disorders, and antisocial personality [26], so it can be affirmed that the established attachment relationship also determines how the child assimilates roles and social norms, and how he/she develops his/her social, physical, and mental competencies [27]. Along these lines, Duschinsky et al. [28] emphasize that different ways of understanding attachment, especially during adolescence, also affect how individuals internalize social norms and relate to their peers. These differences in the understanding and management of attachment across development highlight its complexity and the profound impact it has on social relationships and psychosocial well-being across the lifespan.

1.4. Objectives and Hypotheses

The objective of this research is (i) to evaluate the level of attachment in subjects over 18 years of age, (ii) to evaluate the level of social skills in subjects over 18 years of age, and (iii) to study the relationship between attachment and social skills in subjects in normal development, over 18 years of age, considering age and gender as sociodemographic variables.

With respect to the hypothesis, we expect to find a statistically significant correlation between attachment and social skills, so that individuals with a higher degree of secure attachment, measured on the scale of expression of feelings and quality in relationships, will in turn have a higher level of social skills.

2. Materials and Methods

2.1. Participants

The sample of subjects meeting the selection criteria for participation in this study is composed of a total of 55 participants, 11 of whom are male (20%) and 44 female (80%), aged over 18 years ($M = 29.73$; $Dst = 9.28$; $Max = 55$; $Min = 19$). The socioeconomic level of the participants was medium, and they had not been diagnosed with any physical, psychological, or neurological disease and had not been prescribed medication. The selection criteria were the following:

- I. Subjects over 18 years of age.
- II. Subjects residing in Spain.
- III. Subjects who speak Spanish.
- IV. Subjects who have not been diagnosed with any physical, psychological, or neurological disease.
- V. Subjects who have not been prescribed medication.

2.2. Instruments

Adult Attachment Questionnaire [29]: test consisting of 40 items grouped into four scales that assess the following:

- Scale 1: need for approval, negative self-concept, dependence, fear of rejection, and behavioral and emotional inhibition.
- Scale 2: anger towards others, resentment, possessiveness, and jealousy.
- Scale 3: emotional expressiveness, comfort with intimacy, sociability, ease in expressing emotions, and trust in others.
- Scale 4: prioritization of autonomy over bonding, avoidance of emotional commitment, and valuing personal independence.

Social Skills Scale [15]: This instrument determines the degree of social competence. It consists of fifty items that make up six groups, which in turn correspond to the six types of social skills: Group I, first social skills, Group II, advanced social skills, Group III, skills related to feelings, Group IV, alternative skills to aggression, Group V, skills for coping with stress, and Group VI, planning skills.

2.3. Procedure

To carry out this research, an online questionnaire was prepared using the Google Form tool in which all the items of the two standardized tests required for our study were transcribed. In addition, an informative text was added that clearly explained the basis of informed consent, including a box for voluntary acceptance of participation in the study, as well as a separate box stating that the text had been read and understood correctly before starting the questionnaire. A web link was obtained and sent to the participants via social networks.

2.4. Statistical Analysis

- Descriptive statistics (mean, standard deviation, minimum, and maximum) of the variable age measured in years was used to make a description of the participant sample.
- Descriptive statistics (mean, standard deviation, minimum, and maximum) of the study variables: attachment measured in scales (Attachment Scale 1: low self-esteem and need for approval and fear of rejection; Attachment Scale 2: hostile conflict resolution, resentment, and possessiveness; Attachment Scale 3: expression of feelings and comfort with relationships; Attachment Scale 4: emotional self-sufficiency and discomfort with intimacy) and social skills.
- Spearman's bivariate correlation was used to study the relationship between attachment variables measured in scales and social skills.
- Linear regression of the social skills variable against Attachment Scale 3 was used to corroborate the correlation between both variables and to know the R^2 value.

3. Results

Objective 1: To evaluate the level of attachment in subjects over 18 years of age.

To carry out a first exploration of the data of the variable attachment, a table (see Table 1) of descriptive statistics is made for the preliminary analysis of this quantitative variable.

The results obtained show the description of the scores obtained, the scales being related as follows: Attachment Scale 1 ($M = 38.15$; $Dst = 9.65$; $Max = 57$; $Min = 15$) corresponds to subjects with low self-esteem and need for approval; Attachment Scale 2 ($M = 37.35$; $Dst = 5.65$; $Max = 51$; $Min = 24$) corresponds to subjects who resort to hostile conflict resolution, rancor, and post-survival; Attachment Scale 3 ($M = 38.38$; $Dst = 5.74$; $Max = 48$; $Min = 25$) corresponds to subjects with good capacities for the expression of feelings and comfort with relationships; Finally, Attachment Scale 4 ($M = 15.49$; $Dst = 4.73$;

Max = 29; Min = 9) corresponds to subjects with emotional self-insufficiency. With respect to the measurement values of the first three scales of the attachment variable, it is observed that they are around normality, with the standard deviations being considered low, which implies that the results obtained are very similar among all the participants. It is also observed that the mean of Scale 4 is lower than the rest, although its standard deviation is still considered low.

Table 1. Descriptive statistics of the attachment variable.

	N	Minimum	Maximum	Mean	Standard Deviation
Attachment Scale 1	55	15	57	38.15	9.650
Attachment Scale 2	55	24	51	37.35	5.651
Attachment Scale 3	55	25	48	38.38	5.743
Attachment Scale 4	55	9	29	15.49	4.737
N	55				

Attachment Scale 1: low self-esteem, need for approval, and fear of rejection. **Attachment Scale 2:** hostile conflict resolution, resentment, and possessiveness. **Attachment Scale 3:** expression of feelings and comfort with relationships. **Attachment Scale 4:** emotional self-sufficiency and discomfort with intimacy. **N:** number of subjects.

Objective 2: To evaluate the level of social skills in subjects over 18 years of age.

To perform a first exploration of the data of the social skills variable, a table (see Table 2) of descriptive statistics is made for the preliminary analysis of this quantitative variable.

Table 2. Descriptive statistics of the social skills variable.

	N	Minimum	Maximum	Mean	Standard Deviation
Social skills	55	122	178	150.13	12.897
N valide	55				

The results obtained show that the mean obtained in social skills is around score 150 (Max = 178; Min = 122), which is framed within the normal value according to the Goldstein Social Skills Scale (78–156). The standard deviation (Dst = 12.9) is considered small with respect to the mean, so it is concluded by stating that all subjects reach similar scores around normality.

Objective 3: To study whether there is a statistically significant relationship between the di-rectal scores of the variables studied (attachment/social skills) in subjects over 18 years of age. After performing a Spearman's bivariate correlation, a statistically significant relationship ($p < 0.05$) was found (see Table 3) between the social skills variable and Attachment Scale 3, which corresponds to subjects with good capacities for the expression of feelings and comfort with relationships. On the other hand, we obtained a correlation coefficient of $r = 0.385$; $r^2 = 0.140$ (see Table 4), so we are faced with a direct (positive) relationship, which means that subjects who develop an attachment on Scale 3 will be those capable of establishing more satisfactory social relationships (see Figure 2).

This figure shows a linear regression analysis between social skills (X-axis) and Attachment Scale 3 (Y-axis). The trend line represents the predictive relationship, where changes in social skills correspond to variations in the scores of Attachment Scale 3.

The results show that Attachment Scale 1 is negatively correlated with social skills ($r = -0.360$, $p = 0.007$, $r = -0.360$, $p = 0.007$, $r = -0.360$, $p = 0.007$), indicating that higher scores on this scale are associated with lower social skills. Similarly, Attachment Scale 4 also shows a negative correlation with social skills ($r = -0.270$, $p = 0.046$, $r = -0.270$, $p = 0.046$, $r = -0.270$, $p = 0.046$). In contrast, Attachment Scale 3 demonstrates a significant positive correlation ($r = 0.385$, $p = 0.004$, $r = 0.385$, $p = 0.004$, $r = 0.385$, $p = 0.004$), suggesting that this scale aligns with better social skill development.

Table 3. Spearman’s bivariate correlation between the variable attachment scales (1–4) and social skills.

	N	Attachment Scale 1	Attachment Scale 2	Attachment Scale 3	Attachment Scale 4	Social Skills
Attachment Scale 1	R	1.000	−0.308	−0.213	0.377	−0.360
	Sig. (bilateral)		0.022	0.119	0.005	0.007
	N	55	55	55	55	55
Attachment Scale 2	R	−0.308	1.000	0.067	−0.087	0.150
	Sig. (bilateral)	0.022		0.625	0.527	0.275
	N	55	55	55	55	55
Attachment Scale 3	R	−0.213	0.067	1.000	−0.233	0.385
	Sig. (bilateral)	0.119	0.625		0.087	0.004
	N	55	55	55	55	55
Attachment Scale 4	R	0.377	−0.087	−0.233	1.000	−0.270
	Sig. (bilateral)	0.005	0.527	0.087		0.046
	N	55	55	55	55	55
Social skills	R	−0.360	0.150	0.385	−0.270	1.000
	Sig. (bilateral)	0.007	0.275	0.004	0.046	
	N	55	55	55	55	55

Table 4. Linear regression for social skills and Attachment Scale 3.

Dependent Variable: Attachment Scale 3							
Equation	R square	Model Summary		Parameter Estimates		Constant	b1
		F	gl1	gl2	Sig.		
Linear	0.140	8.625	1	53	0.005	13.372	0.167

Independent variable: social skills.

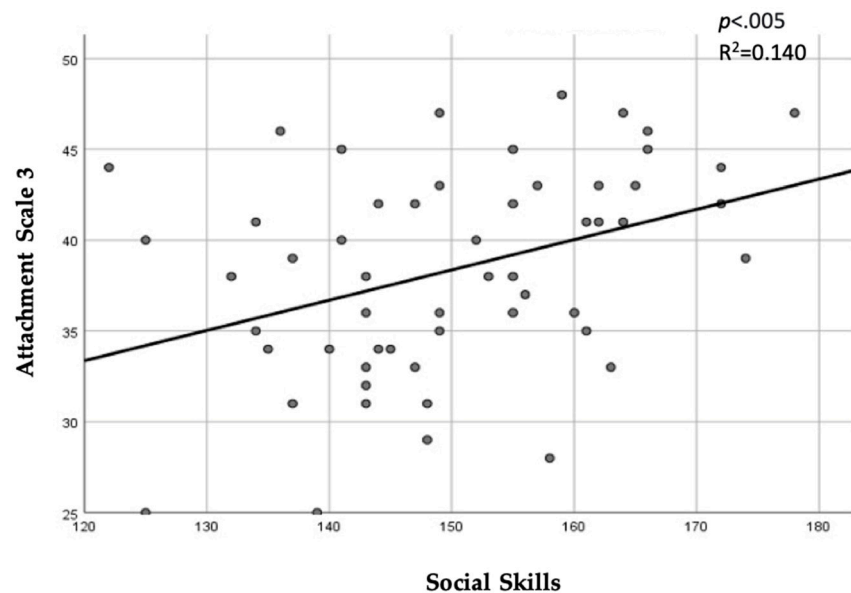


Figure 2. Linear regression for social skills (X-axis) and Attachment Scale 3 (X-axis) and Attachment Scale 3 (Y-axis).

The model explains 14% of the variance in Attachment Scale 3 scores ($R^2 = 0.140$, $R^2 = 0.140$, $R^2 = 0.140$), and the overall model is statistically significant ($F = 8.625$, $p = 0.005$, $F = 8.625$, $p = 0.005$, $F = 8.625$, $p = 0.005$). The parameter estimates show that for every one-unit increase in social skills, Attachment Scale 3 increases by 0.167 units ($b_1 = 0.167$, $b_{-1} = 0.167$, $b_1 = 0.167$). The intercept ($b_0 = 13.372$, $b_{-0} = 13.372$, $b_0 = 13.372$) represents the expected score of Attachment Scale 3 when social skills are zero.

4. Discussion

The aim of this research was to analyze the relationship between attachment and social skills in subjects over 18 years of age. For this purpose, three hypotheses were proposed: (i) there is a normal level of attachment in subjects over 18 years of age, (ii) there is a normal level of social skills in subjects over 18 years of age, and (iii) there is a statistically significant relationship between the variables of social skills and attachment.

Once the results obtained have been analyzed, it can be seen that the hypotheses proposed have been fulfilled, demonstrating that the participating subjects have a normal level of both social skills and attachment. Secondly, after analyzing the possible relationship between social skills and attachment, it is observed that there is a statistically significant relationship between both variables, but not in the way we expected, since this correlation is found between the social skills variable and one of the scales on which the attachment variable has been measured (Scale 3—corresponding to subjects with good capacities for the expression of feelings and comfort with relationships). Therefore, we understand that individuals who have good social skills will find it easier to establish beneficial relationships with other people, and, vice versa, those subjects who have developed a secure attachment style will find it easier to develop social skills [30].

On the other hand, Extremera and Fernández-Berrocal [31] affirm in their studies that those with secure attachment (Attachment Scale 3) are characterized by showing positive emotions and different strategies of emotional management and regulation through which they seek proximity with close individuals. In this way, it is also demonstrated that secure attachment is linked not only to social skills, but also to emotional intelligence, since these authors show that subjects characterized by this type of attachment also present adaptation skills in different situations of daily life, managing to overcome them satisfactorily.

Once this relationship between both variables has been detected, it should be noted that attachment is an independent variable, since it is established in the first years of childhood, when the human being lacks cognitive schemes (social skills), and is developed involuntarily by the subject through contact with attachment figures [6]. However, social skills will develop throughout the human being's life, and due to their interdependence with attachment, the latter will also develop. Therefore, a new question arises during this research: is it possible to train social skills? Bernal [32] answers with a resounding "yes" to this question. Social skills training is carried out through psychological intervention, which is based on prearranged topics designed to improve the patient's interpersonal functioning [33]. Through this practice, it is expected that the patient will learn new skills, and that he or she will be able to put this learning into practice and achieve a better quality of life [32].

Currently, there are multiple social skills training programs and the one to be carried out must be adapted to the individual needs of patients, highlighting the following main objectives [33]:

- (a) Contribute to the integral development of the patient.
- (b) To promote the consolidation of social skills in the patient.
- (c) To provide the patient with tools to cope with situations that require the use of social skills.
- (d) To develop the patient's social competence.

Velasco [34] also explains that in order to achieve greater success in the treatment of social skills with patients, it is crucial to establish the difference between the terms social skills and social competence, with social skills being defined as behaviors needed to interact and relate effectively with other human beings [35], and social competence as a broader, multidimensional concept, where social skills can be understood as part of the social competence construct [36]. On the other hand, Sagone et al. [37] found that

individuals with secure attachment tend to experience higher levels of psychological well-being, while those with avoidant or anxious attachment styles report more difficulties in their relationships and lower levels of general well-being. This reinforces the idea that attachment style influences not only the ability to maintain close relationships but also the development of appropriate social competencies, which can impact both personal and professional environments.

Therefore, we conclude by highlighting the importance of the studied variables as key factors that greatly impact the quality of life of any individual. The establishment of secure attachment relationships with educational figures significantly contributes to the development of social, emotional, and behavioral skills, thereby promoting social inclusion and student well-being [38]. We thus emphasize the urgent need to develop programs that reinforce and develop social skills not only within the family environment but in the first place where a human being will have contact with people outside of their everyday surroundings: the school.

Furthermore, we agree with De Anda Estrada and Carbajal Valenzuela [39], who suggest that prevention, detection, and intervention strategies implemented in early education settings can create the necessary conditions to foster secure attachments at early ages, thereby contributing to optimal development from childhood.

5. Conclusions

The conclusions obtained from the analysis of the results allow us to affirm that subjects who have adequately developed social skills tend to establish more satisfactory attachment relationships. This finding has significant implications not only in the field of interpersonal relationships, but also in the development of competencies in the knowledge society [40]. Social competence, understood as the ability to interact effectively with others, becomes a fundamental skill in a world where collaboration, teamwork, and emotional intelligence are crucial for personal and professional success.

Firstly, it has been found that the subjects present levels of social skills and attachment within normal parameters. These data are relevant, as they suggest that most people, when they have a favorable developmental environment, manage to acquire the necessary competencies to relate effectively and to establish solid emotional bonds. In the context of the knowledge society, these types of competencies are not only key for personal well-being, but also for efficient functioning in collaborative and digital work environments, where interaction skills play a predominant role [41].

In addition, research has identified a significant relationship between the level of social skills and Attachment Scale 3, which assesses subjects' comfort in establishing relationships and intimacy with others. Individuals with a proficient development of social skills show greater ease in establishing deep connections, which is especially relevant in the digital age. The ability to manage interpersonal relationships, both in physical and virtual spaces, is essential in a networked society, where network building and effective communication are key competencies for success.

Finally, the results suggest that the development of competencies in social skills and attachment is closely related to adaptability in changing environments, a fundamental characteristic in the knowledge society. People who have cultivated these competencies are more resilient and able to navigate successfully in a world where relationships, both personal and professional, are being redefined by new technologies and social dynamics. Thus, the development of social competencies not only impacts personal satisfaction but is also a driver for integration and active participation in the knowledge society [42].

While the findings underscore the importance of social skills in fostering strong attachment relationships and their broader implications for functioning in the knowledge

society, several limitations must be acknowledged. First, the study's focus on subjects with social skills and attachment levels within normal parameters limits its generalizability to populations with atypical development or those facing social or emotional challenges. This restricts the applicability of the conclusions to diverse or marginalized groups who may experience different dynamics in developing these competencies. Additionally, the reliance on self-reported data for social skills and attachment scales introduces the potential for response bias, as participants may overestimate or underestimate their abilities due to social desirability or lack of self-awareness. The cross-sectional design of the study also limits its ability to establish causality; while significant relationships were observed, it is unclear whether enhanced social skills lead to better attachment or vice versa, or if a third variable influences both. Furthermore, this study may not fully account for contextual factors such as cultural influences, socioeconomic status, or access to supportive environments, which can significantly shape the development of social and attachment competencies. Finally, while the findings emphasize the relevance of these skills in the digital and collaborative spaces of the knowledge society, this study does not deeply explore how digital interaction and virtual communication might uniquely influence attachment and social skills development, leaving an important area for future research.

Future research should expand on the current findings by addressing several key areas to deepen understanding and improve practical applications. Longitudinal studies are necessary to explore causal relationships between social skills and attachment development over time, allowing for a better understanding of how these competencies interact and evolve across different life stages. Additionally, research should include more diverse populations, focusing on individuals with atypical developmental trajectories, varying socioeconomic backgrounds, and those from different cultural contexts, to ensure the generalizability of the results.

The role of digital environments in shaping attachment and social skills also warrants further investigation, particularly in how virtual communication and social media influence intimacy, trust, and emotional connections. Studies could also explore interventions and educational programs designed to enhance social skills and attachment, evaluating their effectiveness in improving personal and professional outcomes in the knowledge society. Lastly, integrating neuropsychological and physiological measures, such as brain imaging or hormonal assessments, could provide more objective insights into the underlying mechanisms that link social skills and attachment, paving the way for interdisciplinary approaches to fostering these essential competencies.

6. Research Ethics

All subjects gave their informed consent for inclusion before they participated in the study. The study was conducted in accordance with the Declaration of Helsinki.

Author Contributions: Conceptualization, R.M.-P. and A.P.-R.; methodology, A.P.-R.; software, M.d.l.F.B.; validation, R.M.-P., M.d.l.F.B. and M.V.F.S.; formal analysis, A.P.-R.; investigation, M.d.l.F.B.; resources, M.V.F.S.; data curation, R.M.-P.; writing—original draft preparation, R.M.-P.; writing—review and editing, A.P.-R.; visualization, M.d.l.F.B.; supervision, M.V.F.S.; project administration, R.M.-P.; funding acquisition, R.M.-P. All authors have read and agreed to the published version of the manuscript.

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Informed Consent Statement: Informed consent was obtained from all subjects involved in the study.

Data Availability Statement: The original contributions presented in the study are included in the article, further inquiries can be directed to the corresponding author.

Conflicts of Interest: The authors declare no conflicts of interest.

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