



Attachment to Parents and Adjustment in Adolescence

*Literature Review and
Policy Implications*



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Ce document est aussi offert en français sous le titre :
Attachement aux parents et adaptation pendant l'adolescence
analyse bibliographique et l'incidence des politiques

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Government Services Canada, 2000
Cat. N° H39-558/2000E
ISBN 0-662-29516-1

Attachment to Parents and Adjustment in Adolescence

Literature Review and Policy Implications

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**Report to
Childhood and Youth Division
Health Canada
Ottawa, Canada**

(File number 032ss.H5219-9-CYH7/001/SS)

March 31, 2000

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Executive Summary

This paper presents a critical review of the research literature on the relation between attachment to parents during adolescence and psychological and social adjustment. Recommendations for healthy parenting practices, government programming and research are summarized.

Findings

Research Question 1:

Does attachment to parents during adolescence impact psychological and social adjustment?

Secure attachment during adolescence is related to fewer mental health problems, including lower levels of depression, anxiety and feelings of personal inadequacy¹⁻⁵. Securely attached adolescents are less likely to engage in substance abuse, antisocial and aggressive behaviour, and risky sexual activity^{2,6-9}. Securely attached adolescents also manage the transition to high school more successfully, and enjoy more positive relationships with family and peers^{10,11}. They demonstrate less concern about loneliness and social rejection than do insecurely attached adolescents and they display more adaptive coping strategies^{1,12}.

Research Question 2:

What role, if any, do parents play in ensuring secure attachment during adolescence?

Parent-child relationships undergo important transitions during adolescence, including a decrease in time spent with parents and a shift from dependency to mutual reciprocity^{13,14}. Parents play a significant role in supporting secure attachment during these transitions¹⁵. Adolescents benefit from parental support that encourages autonomy development yet ensures continued monitoring and emotional connectedness. Specific parenting skills that promote attachment security and autonomy development include psychological availability, warmth, active listening, behaviour monitoring, limit setting, acceptance of individuality, and negotiation of rules and responsibilities¹⁶⁻¹⁸. Parental support during stressful periods of transition (e.g., entry to high school) predicts positive adolescent adjustment¹¹.

Recommendations

Implications for Effective Parenting

- Parents need to recognize the continued importance of their relationship with their adolescent. They should be careful not to confuse adolescents' development of autonomy with rejection of the parental relationship.
- Parents need to be available to their adolescents, supportive and actively engaged in negotiation of increased autonomy and self-reliance.
- Parents need to anticipate that their adolescent will require increased availability and support during periods of transition, such as entry into high school. Parents should support their adolescent in effective planning and management of this transition.
- Parents need to support adolescents in their exploration of social norms by listening to concerns about social approval and peer pressure, discussing values and reasons for limit setting, and negotiating rules when appropriate. Parents need to monitor involvement in potentially dangerous situations and work with their adolescent to ensure safety.
- Parents must be careful not to disregard adolescents' real emotional difficulties by assuming that these are due to physical or hormonal changes associated with this period.
- Parents need to be careful not to dismiss problems in the adolescent-parent relationship as simply due to age, temperament or other child characteristics. Both they and their adolescent contribute to the quality of the relationship.
- Parents need to recognize the continued importance of their relationship with their adolescent for adjustment, despite their child's increased interest in and time spent with peers. Parents need to be aware of and monitor their adolescent's involvement with various peer groups and their activities at school.
- Parents need to understand that as adolescents move into romantic relationships they can benefit from parents' emotional support and guidance. Parents need to be available to adolescents to discuss their feelings, values and decision making regarding issues of intimacy and sexual involvement in romantic relationships.
- It is advisable that parents of children who have experienced extreme difficulty in early child-parent relationships anticipate the challenges of adolescence and assess the need for mental health support.
- Parents who recognize risk factors in themselves that may place their adolescent at risk for insecure attachment may benefit from counseling or therapy for their own difficulties, and/or to reduce the transmission of risk within the family.

Implications for Government Programming

Government should support the following initiatives in mental health programming:

- Public education initiatives that debunk the myth of adolescent detachment from parents and enhance recognition and understanding of the importance of the parent-child relationship. Strategies to achieve this goal include media advertising campaigns and provision of information brochures through government agencies, public health offices and schools. Provision of funds for appropriate speakers, written and video materials, for junior high and high school parent groups, community centres, libraries, etc. would also be effective.
- Development and evaluation of programs to assist parents in developing effective skills in parenting adolescent children, including skills in providing support and guidance during transition periods. This is most expediently achieved through the development of universal programs that target entry into high school and provide education and support regarding transitions in the parent-child relationships and effective parenting skills.
- Development and evaluation of targeted programs that focus on attachment issues and effective parenting strategies for high-risk adolescents and their families.
- Support of educational training to increase the understanding and awareness of adolescent attachment issues by mental health workers and other professionals involved in service delivery.

Recommendations for Research Initiatives

- Development and validation of self-report, observational and/or interview based measures of attachment for adolescents.
- Research on the determinants of stability and change in attachment from childhood to adolescence, and from adolescence to adulthood.
 - ◆ Investigation of transitions in attachment functions of parents, peers and romantic partners from early adolescence to early adulthood.
 - ◆ Documentation of the emergence of generalized versus differentiated attachment representations from early adolescence to early adulthood.
- Investigation of parenting factors related to shifts from secure to insecure attachment versus from insecure to secure attachment during adolescence.
- Identification of mediators and moderators of the relationship between adolescent attachment and functioning in young adulthood (i.e., poverty, parental psychopathology, peer relationships, school success).
- Development and evaluation of both universal and targeted programs that focus on attachment, family relations and adjustment in adolescence.

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1 Objectives

Secure attachment has been increasingly recognized as central to adaptive functioning over the life span. During the past two decades, researchers have clarified the role of attachment security in promoting psychological well-being during infancy and adulthood. Most recently attention has turned toward understanding the role of attachment with parents to healthy adjustment during adolescence. The objectives of this paper are twofold:

1. To review the literature and provide a qualitative critique of the relation between adolescent-parent attachment and adolescent adjustment; and
2. To develop recommendations regarding healthy parenting practices that enhance the quality of adolescent parent attachment and to identify policy implications for government programs.

II Literature Review

As a preface to addressing the question of the role of attachment security in healthy adolescent adjustment, we begin with a brief discussion of the special challenge of the adolescent period to children and their parents.

1. Context: The Challenge of Adolescence to Youth and their Parents

Adolescence brings new challenges and opportunities for understanding oneself within our social context. Developmental shifts in metacognitive and representational capacity that occur during adolescence (Case, 1985; Chalmers & Lawrence, 1993; Selman, 1980) promote a more highly differentiated and complex view of the self and others (Harter, 1990; Marsh, 1989; Moretti & Higgins, 1990; Moretti & Higgins, 1999). Adolescents form increasingly abstract generalized perceptions of themselves and others based on their consideration of multiple attributes. Most important, they develop metacognitive skills which enable them to simultaneously compare and contrast their own evaluation of these attributes with the evaluations that they believe others hold, such as their parents and their peers. Furthermore, adolescents can speculate about what it would be like to be a different person, to be in a different relationship with parents or peers, and so on. The capacity of adolescents to represent these scenarios provides them with the opportunity to imagine and act out alternative images for the self in relationship to others and to consider the consequences of trying different roles.

Adolescence also introduces a period of significant transition in family and social role expectations, coupled with increases in the range and intimacy of social relationships (Buhrmester & Furman, 1987; Selman, 1980). The cognitive and social transitions of the adolescent period offer opportunities to explore new personal and social roles and to negotiate new and different complex relationships. A key challenge of adolescence is the integration of new, complex and sometimes conflicting information about the self within the social context (Collins, 1990). It is not surprising that this developmental period is characterized by intense self-preoccupation (Elkind, 1967; Elkind, 1985) as adolescents attempt to understand, integrate and solidify their identity and their position in relationships with those around them.

Adolescence is typically divided into three periods: early (ages 13-14), middle (ages 15-18) and late (age 19, adoption of adult roles). During early adolescence, the emergence of autonomy is viewed as an important developmental task (Allen, Hauser, Bell, *et al.* 1994; Collins, 1990). Previous models of adolescence emphasized detachment and disruption as the normative developmental course of parent-child relationships (Blos, 1968). Although adolescence involves a transition from a dependency relationship with parents to mutually reciprocal relationships with others (e.g., parents, peers, and intimate partners), this shift need not require that adolescents detach themselves from parents (Lamborn & Steinberg, 1993; Ryan, Deci, & Grolnick, 1995). Recent models, based on attachment theory, emphasize the importance of attachment or connectedness to parental figures for adjustment during the adolescent years, despite decreases in shared activities and interactions (Bowlby, 1969, 1973, 1980; Larson, Richards, Moneta, *et*

al. 1996). Researchers now argue that secure attachment and emotional connectedness with parents facilitate the transition to increased autonomy (Ryan & Lynch, 1989). For example, Grolnick and Ryan (1989) found that autonomous self-regulation in children was related to parental autonomy support — that is, parental encouragement and support of participation in decision making and independent problem solving. They contend that autonomy is facilitated when parents allow children to move toward independence in self-regulation within a secure and supportive relationship. As Ryan and Lynch (1989) point out, “individuation is not something that happens from parents but rather with them” (p. 341).

Even with parental support, however, the transition to autonomy is a challenge to adolescents and their parents. This developmental task requires that adolescents increasingly differentiate and define who they are, what values they aspire to and the significance of relationships to their identity. As youth move through adolescence, they are more concerned with the views that others hold of them, particularly their peers and romantic partners (Keating, 1990). Intense feelings of connection to romantic partners and close friends emerge and must be balanced with relationships with parents and family members. Adolescents are strongly motivated to gain acceptance from others and may attempt to do so by presenting themselves “falsely”, i.e., as possessing attributes or beliefs that are not their own but are designed to impress others or conceal attributes they feel are not accepted by others (Harter, Marold, Whitesell, *et al.* 1996).

Although difficult and painful at times, the consolidation of identity and clarification of values assist adolescents in regulating their behavior independently of others around them. But this process can pose risks for adolescents and their relationships with those they are close to. As adolescents differentiate their own beliefs and values from those of parents, peers and other social figures, there is an increased likelihood that they will detect conflict between these diverse sources of information (Collins, 1990; Moretti & Higgins, 1999). Conflict between one’s own values and beliefs, and those of parents, peers and other significant social figures, is particularly acute during early to mid-adolescence when the capacity to represent multiple and possibly conflicting views outweighs the cognitive capacity to integrate these divergent perspectives (Harter & Monsour, 1992). During this developmental phase adolescents may be more intensely aware of the divergence rather than the convergence between their beliefs, the beliefs that their parents hold, and the beliefs of peers and important others.

In their attempts to differentiate their own beliefs and values from others, many adolescents experiment with risky behaviours in the areas of delinquency, substance use and abuse, and sex (Adlaf, Ivis, Smart, *et al.* 1995; King, Beazley, Warren, *et al.* 1988; Moffitt, 1993; Moore & Rosenthal, 1993). For some, such risky involvement is limited; however, for others it becomes problematic. Moreover, the stressful process of differentiation and identity consolidation can result in significant psychological distress. Compared to adults, adolescents show higher stress levels and fewer coping resources (Allen & Hiebert, 1991). In addition, depressive symptoms and depression increase substantially from middle to late adolescence (Compas, Orosan, & Grant, 1993), particularly for girls (Nolen-Hoeksema & Girgus, 1994).

It is important to understand that the quality of parent-child relationships within adolescence is linked to the quality of these relationships prior to adolescence, and adjustment during

adolescence is related to childhood adjustment. Similarly, although adolescence marks a period during which the crystallization of identity is the central developmental challenge, self-construction extends from birth across the life span (Erikson, 1963). Nonetheless, the period of adolescence presents unique developmental challenges for adjustment and new opportunities for growth in parent-child relationships. Some adolescents and their parents will experience this developmental period as rewarding and reinforcing to the adjustment of their relationship while others will experience it as stressful and damaging.

2. Attachment Theory

Attachment theory was proposed by John Bowlby (1969, 1973, 1980) to account for infant social and emotional development and adjustment. He conceptualized attachment as a life-span construct, with children maintaining attachment bonds to their parents across childhood and into adulthood. A basic premise of the theory is that the quality of attachment relationships stems from interactions between infants and their caregivers, reflecting the degree to which infants can rely on their caregivers to provide proximity and companionship, safe haven in the face of threat or anxiety, and a secure base from which to explore. The unique pattern of caregiver sensitivity and responsiveness to the infant's needs results in a particular attachment organization in the child (Ainsworth, Blehar, Waters, *et al.* 1978).

Over time, the infant's attachment experiences are consolidated into internal "working models" of self, other and self-in-relation-to-other with respect to attachment. These working models have cognitive, affective and behavioural aspects, through which they affect adjustment. Expectations and attributions about close relationships, (Youngblade, Park, & Belsky, 1993), the ability to regulate emotion (Kobak, Cole, Ferenz-Gillies, *et al.* 1993), and behaviour (Putallaz & Heflin, 1990) are influenced by attachment representations at each developmental phase.

Attachment research in infancy and early childhood has progressed in two waves (Lyons-Ruth, 1996). Early investigations (1970-1985) concentrated on establishing the validity of three basic patterns demonstrated in situations that present a threat to security:

1. **Secure Attachment:** the tendency to appropriately identify and respond to threats of security and to approach caregivers for reassurance;
2. **Anxious-Avoidant Attachment:** the tendency to suppress affect and behaviour related to threats to security, to avoid attachment figures, and to dismiss associated emotions toward caregivers; and
3. **Anxious-Ambivalent Attachment:** the tendency to be vigilant and anxious regarding threats to security and the availability and responsiveness of a caregiver, seeking proximity to the caregiver but failing to derive reassurance from them.

The next phase of research (1985-present) focused on understanding attachment adjustment in high-risk child populations, and further delineation of patterns of attachment organization. In 1990, Main and Solomon introduced the concept of "disorganized attachment" to refer to the lack

or collapse of a consistent pattern of attachment behaviours, typically found in children exposed to maltreatment and other forms of adversity (Lyons-Ruth, Repacholi, McLeod, *et al.* 1991).

At the same time that researchers were making progress delineating these patterns of attachment behaviour, and examining the distribution of attachment patterns in different child populations, investigators were also developing methods for assessing attachment patterns in adults. Main and Goldwyn (1984) introduced the Adult Attachment Interview (AAI), a semi-structured interview that assessed the content and coherence of adults' recollections of their own early attachment experiences. Four attachment patterns were delineated in adult attachment, corresponding to the four attachment patterns defined in children: secure, dismissing (avoidant), preoccupied (ambivalent), and unresolved (disorganized). At the same time, brief self-report measures were developed to identify attachment patterns in adult romantic relationships (Hazan & Shaver, 1987; Simpson, 1990). During the last decade, other researchers have introduced interview and self-report methods to further differentiate attachment patterns in late adolescents' family and peer relationships. This work has focused on differentiating two forms of avoidant attachment: dismissing versus fearful. Dismissing attachment is characterized by the tendency to be disengaged from attachment figures and to devalue the importance of attachment and associated feelings. In contrast, fearful attachment is characterized by the tendency to avoid attachment figures due to fear of rejection coupled with the desire to pursue relationships and express attachment behaviour (Bartholomew & Horowitz, 1991). Some investigators have likened Bartholomew's (1990) fearful category to Main's disorganized/unresolved category (Brennan, Shaver, & Tobey, 1991).

The most recent advances in attachment research have focused on understanding attachment during the transition from childhood to adulthood; that is, during adolescence. Various methods have been employed to assess attachment patterns in late adolescence, including parent-adolescent interaction sequences, adolescent attachment interviews, and self-report measures (e.g., Bartholomew & Horowitz, 1991; Hauser, 1984; Kobak & Sceery 1988). Patterns of attachment similar to those observed in childhood have been identified in late adolescent (e.g., Kobak & Sceery 1988) and young adult samples (e.g., Collins & Read, 1990; Hazan & Shaver, 1987; Main & Goldwyn, 1984).

It is important to note that most extant measures of attachment were originally developed for either young children or adults, and only recently have researchers extended these instruments to examine attachment patterns in adolescents. Researchers are now beginning to contrast and compare these tools and to ask whether they indeed measure what they are intended to measure (Bartholomew & Shaver, 1998; Brennan, Clark, & Shaver, 1998; Stein, Jacobs, Ferguson, *et al.* 1998).

The progress that researchers have made in delineating patterns of attachment has had implications for integrating research findings over time. For example, with the identification of the disorganized attachment pattern in infancy (Main & Solomon, 1990), studies began to report that disorganized rather than avoidant attachment was predictive of behavior problems and noncompliance (Lyons-Ruth, 1996). Thus, in reviewing the literature on attachment and adjustment it is important to keep in mind that findings need to be understood in terms of the

historical progress of researchers in delineating attachment patterns. Further research is also required to solidify our understanding of the range of attachment patterns in the population at each phase of development, and the factors that contribute to the emergence of these patterns and to their stability or transformation over time.

3. Attachment and Adjustment in Childhood

Extensive research links attachment and adjustment in childhood. For example, in normative samples, children who are securely attached to their mothers engage in more prosocial behaviour and are perceived as more socially competent than insecure children (Sroufe, 1983). They demonstrate higher positive affect and lower negative affect in social interactions than do insecure children. Securely attached children are also rated by their teachers as more empathic and more compliant (LaFreniere & Sroufe, 1985).

On the other hand, several sources of research show a link between insecure attachment patterns (avoidant, ambivalent, disorganized) in infancy and noncompliance and aggression in early childhood. Consistent with the theory that insecure attachment is related to poor emotional regulation, longitudinal studies have demonstrated that avoidant attachment in infancy predicts negativity, noncompliance and hyperactivity at 3.5 years of age, and higher ratings of problem behaviour in grades 1 to 3. Compared to secure children, avoidant children are more aggressive and confrontational with their mothers (Main & Weston, 1981), and more aggressive, hostile, and distant with their peers (Erikson, Sroufe, & Egeland, 1985; Sroufe, 1983). Similarly, disorganized attachment in infancy has been shown to predict later aggressive behavior. Several researchers have shown, for example, that children with disorganized attachment patterns in infancy develop controlling and coercive behavior as they move into the preschool and early childhood period (Lyons-Ruth, *et al.* 1991; Wanner, Grossmann, Fremmer-Bombik, *et al.* 1994). Ambivalently attached children, on the other hand, are more adult-oriented and emotionally dependent than securely attached children (Erikson, *et al.* 1985; Renken, Egeland, Marvinney, *et al.* 1989). With peers, ambivalently attached children have been found to be lower in peer status, more withdrawn and more apt to be victimized (Finnegan, Hodges & Perry, 1996; LaFreniere & Sroufe, 1985; Renken, *et al.* 1989).

Insecure attachment patterns are not, however, consistently related to later behaviour problems. A number of researchers (Fagot & Kavanagh, 1990; Goldberg, Perrotta, Minde, *et al.* 1986) do not report that avoidant or disorganized attachment predicts later aggressive behavior. A review of this literature shows that the relationship between insecure attachment and later problem behavior is found more consistently among children in high-risk contexts (e.g., family poverty, low social support, parental psychopathology) than among children in low-risk contexts. For example, Lyons-Ruth, *et al.* (1991) found that infant security was most predictive of later aggressive problems in families where mothers suffered from psychopathology, particularly chronic depression, and mothers engaged in hostile intrusive parenting practices toward the infant. She reports that 56% of low-income children who were classified as disorganized in infancy, and whose mothers suffered from psychopathology at that time, displayed aggressive behavior in kindergarten. In contrast, only 25% of low-income children with one risk factor and

5% of low-income children with neither risk factor (i.e., maternal psychopathology, maternal use of hostile intrusive parenting) showed aggressive behavior in kindergarten.

In summary, there is consensus that insecure attachment is a risk factor for later problems in life, but neither necessary nor sufficient in itself. However, these are generalizations based on small samples, with attachment measures at only one point in time.

4. *Development of Attachment in Adolescence*

There are three basic and related issues to consider with respect to attachment in adolescence: 1) the nature of changes in the child-parent relationship and their influence on the attachment relationship; 2) the adolescent's development of new close relationships (e.g., with peers and romantic partners) and the impact of these new ties on the child-parent relationship; and, 3) the emergence of a differentiated attachment system versus a generalized attachment stance.

There are complex changes in the child-parent relationship during adolescence. Although some studies have shown that self-reported attachment security to both parents decreases with pubertal maturity (Papini, Roggman, & Anderson, 1991), recent investigations indicate that only certain components of the attachment relationship change while others remain stable. For example, the degree to which children seek proximity and rely on the principal attachment figure in times of stress decreases but that attachment figure's perceived availability does not (Lieberman, Doyle, & Markiewicz, 1999). These findings indicate that the maintenance of physical proximity to parents and need for protection in times of threat or stress is less essential for older children due to increased mental and physical capacities (e.g., more sophisticated coping mechanisms), but that the availability of the attachment figure (i.e., the belief that the attachment figure is open to communication and responsive if help is needed) remains important (Bowlby, 1973; Kerns, Klepac, & Cole, 1996). Moreover, although the frequency and intensity of some attachment behaviour is acknowledged to decline with age, the quality of the attachment bond is viewed as relatively stable (Bowlby, 1980). The ability of adolescents to successfully balance their need to attain autonomy with their desire to maintain a sense of relatedness, particularly in the context of adolescent-parent disagreements, may even be considered a stage-specific manifestation of attachment security (Allen, Moore, & Kuperminc, 1997).

With respect to the development of new attachment relationships during adolescence, it is generally accepted that this developmental phase involves a transition from a primary focus on parents as attachment figures to the development of a wider range of attachment relationships (e.g., peers and romantic partners; Fraley & Davis, 1997; Hazan & Zeifman, 1994; Trinke & Bartholomew, 1997). Time with and variety of activities with same-sex friends peaks at Grade 9, and then declines as older adolescents spend more time with a romantic partner (Laursen & Williams, 1997). Children turn to peers more than parents for companionship from age 9 on, and for comfort when upset from age 12-13 (Fraley & Davis, 1997; Hazan & Zeifman, 1994). However, parents, particularly mothers, continue to be sought more than best friends as a base of security well into late adolescence (Fraley & Davis, 1997; Trinke & Bartholomew, 1997). Some

investigators have argued that adolescents generalize from attachment to parents to attachment to best friends and later to romantic partners (Furman & Wehner, 1994), but evidence is lacking.

It is widely accepted that adult long-term romantic relationships are attachment relationships as well as sexual relationships (Hazan & Shaver, 1987; Hazan & Zeifman, 1994). Individuals seek proximity to their romantic partners, desire to rely on them as a safe haven and secure base, feel an emotional tie to them, and mourn their loss (Bowlby, 1979/77 in Trinke & Bartholomew, 1997). However, in early and mid-adolescence, romantic relationships are often quite transitory, and parents, especially mothers, remain the primary providers of security (Hazan & Zeifman, 1994). Though in late adolescence, as in adulthood, romantic relationships become the primary attachment relationship of the individual after two years duration (Fraleay & Davis, 1997; Hazan & Zeifman, 1994), parents remain important, albeit secondary, attachment figures (Trinke & Bartholomew, 1997).

The question of whether adolescence ushers in the emergence of a generalized attachment orientation is debatable. On the one hand, some theorists postulate that a generalized attachment orientation emerges which may complement or displace earlier multiple models of attachment that relate to specific attachment relationships (e.g. to mother and to father; Allen & Land, 1999). These researchers point to studies showing that by adulthood this generalized stance is highly predictive of future behaviour in attachment and caregiving relationships (Steele, Steele, & Fonagy, 1996). Other researchers disagree, however, arguing that the attachment system during adolescence is characterized by differentiation and relationship-specific patterns of behavior. For example, Furman and Wehner (1994) have noted that although an individual's attachment pattern is relatively stable within specific relationships, their attachment style frequently differs across relationships. This evidence suggests that a generalized attachment style is not well established in adolescence. They and others conclude that a working model of attachment is a composite of representations of different attachment relationships, which are organized hierarchically (Trinke & Bartholomew, 1997).

If a generalized attachment style does emerge in adolescence it does not appear to result in markedly greater stability of attachment pattern for adults versus children. Typical estimates of stability of attachment from infancy to early childhood as assessed by the strange situation are 53-96% (Thompson, Lamb, & Estes, 1982; Waters, 1978). In young adulthood, typical short-term stability in self-reported attachment is 70% (Baldwin, Keelan, Fehr, *et al.* 1996; Scharfe & Bartholomew, 1994). Moreover, concordance of 70% has been found between infant strange situation and late adolescent Adult Attachment Interview classification (Waters, Merrick, Albersheim, *et al.* 1995, in Allen & Land, 1999). Though changes in self-reported attachment style in young adults have been less clearly linked to changes in environmental circumstances than in infant studies (Scharfe & Bartholomew, 1994, versus Thompson, *et al.* 1982), in at least one study covering the adolescent years (Waters, *et al.* 1995, in Allen & Land, 1999), adolescents who had experienced major life changes evidenced much lower rates of concordance than those who had not (44% versus 78%).

The nature of specific attachments to parents, their relation to a generalized attachment style, and the implications of these attachments for adjustment in adolescence merit closer examination

and additional research (Cantor & Sanderson, 1998; Trinke & Bartholomew, 1997). More research is necessary to ascertain whether, and at what developmental stage, attachment status becomes a stable property of the individual rather than primarily a reflection of the qualities of the ongoing relationship (Allen & Land, 1999). Results also indicate considerable potential for change in attachment style in adolescence as well as earlier in childhood. However, the variety of measurement instruments utilized in research on the stability of attachment make it difficult to reach firm conclusions about the essential issues of stability, potential for change, and the relation between attachment to parents and adjustment.

5. Attachment and Adjustment in Adolescence

In the past decade, studies have begun to examine the contribution of adolescent-parent attachment to psychological adjustment. The majority of these studies have examined this relationship within late adolescent (junior college, first-year university) samples and relatively few in early and mid-adolescent samples.

With reference to the relation between attachment patterns in adolescence and adjustment, reports to date confirm findings based on studies of young children. That is, secure attachment is typically related to healthier adjustment whereas insecure attachment is linked to various forms of maladjustment.

In normal population studies, late adolescents who are classified as securely attached are rated by their peers as less anxious, less hostile, and more able to successfully regulate their feelings (i.e., more ego resilient) compared to insecurely attached adolescents (Kobak & Sceery, 1988). While problem-solving with their mothers, secure adolescents more successfully modulate their anger, and balance assertiveness with their desire to remain connected to their parent, suggesting greater ability to regulate emotion (Kobak, *et al.* 1993). Secure individuals are also able to acknowledge both positive and negative self-attributes, and have been shown to have a coherent, well organized self-structure (Mikulincer, 1995). Adolescents who report a positive relationship with their parents, and who feel comfortable turning to them for support, have been found to have a greater sense of mastery of their worlds (Paterson, Pryor, & Field, 1995) and to experience less loneliness (Kerns & Stevens, 1996). Similarly, adolescents secure in a romantic relationship reported significantly fewer symptoms of psychological distress and more positive self-concept (Cooper, Shaver, & Collins, 1998). Finally, more positive attachment with parents among 15 year olds is also associated with fewer mental health problems such as anxiety, depression, inattention, and conduct problems (Nada-Raja, McGee, & Stanton, 1992).

Secure attachment also appears to play an important role in developing effective coping abilities. Mikulincer and colleagues (Florian, Mikulincer, & Bucholtz, 1995; Mikulincer, Florian, & Weller, 1993) have found that securely attached young adults seek more emotional and instrumental support from others in times of stress. Adolescents who are more secure with their mothers endorse more constructive coping skills (e.g., problem solving, positive reappraisal, and support seeking; Voss, 1999). Secure attachment also buffers the stressful transition to high school (Papini & Roggman, 1992) and, during their first year of college, securely attached

adolescents see themselves as more socially competent, and report less psychological distress than their peers, even if they are anxious regarding separation (Kenny & Donaldson, 1991).

A good relationship with parents may also protect adolescents from risk. Adolescents who report close, accepting relationships with their mothers report less involvement in delinquent activities (Aseltine, 1995; Smith & Krohn, 1995). Similarly, affect tone, time spent and identification with both parents, and preference for parents over peers, have been negatively associated with teen's subsequent drug use, both directly, and indirectly through adolescent's adoption of conventional attitudes (Brook, Whiteman, & Finch, 1993) and low sensation-seeking (Barnea, Teichman, & Rahav, 1992). These positive relationship qualities are those typical of secure attachment. Indeed, adolescents' secure attachment to mother has been linked to less experimentation with drugs (Voss, 1999) and less frequent substance use (Cooper, *et al.* 1998). Security of attachment is also related to more positive attitudes about safe-sex (Voss, 1999), and for girls, lower rates of risky sexual behaviour, and fewer past pregnancies compared to insecurely attached girls (Cooper, *et al.* 1998).

In terms of specific insecure attachment style, a dismissing style (i.e., poor communication and trust, combined with feelings of alienation and disengagement from the attachment relationship) has been associated with externalizing problem behaviours (e.g., aggression and delinquency, Nada-Raja, *et al.* 1992, Voss, 1999), more experimentation with drugs (Voss, 1999), and riskier attitudes about safe-sex (Voss, 1999). Adolescents and young adults with a dismissing style are rated by their peers as more hostile than individuals in all other attachment groups (Bartholomew & Horowitz, 1991; Kobak & Sceery, 1988). In problem-solving interactions with their mothers, dismissing teenage boys (but not girls) exhibited more dysfunctional anger than did secure adolescents (Kobak, *et al.* 1993). Dismissing girls, on the other hand, deactivated the attachment relationship, such that their mothers dominated the interaction (Kobak, *et al.* 1993). Finally, dismissing young adults report less family support and more loneliness than their peers (Kobak & Sceery, 1988).

Dismissing individuals appear to protect themselves from feelings of rejection by developing a defensive stance and only acknowledging positive self-attributes (Mikulincer, 1995). This defensive stance is also reflected in the use of distancing strategies to cope with stressful situations (Mikulincer, *et al.* 1993; Mikulincer & Orbach, 1995). *Adolescents who are high in dismissing attachment with both mother and father also report using emotion avoidance in response to stress (Voss, 1999).*

Like dismissing adolescents, fearful adolescents are avoidant, but they are distressed by their lack of closeness to others, and suffer from feelings of inadequacy and anxiety (Griffin & Bartholomew, 1994). Fearful attachment with mother has been linked to delinquency and greater experimentation with drugs (Voss, 1999). In addition, both forms of avoidant attachment (dismissing and fearful) with father are associated with teen's reports of using drugs in response to negative emotions and conflict with others (Voss, 1999).

Although research regarding fearful attachment is limited, existing findings suggest that adults with a fearful attachment style are socially inhibited, lack appropriate assertiveness skills, and tend to be exploited by others (Bartholomew & Horowitz, 1991). Adolescents who are higher in fearful attachment with their mother or father are also likely to engage in self-criticism when under stress, which may impede effective coping (Voss, 1999). Furthermore, those teens who are more fearful with their fathers are also likely to withdraw behaviourally in response to stress (Voss, 1999).

Adolescents who have a preoccupied attachment style (i.e., have positive views of others, and negative views of themselves) see themselves as socially incompetent and are rated by their peers as more anxious than all other attachment groups (Kobak & Sceery, 1988). Compared to other adolescents, these teens report more physical symptoms (Kobak & Sceery, 1988). In response to distress, preoccupied university students are likely to turn to others for support (Ognibene & Collins, 1998). Adolescents who are more preoccupied with their mothers may also use emotion avoidance when under stress, perhaps as a way of lessening heightened anxiety associated with a “hyperactivated” attachment system (Voss, 1999). In a three-category system of attachment classification (secure, dismissing, preoccupied), preoccupied adolescents have been found to be the most vulnerable to maladjustment (Cooper, *et al.* 1998). Preoccupied attachment in adults is related to a poorly integrated self-structure, with little differentiation, and difficulty regulating distress (Mikulincer, 1995).

It is important to survey research on both normative and clinical populations in a review of attachment and adjustment in adolescents. First, reviewing both populations provides a picture of the associations between attachment security and adjustment over a wider range of security. Research shows that secure attachment is dominant in non-clinical samples while insecure attachment is dominant in clinical samples (Van-IJzendoorn & Bakermans-Kranenburg, 1996). Second, including both literatures provides a basis for developing recommendations for parenting across a wide range of family contexts and has implications for suggesting mental health initiatives.

Research in high-risk populations confirms findings based on normative samples: high-risk adolescents with insecure attachment patterns are more likely than securely attached adolescents to experience a range of mental health problems (Allen, Hauser, & Borman-Spurrell, 1996), including suicidality (Lessard & Moretti, 1998), drug use (Lessard, 1994), and aggressive and antisocial behavior (Fonagy, *et al.* 1997; Moretti, Holland, & Moore, 1998; Reimer, Overton, Steidl, Rosenstein, *et al.* 1996; Rosenstein & Horowitz, 1996). For example, in a sample of male adolescent in-patients, Rosenstein & Horowitz (1996) found that symptoms of conduct disorder were associated with a dismissing attachment pattern. Attachment style was also examined in relation to personality characteristics. Consistent with attachment theory, dismissing individuals were more antisocial, narcissistic, and paranoid than were preoccupied subjects. Allen, *et al.* (1996) also found that derogation of attachment, characteristic of the dismissing style, was associated with concurrent criminal behaviour and drug use in adulthood for patients who had been hospitalized for psychopathology during adolescence. Preoccupied adolescents, on the other hand, have been found more likely to report anxiety, dysthymia and an interest in others combined with a fear of criticism and/or rebuff (Allen, Moore, Kuperminc, *et al.* 1998; Rosenstein

& Horowitz, 1996). Preoccupation has also been found to be associated with adolescent externalizing behaviours, though only in the presence of the additional demographic risk factors of male gender and low income (Allen, *et al.* 1998).

In a recent study, Moretti and colleagues employed Bartholomew's family attachment interview to differentiate secure, preoccupied, fearful and dismissing attachment styles in adolescents diagnosed with conduct disorder (Moretti, Lessard, Scarfe, *et al.* 1999). The majority of adolescents were classified as predominantly fearful or preoccupied, rather than dismissing; consistent with previous research, very few were classified as secure. Fearful and preoccupied attachment predicted higher levels of internalizing problems; in contrast, secure and dismissing attachment predicted lower levels of psychopathology. The study, in addition to others that have examined dismissing and fearful attachment separately (e.g. Bartholomew & Horowitz, 1991; Voss, 1999), points to the importance of differentiating adolescents who desire connection with others but are vigilant of rejection (i.e., fearful) versus adolescents who are uninterested in close relationships with others (i.e., dismissing). Fearful adolescents are more likely to anticipate rejection in social relationships; such beliefs coupled with their desire for closeness is likely associated with oversensitivity to benign social cues and this may lead to aggressive behaviour.

Although similar patterns of results are present in normative and clinical samples (e.g., Allen & Hauser, 1996), research with younger children (Lyons-Ruth, *et al.* 1991) also shows that the relation between attachment and adjustment is **stronger** among children in high-risk (e.g., poverty, low social support, parental psychopathology) than low-risk contexts. In other words, the relationship between attachment and adjustment appears to be **moderated** by exposure to adversity. This suggests that insecure attachment alone does not differentiate well adjusted from poorly adjusted adolescents. Further research is required to confirm the moderating effects of adversity on the relationship between attachment and adjustment in adolescents. Extrapolating from existing research with young children suggests that adolescents who grow up in conditions of adversity and inadequate access to resources may not suffer from psychopathology if they share secure attachment relationships with their parents. Conversely, adolescents who develop in a supportive and resource rich environment, albeit with less secure attachment, may have poor outcomes at least in some domains.

6. Parenting, Attachment Security and Adjustment in Adolescence

In infancy, caregivers who are sensitive and consistently responsive to their child's needs have been found to foster secure attachments. These children develop perceptions ("internal working models") of themselves as loveable and of others as helpful and available. Conversely, caregivers who are insensitive and rejecting have been found to have avoidant children who view themselves as unworthy, and others as uncaring and undependable. Research has linked avoidant attachment to mothers' suppressed anger, lack of tenderness in touching and holding, and rejection of child-initiated attachment behaviour. Such children tend to suppress their feelings and avoid contact in times of stress, in order to avoid further alienating their caregivers (Main & Weston, 1981; Renken, *et al.* 1989; Shaw & Bell, 1993). Caregivers who are inconsistent, sometimes responsive and sometimes rejecting tend to have children who are preoccupied with

discovering ways of eliciting care and are hypervigilant to sources of distress. Such children experience conflict between the desire to approach the caregiver for support and feelings of anger and anxiety at their unreliability (Bowlby, 1973). They come to view themselves as incapable and unworthy of obtaining support.

In adolescence, empirical studies of parenting style have established that responsive parental involvement, encouragement of psychological autonomy, and demands for age appropriate behaviour combined with limit setting and monitoring (“authoritative” parenting) contribute to good psycho-social, academic and behavioural adjustment (Baumrind, 1971, 1991; Steinberg, Dornbusch, & Brown, 1992; Steinberg, Darling & Fletcher, 1995). Recent findings indicate that, similar to the way in which parental sensitivity and responsiveness contribute to secure attachment in infancy, parental warmth/involvement, psychological autonomy-granting, and behavioural control/monitoring, are associated with security of attachment in late childhood and early adolescence (Karavasilis, Doyle, & Margoese, 1999). Low warmth and low control were particularly significant for dismissing/avoidant attachment, and low psychological autonomy granting for adolescent preoccupied attachment. Thus, in adolescence, it appears that parent behaviours that foster autonomy in the context of parental availability, in addition to parental warmth/responsiveness, become important for secure attachment.

In terms of correlates with adolescent adjustment, parental warmth/involvement and behavioural control are associated with greater social competence, autonomy, positive attitudes towards school and work, academic achievement and self-esteem, and with less depression, school misconduct, delinquency and drug use (Allen & Hauser, 1996; Lamborn, Mounts, *et al.* 1991; Parish & McCluskey, 1992; Steinberg, Lamborn, *et al.* 1992). With respect to protection against depressed mood, adolescent perceptions of parental availability seem to be particularly important (Margoese, Markiewicz, & Doyle, 1999; Margoese, Markiewicz, Doyle, *et al.* 1999). In terms of resistance to substance abuse, the effect of parenting appears to operate through the adolescent developing better self-regulation skills (i.e., self control, behavioural competence, and adaptive coping), and less affiliation with deviant peers (Wills, DuHamel, & Vaccaro, 1995). The negative associations between observations of maternal warmth and teacher and official reports of delinquency are robust, persisting even after controlling for child IQ, age, attachment to delinquent peers, ethnicity, poverty, family size, parental deviance, supervision, and discipline (Sampson & Laub, 1994). On the other hand, hostile punishment and coercive interactions between parents and children combined with poor parental monitoring contribute to conduct problems in preadolescence and antisocial behaviour in adolescence (Conger, Patterson, & Ge, 1995; Dishion, Patterson, Stoolmiller, *et al.* 1991).

Although it is likely that the link between adolescent attachment quality and parent behaviour is bi-directional, the above longitudinal studies, and at least one other showing that parental rejection is a stronger predictor of delinquency than the reverse (Simons, Robertson, & Downs, 1989), support the crucial importance of parenting behaviour for adolescent outcome. Moreover, of particular importance is the recent finding that in high-risk contexts (e.g., neighbourhood poverty, crime and unemployment), parental monitoring may only be effective in reducing adolescent deviance for securely attached adolescents (Allen, Moore, Bell, *et al.* 1998).

7. Attachment, Parental Socialization and Gender

It is important in understanding the relationship between adolescent-parent attachment and adjustment to examine two important moderating effects: gender of child and gender of parent. First, there is some evidence that sex differences emerge in attachment patterns by adolescence and early adulthood. The factors that contribute to these differences are important to investigate. Second, there is evidence that attachment relationships with mothers and fathers may differ in their importance for predicting adjustment.

With respect to gender differences in attachment patterns, in infancy and early childhood, sex differences in attachment quality are neither implied theoretically nor typically found. However, by late adolescence and adulthood, sex differences in patterns of insecure attachment are sometimes found, with more men being dismissing and more women being preoccupied (e.g., Bartholomew & Horowitz, 1991). Gender-specific parental socialization practices may contribute to these gender differences in attachment style. For example, parents monitor the behavior of their daughters more than their sons (see Cross & Madsen, 1997, for a review). Moreover, although parents exert similar levels of control over the behavior of their daughters and sons, recent investigations have shown subtle differences in how this control is exerted. That is, Pomerantz and Ruble (1998) demonstrated that mothers are equally likely to employ control with their daughters and their sons but are more likely to apply control without granting autonomy with their daughters. Furthermore, the use of control without granting autonomy was found to increase the extent to which children accepted responsibility for failure. Such differences in socialization are likely to be associated not only with lesser self-efficacy for autonomous behaviour in girls (Bussey & Bandura, 1999) but with less positive views of the self as reflected in preoccupied and fearful versus dismissing and secure attachment.

Other studies on gender specific socialization have shown that daughters more than sons are encouraged to attend to others' needs, to conform to others' expectations, and to judge their success or failure in terms of acceptance by others. Mothers are more likely to engage their young daughters than sons (age 18 months) in discussions of others' feelings (Parke, 1967), and by 2 years of age girls are more likely to talk about feelings than are boys (Dunn, Bretherton, & Munn, 1987). Parents also encourage their daughters, more than their sons, to attend to others' feelings by using induction techniques that help them understand the impact of their behavior on others (Grusec, Dix, & Mills, 1982; Smetana, 1989). In turn, girls are more likely than boys to anticipate feeling badly if they act aggressively toward others and to express concern about the impact of their aggressive behavior on others (Perry, Perry, & Weiss, 1989).

It is possible that gender-specific parenting increases the risk for anxious/preoccupied attachment in girls and for dismissing attachment in boys; however, research has yet to explore this link. Studies are required to determine whether, and to what extent, parental reliance on gender-specific socialization practices is related to qualitative differences in attachment orientation.

With respect to differences in attachment relationships with mothers and fathers, it is important to understand that most studies of child attachment and adjustment have focused on mother-child rather than father-child relationships. This focus has occurred because the primary caregiver in infancy is typically the mother, and because childhood attachment security is predicted more from infant attachment to mother than from attachment to father (Cassidy, 1988; Main, Kaplan, & Cassidy, 1985). Moreover, infant attachment is predictable primarily from mothers' as opposed to fathers' attachment style (Van-IJzendoorn & De-Wolff, 1997). In late adolescence, as in childhood, mothers remain the principal attachment figure (Hazan & Zeifman, 1994; Trinke & Bartholomew, 1997). Although both boys and girls see their mother's availability as remaining constant across age, adolescent girls perceive their fathers as less available than do younger girls (Lieberman, *et al.* 1999). Consistent with these findings, several studies have demonstrated that there are significant changes in the quality of relationships that girls have with their fathers during adolescence (Hosley & Montemayor, 1997; Paterson, Pryor, *et al.* 1995; Youniss & Smollar, 1985). For example, with the transition to adolescence, girls report feeling more distant, uncomfortable and withdrawn from their fathers, and feel that their fathers do not meet their emotional needs (Youniss & Smollar, 1985).

Attachment to father has sometimes been found to have significant, albeit different, associations to adjustment (i.e., peer competence) than does attachment to mother (Kerns & Stevens, 1996; Kerns & Barth, 1995; Suess, Grossmann, & Sroufe, 1992; Youngblade & Belsky, 1992; Youngblade, *et al.* 1993). It appears that fathers' warmth and involvement play a unique role in intellectual development (Radin, 1981) and academic achievement (Wagner & Phillips, 1992), and is associated with higher self-esteem in middle childhood (Amato, 1986). Moreover, it is possible that stronger relations between child-father attachment and adjustment might emerge in adolescence. That is, in a longitudinal study of north German children, coping styles at age 16 were related to several measures of quality of early childhood attachment to father but not to mother (Grossmann, Grossmann, & Zimmermann, 1999). Moreover, adolescents' ratings of their father's negative affect but not their mother's was associated with the adolescents' ratings of the quality of their relationship with their parent (Flannery, Montemayor, & Eberly, 1994). Finally, with respect to depressive symptoms in mid-adolescence, perceptions of self as unworthy of father's love was of particular importance (Margolese, *et al.* 1999a & b).

It is important to clarify the changing nature of girls' compared to boys' attachment to their fathers during adolescence, the relation of these differences to differential parental socialization, and implications for adjustment.

Again, further research is required to fully understand the differential role of attachment relationships with mothers versus fathers across development.

8. Cultural and Social Context

Given the diversity of cultures contributing to Canadian society, it is important to assess the degree to which the findings reviewed above apply across Canadian families with diverse ethnic backgrounds. Parenting practices have been found to vary with cultural norms and socialization values (Ellis & Petersen, 1992). For example, parents in China use more behavioural control with their children and grant less psychological autonomy than parents of European background in the USA (Lin & Fu, 1990). The distribution of insecure attachment styles among infants also varies between countries differing in emphasis on individualism versus interdependence (Sagi, Van-IJzendoorn, & Koren-Karie, 1991). For example, more infants in Germany are classified as avoidant and more in Japan as ambivalent. In a sample of 400 Montreal children and adolescents, Arab parents were warmer and more involved with their children, and French-Canadian parents granted more psychological autonomy; West-Indian parents did less of both (Karavasilis, Dayan, Doyle, *et al.* 1999). However, cross-cultural differences are usually less pronounced than intracultural differences (Sagi, *et al.* 1991). Moreover, despite cultural differences in parenting style or child attachment, the relation between parenting style and child adjustment typically remains the same (Feldman & Rosenthal, 1991). That is, children who perceive their parents as warm, involved, appropriately demanding and permitting of psychological autonomy are typically found to have higher self-esteem, greater self-reliance, and less depression and delinquency, irrespective of ethnicity or cultural orientation (Karavasilis, *et al.* 1999; Steinberg, *et al.* 1995). The one area of exception is academic performance, where European- and Hispanic-American adolescents benefited from this authoritative parenting style whereas African- and Asian-American adolescents did not (Steinberg, *et al.* 1995).

It is also important to assess the generality of the above findings across different family structures, e.g. both single-earner and dual-earner. Most of the studies of the effects of maternal employment on parenting and attachment have focussed on infants and young children. These studies indicate that it is not the mother's employment *per se* which affects child attachment security, but rather her sensitivity and responsiveness to her child, investment in parenting and participation in shared activities (Hoffman, 1989; Moorehouse, 1991). Early adolescents with employed mothers spend no less time with family, parents, friends, in class or alone, but do spend more time alone with fathers (Richards & Duckett, 1994). Moreover, adolescents with single or employed mothers do not have more contentious or distant relationships with them than their peers in "traditional" families (Laursen, 1995). However, more research is necessary to determine how maternal employment and single parenthood interact with other factors, such as poverty, low social support, and life stress, to influence parental availability and adolescent-parent attachment.

III Implications for parenting

In the following section of the report we address implications of research on attachment for recommendations regarding parenting. It is important to recognize that adjustment cannot be predicted by attachment alone. A multitude of factors, including attachment, interacts in complex ways to predict adjustment. Thus, the implications that we discuss must be considered in the context of research on other factors that influence child and adolescent adjustment.

1. Adolescence: Detachment or Autonomy?

What Parents Need to Know

A common misperception in society is that adolescence is a time of moving toward *detachment* from parents. This is reinforced by several factors:

- The amount of time that adolescents spend with their families decreases dramatically. Research shows that the amount of time spent with family drops from 35% to 14% of waking hours between late childhood and mid-adolescence (Larson, *et al.* 1996). Parents often attribute this shift in the behaviour of their adolescents to increasing detachment or rejection of the family.
- The view that adolescents detach from parents has been propagated by dated theories of adolescence that dominated the past several decades. These theories proposed that the pubertal and social role challenges of adolescence necessitated a gradual increase in emotional distance from parents.
- Past theories confused the concepts of detachment and *autonomy*. “To be autonomous is to be self-initiating and self-regulating” (Ryan, *et al.* 1995). Autonomy with parents is the sense that an adolescent has the freedom to express beliefs and desires, the option to negotiate with parents and other authority figures, and the opportunity to assume reasonable control over important decisions in his or her life. In contrast, detachment necessarily requires disengagement from parents, both emotionally and physically, coupled with negative feelings regarding the significance of the child-parent relationship and the value of parents as a source of guidance and emotional comfort (Steinberg & Silverberg, 1986). Adolescents who experience separation from parents as a movement to greater autonomy and self-governance, coupled with continued connection with parents, experience the transition to adulthood more positively than do adolescents who experience separation from parents as emotional detachment (Moore, 1987).

It is now clear that parent-child relationships undergo transformation during adolescence, but that most adolescents remain emotionally and psychologically connected with their parents. Educational efforts to dispel the myth of adolescent detachment can be beneficial for parents.

What Parents Need to Do

Parents need to recognize the continued importance of their relationship with their adolescents, despite the changes that occur in the nature of their interactions. Parents need to be careful not to mistake the need for autonomy with rejection of the parental relationship and they need to work with their adolescent to balance continued connectedness with growing autonomy.

2. *How Can Parents Contribute to Healthy Adolescent Development?*

What Parents Need to Know

If adolescents don't need parents to be physically present and protective in the same way as younger children, what do they need?

- Although time with family decreases during this period, adolescents continue to spend as much time alone with their mothers and fathers as they did in late childhood and they spend more time discussing interpersonal issues.
- Adolescents need to feel that their parents are accessible and supportive of them. Adolescents who feel confident in the availability of their parents' emotional support develop more effective coping skills.
- Adolescents particularly benefit from parental support in the development of their autonomy. Parental autonomy support (e.g., supporting their adolescent in expressing and discussing reasons for disagreements; attending to their adolescent's statements; validation of their adolescent's position and feelings) during mid-adolescence (age 14) has been shown to predict secure attachment and healthy adjustment in early adulthood (Allen & Hauser, 1996). Adolescents whose parents gradually permit more involvement in decision-making over the adolescent years are less likely to respond to pressure from peers to engage in delinquent activities (Fuligni & Eccles, 1993).
- In adolescence, parental sensitivity is expressed in terms of being psychologically available to the child while fostering autonomy. Specific parenting skills include warmth, acceptance of individuality, active listening, behaviour monitoring, limit setting, and negotiation. Adolescents require the engagement of parents in discussions about interpersonal relationships, values and goals. Adolescents also need parents to be willing to renegotiate rules and responsibilities. Neglect, hostility, over-control and intrusiveness are to be avoided throughout.

Assisting parents in the development of parenting skills that support autonomy and connectedness with their adolescent can be beneficial in supporting attachment security through this developmental period.

What Parents Need to Do

Parents need to be available to their adolescents, supportive and actively engaged in negotiation of increased autonomy and self-reliance. They need to support their adolescent's expression of feelings, beliefs and goals. This can be difficult as the clash between parental values and adolescent values can give rise to conflict and emotional distress. Understanding that conflict can be an opportunity for development of autonomy, interpersonal problem solving, and growth in the adolescent-parent relationship can help in avoiding power struggles, conflict escalation and feelings of rejection. Parents need to continue to state their concerns and limits but with an openness to discussion and negotiation.

For example, a parent whose adolescent was considering taking on a first job at a late-night cafe downtown rather far from home may reasonably be concerned about safety in travelling home, time away from schoolwork, and ability to be on time for school. Rather than stating that the adolescent is not permitted to take the job, the parent would be wise to first listen to the adolescent discuss their interest in the job, perhaps inquiring just "what are your thoughts about it?" This grants the adolescent the opportunity to take the lead in stating his or her own wishes and concerns regarding the job. If the adolescent raised concerns, the parent might be supportive of the goal of having a part-time job and inquire about the possibilities of other alternatives with fewer drawbacks. If the adolescent assumed the parent would chauffeur to and from work, or agree to any hours of work, the parent should state their limits, reasons for these, be willing to discuss their reasonableness, listen to the adolescent's views and be open to the possibility of negotiating change. Parental involvement could be expressed by, for example, continued availability to talk through issues and concerns, providing temporary assistance with transportation, expressing interest in visiting the cafe as a customer if the adolescent wished.

3. *Are There Times When Secure Attachment is Particularly Beneficial for Adolescents?*

What Parents Need to Know

Secure attachment is important in providing a safe haven during times of stress and in promoting exploration during times of growth. Adolescents typically undergo several significant transitions that are associated with increased feelings of stress and anxiety. Parental support during these periods can be particularly beneficial in fostering the secure attachment and promoting healthy adjustment.

- **School Transitions:** Transition to high school is frequently associated with increased vulnerability to low self-esteem and feelings of incompetence, combined with greater risk for depression and antisocial behaviour. Evidence shows that secure attachment buffers adolescents from the stress associated with such transitions (Papini & Roggman, 1992).

- **Exploration of Social Rules and Norms:** Engagement in some types of delinquent activity is normative during adolescence (e.g., Shedler and Block, 1990) and may be related to adolescent exploration of social rules and norms. Social pressures on adolescents to conform to peer group expectations also contribute to engagement in delinquent activity. Adolescents benefit from parental accessibility for emotional support, structure, and monitoring regarding their engagement in such behavior and their association with peers who support this behavior. In fact, for adolescents from high-risk contexts, parental structure and monitoring is less effective in the absence of a secure adolescent-parent attachment relationship (Allen, Moore, Kuperminc, *et al.* 1998). Involving adolescents in discussions about values associated with behavior, providing clear structure and promoting autonomy in good decision making, are also productive parenting behaviors during this period.

Helping parents identify particular periods of stress for their adolescents where parental accessibility and support are critical can contribute to effective parenting strategies.

What Parents Need to Do

Parents should anticipate that their adolescent will need increased availability and emotional support during periods of transition, such as entry into high school. Before the transition occurs parents need to be available to their adolescent to discuss the changes that entry to high school may bring, how they may feel about it, what they can do if they feel stressed, what resources are available to them and so on. Parents need to engage in such discussions in a matter-of-fact manner, neither minimizing the concerns of their adolescent nor creating unnecessary worry. Parents may find teachers and other parents a useful resource in supporting the transition to high school. For example, such transitions are easier when a peer group makes the transition together, and when new friendships are established. Parents can facilitate their adolescent's social integration in the new setting by discussing and cooperating with other parents and teachers, (e.g. on providing transportation to school events and outings, setting normative rules such as curfew, and providing appropriate supervision for social activities such as house parties).

Parents need to support adolescents in their exploration of social norms by listening to their adolescent's concerns about social approval and peer pressure, discussing values associated with various behaviors, discussing reasons for limit setting, and negotiating rules when appropriate. If parents perceive their adolescent as moving beyond their competence in exploration of social norms they need to express their concerns and work with their adolescent to ensure safety.

4. *Hormones: How Important Are They?*

What Parents Need to Know

In the past it was commonly assumed that hormonal changes during adolescence invariably create turmoil, disruption and disengagement from family. Research showing that most adolescents do not experience profound distress or disruption during this period, and feel positively about themselves and their families, has dispelled this myth (Arnett, 1999). Although some researchers have argued that puberty stimulates distancing between offspring and their parents, as a biological mechanism to discourage endogenous mating (Steinberg, 1990), research has failed to show conclusive evidence of this effect. In one study, onset of puberty in boys was related to reduced amount of time spent with family during early adolescence, however, this effect did not emerge for girls (Larson, *et al.* 1996). Moreover, other factors, such as opportunities to socialize with peers, were found to be more important mediators of boys' reduced time with family.

Dispelling myths of adolescent turmoil and disengagement due to hormonal changes can help parents better identify and recognize the real challenges that confront their adolescent.

What Parents Need to Do

Parents need to recognize when their adolescent is distressed. They must be careful not to disregard real emotional difficulties and mistakenly assume that these are due to physical changes associated with adolescence.

5. *Peer Relationships and Peers versus Parents as Sources of Influence on Adolescents*

What Parents Need to Know

Adolescents spend increasing amounts of time with peers as they get older, surpassing time with parents by Grade 12 (17 years) (Clark-Lempers, Lempers, & Ho, 1991; Larson & Richards, 1991), and relying on their peers more than their parents for intimacy and support (Furman & Buhrmester, 1992; Laursen & Williams, 1997). Close friendships are more long lasting and valued by young adolescents than by young children (Sullivan, 1953). Young adolescents often feel great pressure from their peers to conform in many aspects of dress, activities, likes and dislikes (Feldman & Elliott, 1990). As a result, parents may feel ineffective and unimportant in guiding and supporting their adolescents. Parents may also feel that the adolescent's friend is replacing the parent as a primary attachment figure, i.e. being sought out in times of stress, being missed when separated. They may fear that their adolescent is being influenced by "bad" friends to follow undesirable directions in their goals and behaviours. Although friends influence adolescents, adolescents also play a role in the selection of peers. A primary process governing

adolescents' selection of friends is the tendency of an adolescent to associate with peers whom are perceived as similar to themselves (homophily; Fletcher, Darling, Steinberg, *et al.* 1995).

- It is important for parents to understand that despite the increasing importance of peer relationships, parents continue to be a strong influence in their adolescents' lives (Laursen & Williams, 1997). Intimacy with parents, parental support, and guidance are significant determinants of adolescent adjustment. Close friendships fulfill primarily affiliative rather than attachment needs. The adolescent's growing investment in close friendships and peer activities is more fruitfully viewed as the adolescent using the parental attachment relationship as a secure base from which to explore the social world of peer relations.
- In general, adolescents are less influenced by peers and more influenced by their parents in fundamental values such as academic goals, religious beliefs and morality (Laursen & Williams, 1997). Indeed, as noted earlier, by supporting the appropriate development of autonomy, parents protect their adolescents from undue peer influence. That is, adolescents whose parents increasingly include their adolescents in decision-making are less likely to succumb to peer influence to engage in antisocial activities (Fuligni & Eccles, 1993). Moreover, as noted earlier, parents who monitor their adolescents' activities and companions protect their adolescents from involvement with delinquent peers, itself a risk factor for delinquent activities such as use of illegal drugs (Dishion, Patterson, & Kavanagh, 1992). The need for conformity to peers in dress and activities, that is experienced so strongly by younger adolescents (Feldman & Elliott, 1990), decreases with age and is best viewed as an indication of their fragile sense of autonomy and need for tangible evidence of similarity, acceptance and belonging.
- It is important for parents to understand the meaning of monitoring (firm control) in the context of warmth and with the aim of promoting autonomy. It is also important that they understand the distinction between availability and intrusiveness, as defined earlier.
- Parent involvement and communication with the adolescent's school is also associated with academic competence. That is, parents who are involved in school activities are more knowledgeable and available to their adolescent, both in good times to support their autonomy, and in stressful times to provide security and protection.

Providing parents with an understanding of the role of peers versus parents as sources of support and guidance during adolescence is a useful strategy to improve parent effectiveness.

What Parents Need to Do

Parents need to recognize the continued importance of their engagement with their adolescent for adjustment, despite increased interest and time spent with peers. They need to listen to their adolescent's concerns regarding peer pressure, good choices in peer relationships and feelings of social acceptance. Parents need to be aware of their adolescent's involvement with various peer groups and their activities at school. They need to be appropriate and respectful in how they monitor these issues. As previously noted, if parents find that their adolescent is

involved in peer situations that are harmful and beyond their competence in terms of judgement and influence, they need to act in ways to protect their child from these situations.

6. Romantic Relationships

What Parents Need to Know

The nature and significance of a romantic relationship earlier in adolescence is unclear and the subject of considerable research. Fundamental questions in the research are: 1) to what extent do romantic relationships fulfill attachment functions during the adolescent period; 2) how are romantic relationships related to shifts in adolescent-parent attachment; and 3) what are the implications of romantic relationships for adjustment.

- Developmentally, romantic relationships in early adolescence are typically brief, and often entail little intimate knowledge of the partner and much fantasy. At least for early adolescence, they are best conceptualized as exploration of the social world rather than as attachment relationships *per se*.
- This view of romantic relationships does not deny that they are important and emotionally powerful experiences for adolescents. Though romantic relationships may be especially important for older adolescents because of the gradual transfer of attachment functions, younger adolescents may experience romantic relationships as emotionally powerful because of their less mature ability to deal with emotional events. Parental availability and support as a secure base and safe haven through these events is important. Adolescents with a secure attachment to their parents are better equipped to cope adaptively in this new realm. For example, by mid-adolescence, securely attached adolescents have been found to engage in sexual intercourse later, and securely attached young adults have fewer sexual partners and are less likely to engage in risky sexual relationships than their insecurely attached peers (Cooper, *et al.* 1998).

Providing parents with information regarding the significance of romantic relationships during late versus early adolescence, and the continued need for parental availability as a secure base for adolescents, will assist them in responding appropriately to these new relationships.

What Parents Need to Do

Parents need to understand that their adolescent can benefit from their emotional support and guidance as they move into romantic relationships. They need to be careful not to mistakenly interpret involvement in romantic relationships as displacing the importance of the parental relationship. Parents need to be available to adolescents to discuss their feelings, values and decision making regarding issues of intimacy and sexual involvement in romantic relationships.

7. *Are Some Adolescents More at Risk for Attachment Problems During Adolescence?*

What Parents Need to Know

Some adolescents are vulnerable to insecure attachment patterns due to very difficult early socialization experiences. For example, children who have been exposed to maltreatment, such as physical or sexual abuse, neglect or exposure to family violence, are at substantial risk for insecure attachment (Cicchetti & Barnett, 1991; Morton & Browne, 1998). When these children reach adolescence, insecure patterns of attachment and other affect regulation problems may make this developmental period particularly challenging for them and their primary caregivers. Relationships with caregivers may be threatened and risk of psychopathology may increase substantially. It is particularly important that the needs of these adolescents are anticipated prior to the emergence of difficulties and that special programs are accessible to these families. Preventative measures, initiated before the onset of adolescence, may well prove to be cost-effective in the long run.

What Parents Need to Do

It is advisable that parents of children who have experienced extreme difficulty in early child-parent relationships anticipate the challenges of adolescence and assess the need for mental health support. When children have experienced disruption in their relationships with caregivers, resulting in extended separation or loss, adolescence may rekindle emotional issues related to early experiences. This will depend on the quality of past and current relationships and the amount of support that adolescents have experienced in integrating these different caregiving relationships. Parents need to support their adolescent in working through the meaning of their relationships with various caregivers and to assist them in balancing their connection and autonomy within these relationships. They need to strive to understand this process and not to mistakenly interpret this as rejection of the parental relationship. In some cases this may require the support of family and/or individual therapists.

8. *How Does Parental Psychopathology and Parent Attachment Style Relate to Adolescent Attachment?*

What Parents Need to Know

Research shows higher rates of insecure attachment in children of parents who suffer from various disorders, including depression (Lyons-Ruth, *et al.* 1991) and alcoholism (Brennan, *et al.* 1991). Similarly, children of parents who themselves experienced insecure attachment in their relationships with their own parents are more likely to be insecurely attached than are children of parents who enjoyed a secure relationship with their own parents (Van-Ijzendoorn & Bakermans-Kranenburg, 1996). For example, Benoit and Parker (1994) found that mothers' attachment style

predicted infant attachment in 81% of cases, and that grandmothers' attachment style predicted infant attachment in 75% of cases. Although research has yet to examine intergenerational transmission in attachment during the adolescent period, it is likely that insecure attachment in parents will be associated with increased rates of insecure attachment in adolescents, perhaps somewhat less profoundly than in infancy.

What Parents Need to Do

Parents who recognize risk factors in themselves that may place their adolescent at risk for insecure attachment may benefit from counseling or therapy for their own difficulties, and/or to reduce the transmission of risk within the family.

9. To What Extent do Child Characteristics versus Parenting Characteristics Account for Attachment Security?

What Parents Need to Know

Unfortunately research on attachment patterns in the adolescent period is insufficient to provide an answer to this question; however, studies from other developmental phases are informative. Although both parent and child contribute to their relationship over time (Lollis & Kuczynski, 1997), evidence with younger children points to the significance of parents in shaping attachment patterns in their children. For example, if attachment style were inherent to the child, one would expect to see similar types of attachment across both parents. Yet, it is well established that the quality of a child's attachment to one parent is not strongly associated with the quality of his or her attachment to the other parent (Lyons-Ruth, 1996). In addition, although temperament predicts the amount of distress a child expresses upon separation with mothers, it does not predict specific attachment patterns (Belsky & Rovine, 1987; Vaughn, Lefever, Seifer, *et al.* 1989). Perhaps most convincing, however, is the fact that child attachment can be predicted by mothers' own attachment pattern prior to the birth of the child (Fonagy, Steele, & Steele, 1991).

- Clearly more research is required to understand the role of factors endogenous to adolescents versus parental socialization that account for attachment during this particular period of development. The research we reviewed in this document, coupled with studies of infancy and childhood, point to the powerful and important role of parents in shaping adolescent attachment.

What Parents Need to Do

Although both children and their parents actively contribute to their relationship over time, parents who recognize the importance of their role in shaping their adolescent's attachment orientation, and who feel confident and supported in meeting their adolescents' needs, will most likely contribute to healthy development. Parents need to be careful not to dismiss problems in the adolescent-parent relationship as simply due to temperament or other child characteristics. They

need to recognize that both they and their adolescent contribute to patterns of interaction and behaviour.

10. Stability of Attachment During Adolescence

What Parents Need to Know

There is substantial opportunity for change in attachment patterns during adolescence. For example, research has shown that approximately 30% of young adults change in their attachment orientation over a short time (Baldwin, *et al.* 1996; Scharfe & Bartholomew, 1994).

What Parents Need to Do

In light of these findings, parents should understand the importance of continued efforts to promote secure attachment in their adolescents. Conversely, parents of adolescents with insecure attachment patterns may be reinforced by the knowledge that this period of development offers a significant window of opportunity for change toward greater security.

Providing parents with an understanding of the role of peers versus parents as sources of support and guidance during adolescence (see III – 5. p 21, this document) is a useful strategy to improve parent effectiveness.

IV Implications for Government Policy and Recommendations for Future Research

1. Parent Education Targeting the Myth of Adolescent Detachment

- Public education should target the myth of adolescent detachment and rejection of family (see sections III – 1 and 5).
- Continued support of parents through community parenting programs that adopt concepts of attachment and transformation rather than dissolution of the parent-adolescent relationship. Parenting programs should assist parents in identifying significant periods of transition in the lives of their adolescents, and developing effective communication and support of their adolescent.

2. Strategies for Supporting Parents of Adolescents

The transformation of the parent-child relationship in adolescence requires that parents adapt their parenting practices appropriately. The literature that we have reviewed indicates that parental availability, support and monitoring continue to be important components of effective parenting. In contrast to younger children, however, adolescents venture further from immediate parental monitoring and they desire greater participation and negotiation of rules and expectations. In addition, the significant cognitive growth that occurs in adolescence means that adolescents now think about the kind of person they are, the kind of person their parent is, and the values that each of them holds. Adolescent values and beliefs become important predictors of their expectations and behaviors.

Attachment research has given rise to the development of interventions that focus on the prevention and remediation of insecure attachment in infancy and early childhood (e.g., Crittenden, 1992; Lieberman, Weston, & Pawl, 1991; van den Boom, 1994). Interventions have focused on two complementary goals: 1) changing parental sensitivity to attachment needs and behaviors in infants and young children; and, 2) changing parental attachment representations as a vehicle to promote change in parenting behavior. Research on these interventions is relatively preliminary but thus far indicates some success (Lieberman, *et al.* 1991; van den Boom, 1994).

Surprisingly few attempts have been made to apply attachment theory to interventions with adolescents and their families, or to adapt intervention models for younger children so that they can be applied with adolescents. Yet attachment principles clearly apply across the life span and interventions can be adjusted to be developmentally appropriate to adolescents and their families. For example, sensitivity and attunement of parents of adolescents may best be represented by:

- Recognition and responsiveness to the needs of adolescents for continued accessibility and support of the parent as a secure base;
- Identification of the adolescent's need to move toward autonomy through active negotiation within the parent-adolescent relationship; and,
- Acceptance and support of adolescent perspectives and experiences as a mode of ensuring continued parent-adolescent connectedness despite differentiation of roles and values.

Supporting parents in the development of sensitive parenting of their adolescents may be a productive intervention that warrants investigation.

In what ways might government contribute to establishing programs that enhance parenting of adolescents, and ultimately adolescent adjustment?

- It is essential that programming be developed based on awareness of the needs of the general population (i.e., universal programs), and the needs of special groups (e.g., targeted programs). Research is necessary to establish the knowledge that parents in the general population have regarding the challenges of adolescence and the role that their relationship plays in ensuring adaptive functioning. This research is most likely to show that many parents hold inaccurate beliefs about adolescence and undervalue the importance of their relationship with their child. It is also likely to show that adolescence is a stressful time for parents and that many parents are eager for information on how to parent effectively during this time. With this information in hand steps can be taken to target universal programs to specific areas of educational need. Research has shown that children exposed to maltreatment, neglect and abandonment are at high risk for insecure attachment. Interventions that assist in the development of attachment security are particularly required for these adolescents.
- Sensitivity to special periods of challenge during adolescent development will also be an important element in such programming.
- With respect to universal programs, the provision of funds for speakers, group leaders, reading lists and materials, and videos for junior high and high school parent groups, community centres, libraries, TV, radio, would be valuable in increasing awareness and education. Television commercials, similar to those developed to increase awareness of bullying and drug use (e.g., Olweus, 1992, 1997) would be an ideal method to communicate information to parents and adolescents. Pamphlets delivered through schools and doctor's offices would also be helpful in providing information that could be widely distributed. Such information could be sent to all parents of teens entering high school with information on support centres to contact for further information.
- Because many parents may experience difficulty in managing the balance between limit-setting and autonomy support, and may interpret their adolescents' striving for autonomy as threatening to the relationship, community-based and/or school-based parenting programs that focus specifically on these issues may be helpful. These

programs would be most successful if provided by trained professionals, who could work with groups of parents, or groups of parents and adolescents, to educate, facilitate improved communication, and role play problem solving.

- Programs of this nature may be best placed at important junctures in adolescent development, where change in attachment is most likely and risk is highest. Thus, programs targeting early adolescence, or entry into high school, would be ideal. For example, school-based programs that offer such groups for all parents and adolescents upon entry to high school may assist in preventing the development of family and adolescent difficulties associated with this transition.
- With respect to targeted programs, research shows that adolescents from clinical populations tend to be insecurely attached and it may be valuable to develop attachment-focused interventions for the special needs of these adolescents and their families. Research on therapy with adolescents shows that efficacy is enhanced when interventions target multiple factors in the youth's ecology, such as individual problems, family issues, and school or vocational issues. In a recent attempt to articulate the implications of attachment theory for intervention with high-risk adolescents, Moore and colleagues (Moore, Moretti, & Holland, 1998) proposed several basic principles that guide the application of attachment theory to the development of programming. Although preliminary, this work provides a foundation for further development in this area. A fundamental principle of this approach is the importance of understanding the meaning of behavior from the perspective of attachment and internal working models. The principles also recognize the importance of early and repeated experiences with significant others in forming the foundation of attachment models, yet acknowledge that attachment models are 'works in progress' which can be revised with the provision of new experiences and reintegration of past experience. High-risk youth typically have a history of atypical and maladaptive attachment experiences, which involve experiences of maltreatment, neglect and abandonment. They are mistrusting of authority and tend to interpret attempts at conventional parenting or treatment as coercive and threatening. Through understanding and empathy for how youth make sense of their relationships with caregivers, clinicians can more effectively establish a relationship with them and assist in transforming their attachment models and behavior. An important principle of this approach is the view that new caregivers, whether foster parents or mental health professionals, must extend themselves into the relationship with youth and understand that experiences within the relationship come to influence and potentially change the attachment models that youth hold. Similarly, it is recognized that enduring change only occurs when it is supported through sufficient and enduring change in the systems (e.g., family, school and broader social context) that youth live in.
- This approach requires a shift from a primary position of 'control' to one of 'connection'. Such a shift is challenging given social pressures to 'control' the alarming behavior of high-risk youth. Adopting an attachment perspective entails a willingness to understand and connect with youth despite their behavior, combined with clarity of limit setting regarding problematic behavior. The ultimate goal of such an approach is to assist youth

in the development of 'internal control' rather than extended reliance on 'external control' through mental health or youth forensic services.

- Evidence suggests considerable similarity between the attachment style of parents and children (Van IJzendoorn, 1995). Thus, provision of social support and therapy for parents with respect to their own attachment needs, as well as focussing on their providing for their adolescent's needs, may be an important adjunct to interventions directed at adolescents and families.
- Support of efforts to understand the value of attachment for intervention with adolescents and families, for both normative and clinical samples, is required. Research that focuses on the articulation of programs and evaluation of their efficacy is warranted.

3. Existing Resources and Future Needs

The availability of universal and targeted programs for adolescents and families varies considerably between provinces and communities. Common resources range from parent-support groups and related community groups that do not depend on government funding, to mental health services that are funded within each community. From time to time, government-funded media-based universal programs are provided to increase awareness regarding particular issues (e.g., teen drug use, violence and bullying issues). What is required is a shift in attention and focus within all such existing services such that attachment issues for adolescents and parents are clearly understood, acknowledged and integrated into programming. This is best achieved through government-initiated efforts that shift the focus of existing outdated programs, through special initiatives (e.g., a media campaign that focuses on how parents are important throughout adolescence) or special programming (e.g., support of new programs or reorganization of existing programs).

One concern is that programming has primarily been in place for younger children (i.e., under the age of 10) and older adolescents (i.e., 15 years of age or older). Interventions for younger children focus on parent skills training, social skills training, and remedial school intervention. In contrast, interventions for older adolescents focus on individual psychotherapy, recreational and social facilities (e.g., teen programming), and vocational training. There are relatively few programs for early adolescents (i.e., ages 11-14). This is unfortunate given the documented risks associated with high school transition for this age group and the fact that the preadolescent to early adolescent period has been identified as a risk period for the emergence of late-onset conduct disorder. Programming for this age group may be particularly cost-effective in preventing the emergence of adolescent functioning problems that worsen and eventually place a significant burden on mental health resources. As previously noted, universal programs that target entry into high school may be particularly useful in this regard. Such a program could be integrated as part of orientation to high school requiring participation of both parents and youth. This may be most effectively delivered in the transition year that precedes high school, although some thought should be given to extending some components of the program in the early years of high school (e.g., continued distribution of information to parents and adolescents). Such a program could be integrated with a tour of the high school and discussion of school protocol (e.g.,

expectations) and concerns (e.g., safety). Within this context, issues about the transition to adolescence, the importance of continued support and monitoring within the parent-child relationship etc., could be discussed. Video presentation and distribution of educational material (e.g., pamphlets, referral resources for parents and youth in need) could also be added if time permits. Programming should target both parents and adolescents at appropriate levels to ensure change in how family members understand the period of adolescence and the role of parents during this time. The key components of this program would include dispelling myths about adolescence, understanding the challenges of adolescence and transitions in the parent-child relationship, and emphasizing the need for continued active involvement in support and monitoring of adolescent children.

It is essential that mental health and other professionals involved in service delivery are aware of and knowledgeable about adolescent-parent attachment issues and incorporate this knowledge into intervention programs. At this time, there is likely a lack of suitably trained personnel to guide program development and to retrain others already working in the field. Training is needed not only in adolescent-parent attachment, but also in adolescent psychological development, parenting, and attachment interventions with individuals and groups. Inservice training programs are needed. Training should also be provided to new practitioners in applied developmental, clinical and/or community psychology training programs that specialize in adolescent adjustment. Medical, nursing and/or social work programs geared toward family, community and adolescent medicine; and programs in education may also provide contexts for such training. Efforts should be made to ensure attention to attachment issues in such programs so graduates, particularly practitioners that provide services for the general population (e.g., general and family practice doctors, school teachers), are better able to understand and respond to these needs in their practice.

4. Understanding the Influence of Peers and Romantic Partners

In light of the transition in family and peer relationships during adolescence, parent education programs highlighting the significant information on peer attachment and the development of romantic relationships are necessary.

Much more research is required to understand the transitions in attachment functions to different target figures during the adolescent years.

5. The Role of Context in the Attachment-Adjustment Link

A moderating relationship between attachment and adjustment is suggested by extant research, such that the relation between attachment and adjustment is magnified in at-risk contexts. Though there has been insufficient research to draw this conclusion firmly, one implication is that intervention programs to promote healthy adolescent-parent attachment should target families in high-risk contexts. Such interventions might best be carried out in community-based health centres or schools in low-income areas.

V Summary of Research Directions

- Given the normative changes in attachment behaviour with parents in middle childhood and adolescence, research is needed to identify how qualitative differences in adolescent-parent attachment are manifested in adolescence. That is, we do not have established self-report measures in middle childhood and the adolescent period of the different patterns of insecurity, despite the success of self-report measures in other areas (e.g. self-concept, parenting style) with this age group. For example, it appears for fifth grade children Preoccupied scores on the Coping Strategies Questionnaire (Finnegan, *et al.* 1996) correlate positively rather than negatively with instruments measuring security of attachment (Karavasilis, *et al.* 1999; Mayseless, personal communication, July 28, 1999). Much of the literature on children in these age groups is based on longitudinal studies of children classified by the strange situation in infancy or early childhood. Interview work (e.g., Bartholomew, Moretti, and Kobak) has extended measures developed with adults downward, but these interview measures have not yet been widely used in studies of adjustment.
- Research on the developmental shift in attachment functions from parents to romantic partners has not assessed adolescents manifesting qualitative differences in attachment security.
- Research is needed on self-report, interview and observational measures of attachment in adolescents and their parents to assess how developmental and qualitative differences relate to adjustment.
- Such research must also incorporate a multi-method approach to measurement of both attachment and adjustment, incorporating measures from different informants (Ge, Best, Conger, *et al.* 1996), to avoid associations being inflated by shared method variance.
- Developmental research which takes into account qualitative difference in attachment is also needed, as outlined in Section III 4., to examine the impact of new attachment figures (close friends, romantic partners) on the parent-child relationship, including the degree to which the parent is sought to fulfil attachment functions (proximity, secure base, safe haven, etc). Adult work (Fraley & Davis, 1997; Trinke & Bartholomew, 1997) touches on the importance and complexity of this work in a developmental context.
- Research is also needed to assess whether a generalized attachment style, which is a somewhat stable property of the individual, develops in adolescence or whether adolescent attachment is primarily a reflection of the qualities of ongoing attachment relationships (Allen & Land, 1989). Such research, which is predicated on the refinement of available measures, needs to assess the quality of attachment to different target figures, parents, friends and romantic partners. Ultimately, longitudinal studies with both early and concurrent measures of attachment and context are needed. In such research it is particularly important to simultaneously take into account qualitative differences in long-term parenting style (Ge, *et al.* 1996) and developmental changes in the

adolescent-parent interaction (Fulgini & Eccles, 1993). Such research is necessary for planning the most effective targets and timing of interventions to improve adolescents' attachment relationships with their parents.

- The extant research on the stability of attachment status (only 70% stability over several months) currently suggests considerable potential for interventions in adolescence designed to promote greater security of attachment. More research on the determinants of stability and change in adolescent attachment is clearly warranted, in particular on the degree to which change is possible within the context of an ongoing parent-adolescent relationship versus in the context of new relationships. Such knowledge is essential for the design of intervention programs to promote healthy adolescent attachment and adjustment.
- Such research must include a broad range of social class, family structure, and ethnic background, both fathers and mothers and boys and girls. Sample size must be adequate to permit appropriate statistical analysis within subgroups to assess generalizability across subgroups.
- Support of efforts to understand the value of attachment for intervention with adolescents and families, for both normative and clinical samples, is required. Research that focuses on the articulation of programs and evaluation of their efficacy is essential.
 - ◆ Sufficient research is complete to warrant further steps toward a universal orientation to high-school program as detailed above. Further work is required on program development to specify the components of the intervention. This may involve preliminary screening of parent and adolescent attitudes toward adolescence and the parent-relationship to identify key areas of educational need. Formal evaluation of the program would require testing the impact of the program on parenting knowledge and behavior, and adolescent attitudes and adjustment in target schools relative to schools where such a program is not available.
 - ◆ With respect to the evaluation of clinical interventions, although some practitioners and centres currently utilize attachment theory to guide clinical practice, further work is required to clearly articulate the components of these programs and to prepare treatment manuals. With this completed, research can then proceed to evaluate the efficacy of such programs within specific populations (e.g., aggressive adolescents, adolescents suffering from depression and/or anxiety). Efficacy is best assessed using both comparative evaluation methods (e.g., attachment intervention compared to other forms of intervention) and qualitative approaches (e.g., case study).

Summary: Recommendations for Future Research

- Development and validation of self-report, observational and/or interview based measures of attachment for adolescents.
- Determinants of stability and change in attachment from childhood to adolescence, and from adolescence to adulthood.
- Investigations of transitions in attachment functions of parents, peers and romantic partners from early adolescence to early adulthood.
- Documentation of the emergence of generalized versus differentiated attachment representations from early adolescence to early adulthood.
- Investigation of parenting factors related to shifts from secure to insecure attachment versus from insecure to secure attachment during adolescence.
- Examination of mediators and moderators of the relationship between adolescent attachment and functioning in young adulthood (i.e., poverty, parental psychopathology, peer relationships, school success).
- Development and evaluation of both universal and targeted programs that focus on attachment, family relations and adjustment in adolescence.

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