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Generations of Relationships and
Relationships across Generations

Conference Proceedings

The Combined 7th Annual Conference
of the Australian Psychological Society’s
Psychology of Relationships Interest Group
and International Association for Relationship Research
Mini-Conference

Australian Catholic University
Melbourne Australia
10th – 11th November 2007

EDITED BY

Zoë J. Pearce, PhD MAPS

The Australian Psychological Society
Melbourne Australia
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Relationships across Generations

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Conference Chair
Ross Wilkinson Australian National University

Conference Organising Committee
Terry Bowles Australian Catholic University
Barry Fallon Australian Catholic University
Julie Fitness Macquarie University
Gery Karantzas Deakin University
Zoë Pearce Queensland University of Technology

Conference Proceedings Editor
Zoë Pearce Queensland University of Technology

National Committee
Terry Bowles (Convenor) Australian Catholic University
Lisa Eisen Australian Catholic University
Barry Fallon Australian Catholic University
Julie Fitness Macquarie University
Gery Karantzas Deakin University
Torrey Orton SINACCORD/SkillandWill Ltd
Zoë Pearce Queensland University of Technology
Neil Welch Flinders University
Alexandra West Corrections Victoria
Ross Wilkinson Australian National University
Introduction from the Chair of the Conference Committee…

On behalf of the Conference Organising Committee I am pleased to introduce the Proceedings of the first ever combined Annual Conference of the Australian Psychological Society's Psychology of Relationships Interest Group and Mini-Conference of the International Association for Relationship Research (IARR). This is now our seventh annual conference of the Interest Group and it is fair to say that over the years it has become one of the most important events in Australia for those interested in the psychology of human relationships, defined in the broadest sense. This year the opportunity to combine forces with IARR has allowed us to enlarge the conference and increase the contribution of internationally based researchers and practitioners. The quality of papers and range of topics addressed in the Proceedings is truly impressive and will give readers an indication of the success of the Conference as a whole.

I would like to express my gratitude to all the authors who took that extra step and prepared their work for publication in the Proceedings. Particular thanks to the Proceedings Editor, Dr Zoë Pearce, for her efforts in organising this publication. Thanks also to all those reviewers without whom quality scientific publications would not be possible. Finally, thanks to the IARR for their assistance in promoting the conference internationally.

Regards,

Ross Wilkinson, PhD MAPS
Chair, Conference Organising Committee
KEYNOTE SPEAKERS

Professor Marita McCabe  
*Deakin University, Melbourne, Australia*

Professor McCabe is a Professor of Psychology at Deakin University in Melbourne. Professor Marita McCabe is a Professor of Psychology at Deakin University and also Foundation Director of the Health and Wellbeing Research Priority Area. Professor McCabe’s research area is in body image, obesity prevention treatment, eating disorders and depression and dementia among older people, and has published extensively in these areas. She is the Associate Editor of an international journal and on the editorial board of 3 other journals. Professor McCabe is regularly invited to give keynote addresses at international conferences in her areas of research.

Distinguished Professor Phillip Shaver  
*University of California, Davis, USA*

Internationally renowned attachment researcher Professor Shaver is the Director of the Adult Attachment Laboratory at the University of California, Davis (UC, Davis). Professor Shaver has published extensively (over 200 papers and book chapters combined) in the area of attachment, relationship processes and social psychology over the last 35 years. He has also edited or co-written 5 books. He has been awarded numerous grants from funding bodies including the NIMH, NSF, National Institute of Aging (NIA) and the Fetzer Institute. He is on the editorial board of international journals such as Journal of Personality and Social Psychology, Personal Relationships and Attachment and Human Development. Professor Shaver has been a member on various executive committees and working groups associated with the NIMH and NSF. He along with Professor Mario Mikulincer has recently published an authoritative text of attachment title *Attachment in Adulthood: Structure, Dynamics, and Change*. The text has received wide acclaim in the area of personal relationships.

Professor Jeffry Simpson  
*University of Minnesota, USA*

An internationally recognised expert in relationship research, Professor Simpson has over 20 years experience in the field of close personal relationships having published over 100 peer reviewed papers and edited 8 books. His research expertise spans evolutionary, attachment and social cognition approaches to the study of relationships. Having conducted some of the pioneering research in linking attachment theory to adult relationships, he along with Professor Garth Fletcher has also developed the Ideal Standards Model of relationships. His work has been funded by the National Institute of Mental Health (NIMH) and National Science Foundation (NSF) and is currently chair of the social psychology, personality panel of the National Institutes of Health (NIH). He is on the editorial board of numerous international journals and is the current Associate Editor of the Journal of Personality and Social Psychology.
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*The papers contained in these Proceedings have been subject to a blind peer-review process.*
KEYNOTE ADDRESS

Changes in Sexual Functioning and its Association with Relationship Functioning in Older Age

Professor Marita McCabe
School of Psychology
Deakin University

Abstract

This paper presents data on sexual functioning among men and women as they get older. The contribution of the partner to sexual functioning, as well as the association between sexual functioning and relationship functioning is also examined. Studies demonstrate that over 50 percent of men over the age of 50 years experience erectile dysfunction (ED). This research has demonstrated that ED impacts on the man’s level of self-esteem, masculinity and his relationship. Other studies indicate that menopause leads to problems in the sexual functioning among many women. However, the nature of these changes vary in different cultures, which seems to reflect the attitudes held by these societies towards older women being sexual beings. Studies also indicate that sexual dysfunction in one partner can have an impact on the sexual functioning of the other partner. In fact, sexual dysfunction may be best conceptualised as a couple problem. Evidence to support this view of sexual functioning is reviewed, particularly in relation to older people. It certainly appears that female partners have a major impact on treatment seeking behaviour for sexual dysfunction among their male partners, and that treatment is more likely to be effective if the female partner is involved in the treatment process.
KEYNOTE ADDRESS

Attachment Phenomena at Three Levels: Individuals, Couples, and Groups

Phillip R. Shaver, PhD
Distinguished Professor of Psychology
University of California, Davis

Abstract

Attachment theory (Bowlby, 1982) is one of the most scientifically generative conceptual frameworks in the history of psychology. Beginning as a revision of “object relations” psychoanalytic theories – a revision focused on the ethological concept “behavioral system,” the cognitive concept “internal working model,” and a pressing clinical issue, “maternal deprivation” – attachment theory gradually transformed the study of parent-child relationships; infant, child, and adolescent development; romantic relationships; and marriage. Recent research has extended the theory’s range of application to religion, organisational leadership, and intergroup relations. In this talk, I will show how the theory has been creatively tested with diverse, probing research methods to yield new insights into the individual mind (and brain), dyadic relationships, and relationships in groups and organisations. I will summarise some of the book I coauthored this year with Mario Mikulincer, *Attachment in Adulthood: Structure, Dynamics, and Change* (Guilford Press, 2007). I will also present a few recent findings and suggest directions for further research.
KEYNOTE ADDRESS

Working Models of Attachment and Reactions to Different Forms of Caregiving from Romantic Partners

Jeffry A. Simpson and Heike A. Winterheld
University of Minnesota, Twin Cities Campus

W. Steven Rholes
Texas A&M University

M. Minda Oriña
University of Minnesota, Twin Cities Campus

Abstract

We tested a series of theoretically-derived predictions about connections between attachment working models (attachment to one’s parents assessed by the Adult Attachment Interview; AAI) and the effectiveness of specific types of caregiving spontaneously displayed by dating partners during a stressful conflict resolution discussion. Each partner first completed the AAI. One week later, each couple was videotaped while they tried to resolve a current problem in their relationship. Trained observers then rated each interaction for the degree to which: (a) emotional, instrumental, and physical caregiving behaviours were displayed, (b) care recipients appeared calmed by their partners’ caregiving attempts, and (c) each partner appeared distressed during the discussion. Individuals who had more secure representations of their parents were rated as being more calmed if/when their partners provided greater emotional care, especially if they were rated as more distressed. Conversely, individuals who had more insecure (dismissive) representations of their parents reacted more favorably to instrumental caregiving behaviours from their partners, especially if they were more distressed. The broader theoretical implications of these findings are discussed.

Although the beneficial effects of perceived social support have been widely documented (Cohen & Willis, 1985), recent studies of supportive transactions have shown that recipients of support often either do not benefit from social support or are sometimes worse off for having received it (Bolger, Foster, Vinokur, & Ng, 1996; Bolger, Zuckerman, & Kessler, 2000; Taylor, 2007; Westmaas & Jamner, 2006). Several explanations have been offered for this perplexing finding, including that support givers may be unskilled, that receiving support may undermine self-esteem or make the recipient feel indebted to the provider, or that the support received may be the wrong kind delivered to the wrong person (Bolger et al., 2000; Cohen & Willis, 1985; Taylor, 2007).

The present study investigates a version of this latter “matching” explanation. We hypothesise that personality characteristics tied to perceptions of having received sensitive versus insensitive care early in life might partially dictate what kind of support from relationship partners in adulthood most effectively calms people. Guided by attachment theory (Bowlby, 1969, 1973, 1980), we suggest that adults who have a secure attachment history with their parents ought to benefit from emotional support provided by their current romantic partners, whereas adults who have an insecure (i.e., dismissive) attachment history with their parents should benefit more from receiving instrumental forms of support from their current romantic partners.

Adult Attachment and Working Models

According to Bowlby (1973, 1980), experiences with attachment figures generate representational or “working models” that guide behaviour, affect, and perceptions in later relationships. The earliest working models are formed during infancy and early childhood, partly in response to interactions with parents and other significant caregivers (van Ijzendoorn, 1995). During social development, models of different attachment figures coalesce into more generalised, higher-order models of the self and significant others, even though models of central attachment relationships remain intact (Main, Kaplan, & Cassidy, 1985). Throughout childhood and adolescence, working models of new people and new relationships begin to develop based on these earlier models. New models, therefore, are not entirely independent of earlier ones given that earlier models guide how information about new persons and relationships is encoded, processed, interpreted, stored in memory, and eventually acted on (Bowlby, 1973; Collins, Guichard, Ford, & Feeney, 2004; Crittenden, 1985).

Although a considerable amount is known about how different types of working models (e.g., toward parents, toward romantic partners) are associated with caregiving behaviour (see, for example, Feeney & Collins, 2001; Kunce & Shaver, 1994), relatively little is known about how people who harbor different attachment models respond to caregiving in situations that should activate the attachment system. In contrast to self-report measures...
of attachment that are designed to assess more consciously held beliefs, values, and emotions about attachment issues related to mating and pair-bonding, adults’ representations of experiences with their own attachment figures during childhood are assessed by measures that “surprise” the unconscious and tap more temporally distant and implicit attachment working models.

The most widely used measure is the Adult Attachment Interview (the AAI; Main & Goldwyn, 1994). The AAI is a semi-structured interview that assesses recollections of childhood experiences with parents and other attachment figures. The interview is scored for discourse properties and violations of norms regarding clear and coherent communication. The degree to which respondents describe their childhoods with their parents in a clear, credible, and coherent manner principally determines attachment classifications on the AAI. Thus, some people who claim to be “secure” or to have had “secure” relationships with their parents during childhood are classified as insecure based on the manner and coherence (rather than the content) of how they describe their childhoods in the interview. This partially explains why self-report adult romantic attachment styles are not systematically correlated with scores on the AAI (see Roisman et al., 2007; Shaver, Belsky, & Brennan, 2000). Bowlby (1979), in fact, believed that initial models of relationships formed during early childhood exist alongside more complex models formed later in development when individuals have the more advanced cognitive abilities required to form more sophisticated levels of mental representation (see also Wilson, Lindsey, & Schooler, 2000).

The AAI was designed to measure individuals’ current “state of mind” with respect to past attachment issues rather than their childhood attachment to parents per se (Main et al., 1985). Unless individuals have unusual, unresolved attachment issues or cannot be classified in a single attachment category, most people are assigned to one of three general categories: secure, dismissive (avoidant), and preoccupied. The sub-classification scores of the three major categories can be transformed to create a continuous measure of the degree of attachment security (Kobak, Cole, Ferenz-Gillies, Fleming, & Gamble, 1993; Simpson, Rholes, Oriña, & Grich, 2002). Translating AAI sub-classification scores into a single security index is an appropriate and good way to assess attachment security (see Roisman et al., 2007; Simpson et al., 2002).

Persons who score as secure on the AAI present a clear, well-supported description of their past relationship with both parents. Their episodic memories of childhood are vivid and coherent, and they have little difficulty recalling important childhood experiences, even if their upbringing was difficult. Persons classified as dismissive on the AAI typically view their parents and upbringing as normal or even ideal, but cannot support these claims with specific, episodic memories of significant childhood events. Others classified as dismissive actively disregard or dismiss the importance of attachment figures or attachment-related emotions and behaviour. Individuals who are preoccupied on the AAI usually discuss their childhood experiences with attachment figures extensively during the interview. Their interviews often reveal deep-seated, unresolved anger toward one or both parents, which taints their descriptions and interpretations of past experiences. Because only 12 participants (6.45% of the current sample) were classified as preoccupied, the predictions and analyses reported below focus on individuals who were scored F (secure) or Ds (dismissive).

**Attachment Theory and Responses to Different Types of Caregiving**

Bowlby (1973) believed that working models of early experiences with caregivers should affect the type of care that adults find most comforting, especially when they are distressed. According to George and Solomon (1996; 1999), early experiences with primary caregivers—particularly during situations in which individuals are upset and need comfort—convey diagnostic information about an individual’s self-worth and what he or she can expect from caregivers in the future. As a result, perceptions and memories of the type or quality of care that individuals received from early attachment figures should shape how they respond to different forms of care offered by their attachment figures in adulthood. The AAI assesses working models of parents associated with early and middle childhood (ages 5-12), a period of development in which individuals are less self-sufficient and more outcome-dependent on their caregivers for care and support. Accordingly, the AAI should be a good predictor of how people who have different attachment orientations react to different types of caregiving in stressful situations.

According to Bowlby (1969, 1973), individuals who have received sensitive, situationally-contingent care learn to cope with distress by turning to others for comfort and support in times of need (see also Ainsworth, Blehar, Waters, & Wall, 1978). During development, these individuals should have received more constructive, emotionally-focused forms of care from their caregivers (parents and perhaps later attachment figures), especially when they were distressed and their attachment systems were activated (Kunce & Shaver, 1994). As adults, therefore, more secure persons should respond more favorably to emotional forms of caregiving, especially when they are distressed. In particular, more secure persons should be more calmed if their attachment figures (romantic partners) offer them greater emotional support than greater instrumental support when they are distressed.

Although they may be physiologically aroused in attachment-relevant situations (Roisman, Tsai, & Chiang, 2004), individuals who have been rejected by attachment figures (i.e., highly dismissive persons) tend not to turn to others to reduce their distress (Crittenden & Ainsworth, 1989). Because highly dismissive individuals have
learned to cope by being more self-sufficient (Bowlby, 1973), they place a premium on independence and self-reliance. To the extent that emotional forms of care (e.g., nurturance, reassurance, soothing) could undermine feelings of strength and emotional independence more than instrumental forms of care (e.g., offering concrete suggestions or advice about how to solve a problem; see Bowlby, 1973), more dismissive persons should respond better to instrumental forms of care from their romantic partners, especially when they are distressed. Highly dismissive persons should also be less comfortable with emotional support because it might signal that they are getting too close to their partners emotionally, whereas instrumental care may indicate that they are being respected and “taken seriously” by their partners.

According to Ainsworth et al. (1978), mothers whose infants are avoidantly attached are emotionally constricted and dislike close bodily contact with their infants. Consequently, most avoidant infants learn not to seek close contact (e.g., to be picked up, to be held) from their primary caregivers. Mothers who score as dismissive on the AAI (an adult form of avoidance) are also uncomfortable with close bodily contact with their infants (Main et al., 1985). Finally, adults who report being avoidantly attached to their romantic partners also claim to have negative reactions to intimate forms of physical contact with their romantic partners (Brennan, Wu, & Loev, 1998). Based on these findings, we tentatively hypothesised that more dismissive adults would not benefit from support from their partners that involves physical contact.

Overview of the Study

Our behavioural observation lab study had three phases. In phase 1, romantic partners involved in long-term dating relationships each completed the AAI, which was audiotaped and then transcribed and coded by trained raters. One week later as part of phase 2, each couple returned to the lab, completed self-report relationship measures (individually), and then engaged in a 10 minute videotaped conflict resolution discussion. In phase 3, trained observers rated the extent to which each partner spontaneously displayed emotional, instrumental, and physical caregiving behaviours during the interaction when his or her partner (the “care recipient”) appeared distressed, the impact that these caregiving behaviours had on the care recipient, and the level of distress/anxiety displayed by each partner during the discussion.

We tested five hypotheses. First, we predicted that individuals who had more secure attachment representations of their parents (assessed by the AAI) would react more favorably (i.e., be more calmed and satisfied, rated by observers) if their partners provided greater emotional care (rated by observers) (Hypothesis 1). Conversely, we predicted that individuals who had more insecure (dismissive) representations of their parents on the AAI would respond more favorably to greater instrumental (e.g., rational, advice-based) caregiving from their partners (Hypothesis 2), and less favorably to physical caregiving (Hypothesis 3). We also predicted that AAI attachment security would interact with individuals’ level of distress (rated by observers) during the conflict discussions in predicting reactions to their partners’ specific caregiving behaviours. Specifically, more favorable responses to greater emotional caregiving should be witnessed in more secure individuals than in more dismissive ones, particularly when individuals appear more distressed (Hypothesis 4). Conversely, more favorable responses to more instrumental caregiving should be evident in more dismissive individuals than more secure ones, especially when individuals appear more distressed (Hypothesis 5).

Method

Participants

Ninety-three dating couples participated in the study. At least one member of each couple was enrolled in an introductory psychology class at a southwestern university and received partial course credit for participation. Couples were required to have dated each other for at least three months to ensure they were involved in meaningful relationships. The mean length of dating relationships was 17.63 months (SD = 15.30 months, range = 3 to 65 months). Mean ages of men and women were 19.53 and 18.80 years, respectively (ranges = 17-24 for men; 17-21 for women).

Procedure

The study had three phases. In Phase 1, the AAI was administered in a private room to each dating partner (individually). Each AAI was audiotaped for later transcription and coding. Approximately one week later, each couple returned to the lab for Phase 2. Each partner privately completed self-report relationship measures, after which the couple engaged in a standard videotaped conflict resolution discussion task (Simpson, Rholes, & Phillips, 1996). In Phase 3, trained observers rated each partner’s caregiving behaviours (i.e., the extent to which s/he displayed emotional, instrumental, and physical forms of care), focusing on points during the discussion when each individual’s partner appeared distressed/upset. Observers also rated the effect that these caregiving behaviours had on the care recipient (i.e., how calmed and satisfied he or she was by the care offered), and the
amount of distress/anxiety displayed by each partner during the discussion. All ratings were made on 7-point Likert-type scales.

## Results

Basic descriptive information is presented in Tables 1 and 2. To test the primary hypotheses, APIM analyses were conducted using the PROC MIXED program in SAS. The primary predictor variables in our analyses were actors’ continuous scale scores on the AAI security dimension (with higher scores reflecting greater security), actors’ continuous observer-rated stress/anxiety, and the three continuously rated partner caregiving behaviours (instrumental, emotional, and physical). The other predictor variables were the condition to which each couple was randomly assigned (discussing a major versus a minor problem) and gender. The dependent variable was actors’ response to partners’ caregiving (i.e., the observer-rated index of partner reaction to caregiving).

### Table 1
**Descriptive Statistics**

<table>
<thead>
<tr>
<th></th>
<th>Men</th>
<th>Women</th>
<th>Mean Difference</th>
<th>Matched–Pairs t-tests</th>
</tr>
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<tbody>
<tr>
<td>AAI Security</td>
<td>3.94</td>
<td>4.31</td>
<td>-.37</td>
<td>(t(82) = -1.30, \text{ns})</td>
</tr>
<tr>
<td>(rater-scored)</td>
<td>(2.00)</td>
<td>(1.84)</td>
<td>(2.63)</td>
<td></td>
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<tr>
<td>Instrumental Caregiving</td>
<td>3.91</td>
<td>4.19</td>
<td>-.28</td>
<td>(t(92) = -2.23, p &lt; .03)</td>
</tr>
<tr>
<td>(observer-rated)</td>
<td>(1.06)</td>
<td>(1.20)</td>
<td>(1.23)</td>
<td></td>
</tr>
<tr>
<td>Emotional Caregiving</td>
<td>3.33</td>
<td>3.48</td>
<td>-.15</td>
<td>(t(92) = -1.26, \text{ns})</td>
</tr>
<tr>
<td>(observer-rated)</td>
<td>(.98 )</td>
<td>(.95)</td>
<td>(1.15)</td>
<td></td>
</tr>
<tr>
<td>Physical Caregiving</td>
<td>4.53</td>
<td>4.35</td>
<td>.18</td>
<td>(t(92) = 1.50, \text{ns})</td>
</tr>
<tr>
<td>(observer-rated)</td>
<td>(1.02)</td>
<td>(1.91)</td>
<td>(1.17)</td>
<td></td>
</tr>
<tr>
<td>Partners’ Reaction</td>
<td>4.53</td>
<td>4.27</td>
<td>1.26</td>
<td>(t(92) = 3.08, p &lt; .05)</td>
</tr>
<tr>
<td>(observer-rated)</td>
<td>(1.23)</td>
<td>(1.40)</td>
<td>(1.84)</td>
<td></td>
</tr>
<tr>
<td>Stress/Anxiety</td>
<td>24.77</td>
<td>25.02</td>
<td>-.25</td>
<td>(t(95) = -1.68, \text{ns})</td>
</tr>
<tr>
<td>(observer-rated)</td>
<td>(1.83)</td>
<td>(1.73)</td>
<td>(1.49)</td>
<td></td>
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</table>

*Note: N = 93 men and 93 women. Standard deviations appear in parentheses below each mean. Actual scale ranges were: AAI Security 1-6; Instrumental Caregiving 4.56-22.22; Emotional Caregiving 9.44-46.89; Physical Caregiving 6.89-29.33; Partner’s Reaction to Caregiving 3.00-15.11; Stress/Anxiety 5-43.*

To test our primary hypotheses, our APIM model included all of the predictor variables mentioned above, all relevant two-way interactions (i.e., those needed to test the predicted three-way interactions) involving actors’ AAI scores, actors’ observer-rated stress, partners’ caregiving behaviours, and the predicted three-way interactions involving actors’ AAI scores, actors’ observer-rated stress, and partners’ caregiving behaviours. Consistent with our predictions, an interaction between actors’ degree of AAI security and partners’ amount of emotional caregiving also emerged, \(b = .03, t(122) = 2.14, p < .04\). As shown in Figure 1 and supporting hypothesis 1, care recipients (actors) who were more secure on the AAI displayed more favorable responses to their caregivers’ (partners’) emotional caregiving efforts, whereas more dismissive care recipients’ reactions were relatively less favorable. Supporting hypothesis 2, care recipients’ (actors’) degree of AAI security also interacted with partners’ amount of instrumental caregiving, such that more dismissive care recipients, compared to securely attached care recipients, were rated as more calmed/satisfied when they received more instrumental care from their partners, \(b = -.07, t(123) = -2.60, p = .01\) (see Figure 2). Our prediction that more dismissive persons would react more poorly to their partners’ physical caregiving attempts was not supported (Hypothesis 3), \(b = -.002, t(129) = -.12, \text{ns}\).
Table 2
Correlations among the Variables

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Note: N = 93 women and 93 men. All correlations are two-tailed. Higher scores indicate higher values on each variable.

* p < .05     ** p < .01

A = Male AAI security dimension; B = Male instrumental caregiving; C = Male emotional caregiving; D = Male physical caregiving; E = Male reaction to caregiving; F = Male observer-rated stress/anxiety; G = Female AAI security dimension; H = Female instrumental caregiving; I = Female emotional caregiving; J = Female physical caregiving; K = Female reaction to caregiving; L = Female observer-rated stress/anxiety.

We also predicted that AAI attachment security would interact with the level of stress/anxiety displayed during the discussions to predict reactions to partners’ caregiving behaviours. Specifically, the calming effects of emotional caregiving ought to be most apparent in more secure persons relative to more dismissive ones when individuals are more distressed (Hypothesis 4). Conversely, the calming effects of instrumental caregiving should be most evident in more dismissive persons relative to more secure ones when individuals are more distressed (Hypothesis 5). Supporting Hypothesis 4, among care recipients (actors) who were rated as more distressed during the discussion, more secure care recipients were more calmed if their caregivers (partners) provided greater emotional caregiving than was true of their more dismissive counterparts, \( b = .004, t(117) = 2.27, p < .03 \) (see Figure 3, the lower panel). Simple slopes tests indicated that the regression line for more secure people who were more distressed (see the lower panel of Figure 3) was significantly different than 0, \( t(87) = 2.30, p < .05 \), whereas the regression line for more dismissive people who were more distressed was not, \( t(87) = .19, ns \). None of the regression lines for people who were lower in distress were significantly different than 0, \( ts < .91, ns \). Consistent with Hypothesis 5, among care recipients (actors) rated as more distressed, more dismissive care recipients were more calmed if their partners provided greater instrumental caregiving than was true of more secure persons, \( b = -.008, t(117) = -2.29, p < .025 \) (see Figure 4, the lower panel). Further tests revealed that the regression line for more dismissive people who were more distressed (see the lower panel of Figure 4) was significantly different than 0, \( t(87) = 2.10, p < .05 \), whereas the regression line for more secure people who were more distressed was not, \( t(87) = -.48, ns \). None of the regression lines for people lower in distress were significantly different than 0, \( ts < .71, ns \).
Figure 1. The interaction of actor’s AAI security and partner’s emotional caregiving, predicting actor’s reaction to caregiving. Slopes are computed 1 SD above and 1 SD below the mean on AAI security.

Figure 2. The interaction of actor’s AAI security and partner’s instrumental caregiving, predicting actor’s reaction to caregiving. Slopes are computed 1 SD above and 1 SD below the mean on AAI security.

Figure 3. The interaction of actor’s AAI security, partner’s emotional caregiving, and actor’s observer-rated stress/anxiety, predicting actor’s responses to caregiving. Slopes are computed 1 SD above and 1 SD below the mean on AAI security. High and low stress refer to values 1 SD above and 1 SD below the sample mean, respectively.
Discussion

The results provided support for nearly all of our hypotheses. Specifically, we predicted and found that individuals who had more secure attachment representations of their parents were rated as more calmed if their partners offered greater emotional caregiving (Hypothesis 1), whereas those who had more insecure (dismissive) representations of their parents were more calmed by higher levels of instrumental caregiving (Hypothesis 2). Importantly, we also predicted and found that individuals’ level of stress/anxiety during the discussion (rated by observers) moderated these effects. Specifically, among more distressed individuals, more positive reactions to emotional caregiving were witnessed in more secure than in more dismissive individuals (Hypothesis 4), whereas more positive reactions to instrumental caregiving were evident in more dismissive than in more secure persons (Hypothesis 5). The only hypothesis (Hypothesis 3) that was not supported was that more dismissive individuals did not respond more negatively to physical forms of caregiving.

In light of these results, this study fills two noteworthy gaps in our knowledge and understanding of caregiving processes in romantic relationships. First, it confirms that different types of behavioural caregiving—especially emotional and instrumental—have differential effects on different people. Most prior attachment research on caregiving has not distinguished between different types or forms of caregiving enacted by partners in specific social contexts (for two important exceptions, see Collins & Feeney, 2000; Florian, Mikulincer, & Bucholtz, 1995), and no research has examined the impact of these three forms of caregiving on observed behaviour. Second, this study confirms that certain people are more calmed/soothed by certain forms of caregiving in ways anticipated by both attachment theory (Bowlby, 1973) and the caregiving model (George & Solomon, 1996, 1999).

The effectiveness of caregiving should depend on the particular skills and motives of the caregiver in relation to the specific needs and state of the care recipient. Unfortunately, theory and research on caregiving in interpersonal relationships has developed relatively independently of the wider research literature on social support. The broader social support literature primarily has been concerned with identifying adaptive and maladaptive consequences of social support on individuals (see Cohen, 2004). The interpersonal relationships field, on the other hand, has focused on how support and caregiving affects the origins and development of close relationships. Our findings suggest that the two fields could inform one another and should be integrated to better understand the processes by which caregiving in close relationships affects mental and physical health over time.

To our knowledge, it is the first study to make clear theoretical distinctions between and to measure three unique forms of caregiving in a behavioural observation study involving established couples. Moreover, it is the first study to test a major prediction derived from attachment theory and the caregiving model—namely, whether individuals who vary in attachment security measured by the AAI are more effectively calmed by certain forms of initial caregiving provided by their partners. Both secure and insecure individuals benefit from receiving care. The types of care that “work best”, however, are quite different.

Figure 4. The interaction of actor’s AAI security, partner’s instrumental caregiving, and actor’s observer-rated stress/anxiety, predicting actor’s responses to caregiving. Slopes are computed 1 SD above and 1 SD below the mean on AAI security. High and low stress refer to values 1 SD above and 1 SD below the sample mean, respectively.
References


INDIVIDUAL PEER-REVIEWED PAPERS

The following pages consist of the blind peer-reviewed papers accepted for inclusion in the Conference Proceedings for the Combined 7th Annual Conference of the Australian Psychological Society’s Psychology of Relationships Interest Group and International Association for Relationship Research Mini-Conference.
Effects of Parent-Care Transitions on Adult Sons’ and Daughters’ Marital Relationships

Jamila Bookwala (bookwalj@lafayette.edu)
Department of Psychology, Lafayette College
Pennsylvania, USA

Carolyn Pasternak (pasternc@lafayette.edu)
Department of Psychology, Lafayette College
Pennsylvania, USA

Rachel Pruchno (pruchnra@umdnj.edu)
New Jersey Institute for Successful Aging, University of Medicine and Dentistry of New Jersey
New Jersey, USA

Jason T. Newsom (newsomj@pdx.edu)
Institute on Aging, Portland State University
Oregon, USA

Abstract

We examined the impact of transitioning into and/or out of the parent-care role on marital quality over a 15-year period using data from the US National Survey of Families and Households. Using 3-way mixed-MANCOVAs (controlling for sociodemographic variables), we compared four groups of adult women and men varying on parent-care transition experiences (recent-caregivers, veteran-caregivers, former-caregivers, and non-caregivers) over time on three marital quality indicators (marital happiness, marital disagreement, and estimates of expected impact on quality of life [EQOL] if separated from spouse). We found that veteran-caregivers reported significantly less marital happiness than recent-caregivers. For EQOL if separated, we obtained a significant caregiving-transition group X gender interaction. Follow-up simple-effects tests indicated that among recent and veteran caregivers, women expected their lives to be significantly more negatively impacted if marital separation were to occur than did men. A similar but much weaker gender difference was observed among non-caregivers; among former caregivers, however, men and women did not vary on EQOL. The impact of parent-care transitions on marriage appear to vary along the caregiving career trajectory.

A wealth of evidence testifies that providing care to a loved one can be a stressful experience during the adulthood years associated with diminished mental and physical health (see Bookwala, Yee, & Schulz, 2000; Pinquart & S Ørensen, 2003; Schulz, O’Brien, Bookwala, & Fleissner, 1995, for reviews) especially among adult-child caregivers (e.g., Atienza, Stephens, & Townsend, 2002; Martire, Stephens, & Townsend, 2000; Miller, 1989; Pruchno & Kleban, 1993; Pruchno, Peters, & Burant, 1995; Raschick & Ingersoll-Dayton, 2004). Providing care to an ill parent can be particularly stressful for adult offspring who tend to occupy multiple roles in addition to that of caregiver (Stephens & Franks, 1995). The transition into the role of parent care is a common life transition during the adulthood years. Given current trends of population aging, adult children increasingly find themselves taking on the role of caring for an elderly parent (e.g., Brody, 2004; Marks, Lambert, & Choi, 2002).

While considerable evidence links the transition to parent care to negative health outcomes in adult child caregivers, much less research has focused on the impact of such a status transition on marital outcomes among these adult children. Yet, marital relationships play a significant role in psychological and physical well-being over the adult life course (e.g., Bookwala, 2005; Bookwala & Jacobs, 2003) and, more importantly, research on other status transitions (e.g., becoming a parent, when children leave home, retirement from the work force) suggests that marital relationships are altered in important ways by life transitions (e.g., Davey & Szinovacz, 2004; Twenge, Campbell, & Foster, 2003). Thus, we examined the impact of parent-care transitions on the marital quality of adult daughters and sons.

Past research has documented an association between caregiving demands and marital quality. Although most of these studies have focused on spouse caregivers (e.g., Bookwala & Schulz, 2000; Chadiha, Rafferty, & Pickard, 2003; Williamson & Shaffer, 2001), a few studies have examined the association between caregiving responsibilities and marital variables among adult-child caregivers. Stephens and Franks (1995) found that caregiving daughters and daughters-in-law who occupied multiple roles (including those of wife) reported considerable spill-over between the role of caregiver to a parent and the role of wife, with the experiences and expectations of the parent care role reported to affect the quality of the experiences in the wife role and vice versa. Martire, Stephens, and Franks (1997) subsequently reported that feelings of adequacy in the caregiver role were associated with greater marital satisfaction among these caregiving daughters/daughters-in-law. Suitor and
Pillemer (1994) reported that more than one-third of caregiving daughters and daughters-in-law reported some change (higher or lower) in their marital satisfaction during a one-year panel study of women caring for parents with dementia; these changes, in turn, were associated with respondents’ husbands’ reactions to their wives’ parent caregiving efforts. More recently, Bethea (2002) found that after a frail older parent relocates into the home of adult off-spring, there is a decline in satisfaction with communication and overall marital satisfaction experienced by these adult offspring who were married for at least 25 years.

While most research on adult-child caregivers has been cross-sectional, a few studies have used prospective research designs to examine the impact of transitioning into the parent-care role (e.g., Amirkhanyan & Wolf, 2006; Lawton, Moss, Hoffman, & Perkinson, 2000; Marks et al., 2002; Seltzer & Li, 1996; Skaff, Pearlin, & Mullan, 1996). By and large, these studies have focused on the health impact of such transitions. Although the focus on describing the long-term health effects of parent-care transitions is clearly valuable, studies with this focus are somewhat limited inasmuch as caregiving transitions also may bring about changes in other life domains such as one’s marriage that, in turn, may impact health outcomes.

The present study used a prospective design to examine the differential impact of the transition to parental care on the quality of marital relationships of adult women and men at various stages in the parent-care caregiving career trajectory. Gender differences were of interest in this study because, in general, women experience more stress and worse outcomes related to the caregiving role than do men (see Yee & Schulz, 2000 for a review). Because prospective designs allow pre- and post-transition comparisons of caregivers’ well-being, they are vital for understanding more fully the causal effects of caring for a parent on adult children’s outcomes. In addition, comparisons across time of individuals who undergo a transition to parent care either recently or distally with those who do not become caregivers as well as those who are former caregivers to an ill parent are lacking in the literature. Such comparisons are valuable because they can provide perhaps the clearest understanding of the short- and long-term marital impact of entering the parent care role. In the present study, we used longitudinal data from the National Survey of Families and Households (NSFH; Sweet & Bumpass, 2002) to compare four groups of adult women and men (recent caregivers, veteran caregivers, former caregivers, and noncaregivers) on marital quality. Three measures of marital quality were examined, two that assessed participants’ direct marital experiences (level of disagreement and global happiness in the marriage) and one that represented participants’ reflections on the importance and value of remaining in the marriage by asking them to estimate the expected impact on their life quality (i.e., the extent to which it would diminish or improve) if they were to become separated from their spouse (subsequently referred to as participants’ expected quality of life [EQOL] if marital separation were to occur). Lower marital disagreement, greater marital happiness, and estimates of worse EQOL if separated from the spouse represented better marital quality.

Method

Participants

Eligible respondents from the three-wave US National Survey of Families and Households (NSFH; Sweet & Bumpass, 2002) included adults aged 30 years and older who were not caring for a parent or parent-in-law at baseline (T1; 1987-1988), were married and remained in the same marriage throughout the study, continued to participate in the NSFH during the second wave (T2; 1992-1994) and third wave (T3; 2001-2002), were not providing care to a co-residing family member for the length of the NSFH, and had no missing data on the study variables. Parent-care status at T2 and T3 was determined by a 2-step selection procedure: respondents who indicated at T2 and/or T3 that they provided care to an ill or disabled relative who was not living in their household were selected first, and then, among these respondents, those that indicated that the person they provided care for was a parent or parent-in-law were selected.

We identified four groups of adult offspring that varied in their experiences of parent-care transitions: those who transitioned late into the parent care role over the course of the NSFH (between T2 and T3) or “recent caregivers”; those who transitioned early into the parent care role (between T1 and T2) and remained in that role at T3 (“veteran caregivers”); those who transitioned into (at T2) and out of (at T3) the caregiving role or “former caregivers”; and those who did not transition into the parent-care role over the duration of the NSFH (“noncaregiver controls”). Our final sample consisted of 905 participants: 115 recent caregivers, 57 veteran caregivers, 99 former caregivers, and 634 noncaregiver controls. The sample had a mean age of 42.8 years (SD=10.0) and included an approximately even number of women and men (50.6% female, N=458). A total of 89.2% of the sample (N=807) self-identified their ethnicity to be Caucasian and 88.8% (n=804) had completed high school.

Measures

Marital happiness. Level of marital happiness was assessed using an 8-item measure during the second and third wave of the NSFH. Respondents indicated their level of happiness (1=very unhappy to 7=very happy) on
eight dimensions of their relationship with the spouse (e.g., understanding received from spouse, the amount of time spent with spouse, sexual relationship, the work spouse does around the house). Scores on the marital happiness items were summed to create a measure of marital happiness such that higher scores represented greater marital happiness (range=8-56). We obtained a Cronbach’s alpha of .89 at T2 and T3 of the NSFH. Means on marital happiness for the sample were 44.2 (SD=9.1) at T2 and 42.0 (SD=7.6) at T3.

**Marital disagreement.** Level of marital disagreement was assessed during each wave of the NSFH using a 6-item measure. Items described various areas of disagreements with the spouse (e.g., regarding household tasks, spending time together, sexual relations). The NSFH asked respondents how often in the previous year they had had open disagreements with their spouse in each of the listed areas. A 6-point response scale was used for these items (1=never to 6=almost every day). Scores on the disagreement items were summed to create a composite of marital disagreement at each wave; higher scores represented greater disagreement with the spouse (range=6-36). We obtained Cronbach’s alphas for this measure ranging from .74 to .78 at the three NSFH waves. Means for the entire sample on marital disagreement at T1, T2, and T3 were 10.4 (SD=3.9), 10.7 (SD=4.1), and 8.4 (SD=3.4), respectively.

**Expected impact on quality of life if marital separation occurred.** The NSFH respondents were asked to consider how their lives would transform if they were to experience marital separation. They responded to eight items that assessed the change they expected to experience in different life domains (e.g., standard of living, job opportunities, friendships) using a 5-point scale ranging from 1=much worse to 5=much better. Scores on the expected quality of life items (EQOL) were summed such that higher scores represented an expected improvement in life quality upon marital separation (range=5-40); thus, lower scores, which indicated that participants expected their lives to change for the worse if separated from their spouse, reflected better marital quality. We obtained Cronbach’s alphas for this EQOL measure ranging from .73 to .79 at the three NSFH waves. Means on EQOL for the sample were 13.1 (SD=3.7), 13.4 (SD=3.4), and 11.5 (SD=3.4) at T1, T2, and T3, respectively.

**Results**

Correlational analyses indicated that the three marital quality indicators showed modest and significant stability over time. Assessments of marital happiness between T2 and T3 was correlated at .44 (p<.001), marital disagreement assessments were correlated at between .41 and .48 (p<.001) across the three NSFH waves, and EQOL if separated was correlated at the three data points from .31 to .46 (p<.001). Within and across study waves, greater marital happiness was associated with lower marital disagreement (range of r=-.19 to -.31, p<.001) and expectations of worse EQOL if marital separation were to occur (range of r=-.19 to -.32, p<.001); higher marital disagreement was correlated significantly with expected improvements in EQOL if marital separation were to occur (range of r=.13 to .35, p<.001).

Next, we performed separate 3-way mixed-MANCOVAs to compare the four parent-care transition groups (recent caregivers, veteran caregivers, former caregivers, and noncaregivers; between-subjects factor) of adult women and men (caregiver gender; between-subjects factor) over time (within-subjects factor) on marital happiness, marital disagreement, and EQOL if marital separation were to occur. In each analysis, respondents’ age, ethnicity, education, and number of children were used as statistical covariates. The means obtained for non-caregivers, recent caregivers, veteran caregivers, and former caregivers on the three marital quality indicators across NSFH study waves are presented in Table 1. Of primary interest to our study, we found a significant main effect for caregiving-transition group on marital happiness (F[3,893]=2.76, p<.05). LSD Post-hoc tests indicated that veteran caregivers reported significantly less marital happiness than recent caregivers (Ms=40.9 vs. 44.0, respectively). We also obtained a significant caregiving-transition group X gender interaction for EQOL if marital separation were to occur (F[3,893]=2.77, p<.05). Follow-up simple effects tests indicated that among recent and veteran caregivers, women expected their lives to be significantly more negatively impacted if marital separation were to occur than did men (see Figure 1). A similar but much smaller gender difference was observed among non-caregivers, with a partial η²=.01 (compared to .12 for recent caregivers and .24 for veteran caregivers). We found no significant differences by gender on EQOL among former caregivers.

Other interesting effects we obtained included a significant main effect for time on all three marital quality indicators: marital happiness (F[1,893]=14.58, p<.001), marital disagreement (F[2,892]=4.18, p<.05), and EQOL if marital separation were to occur (F[2,892]=3.26, p<.05). Although respondents reported lower marital happiness over time, they also reported lower marital disagreement and expected their EQOL to diminish if they were to become separated from their spouse. We also found a main effect for gender on the marital disagreement measure (F[1,893]=5.26, p<.05) with women reporting less marital disagreement than men (Ms=9.7 vs. 10.3); likewise women evaluated their EQOL as worse if marital separation were to occur compared to their male counterparts (Ms=12.1 vs. 13.4; (F[1,893]=27.78, p<.001). No 2-way interaction of time X gender or 3-way interaction of time X gender X caregiving-transition group was obtained.
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† not assessed at T1; EQOL = expected quality of life; a significant main effect for CG-group, b significant CG-group X gender interaction effect, p < .05.

Figure 1. Gender Differences by Caregiving-Transition Group for EQOL upon Marital Separation

Discussion

Our study examined differences over time in the marital quality of women and men with different parent-care transition experiences that participated in the NSFH conducted in the US. Specifically, we compared adults that participated in the NSFH, all of whom were non-caregivers at baseline, on three indicators of marital quality (marital happiness, marital disagreement, and expected quality of life [EQOL] if marital separation were to occur) based on their experience of transitioning into the parent-care role over the course of the 3-wave NSFH (recent caregivers, veteran caregivers, former caregivers, and non-caregivers). We found that, although all caregiving-transition groups had similar trajectories for marital quality over time, interesting differences emerged on marital happiness and EQOL if marital separation were to occur. First, we found that length of caregiving played an important role in marital happiness. In particular, we found that veteran caregivers reported significantly lower marital happiness than recent caregivers. These findings conform to the wear-and-tear hypothesis of caregiving which states that longer-lasting stressors can have pile-up or cascading effects (Olson et al., 1983). Although longitudinal support for the wear-and-tear hypothesis on caregivers’ health has been equivocal (Lawton et al., 2000), it appears that marital happiness may be undermined among those who have provided parent-care for an extended period of time compared to those who have more recently transitioned into
the parent-care role. Our findings build upon past research on parent-care demands and marital relationships that has documented negative spill-over effects between the role of caregiver to a parent or parent-in-law and the role of wife among caregiving daughters (Stephens & Franks, 1995) and that marital satisfaction can undergo changes over a one-year period among caregiving daughters and daughters-in-law (Suitor & Pillemer, 1994). Past research also has found marital satisfaction to be more vulnerable to parent-care demands when the care-receiving parent moves into the home of the adult-child (Betha, 2002). Our results indicate that marital quality may be undermined even among adult-child caregivers who do not live with their care-receiving parent if they have been providing care for a prolonged period.

Second, we found that gender moderates the association between caregiving-transition group and EQOL if marital separation were to occur. Compared to their female counterparts, men in the recent and veteran caregiver groups expected their quality of life to be significantly improved if they were to become separated from their spouse. Although the same pattern was observed among non-caregivers, the magnitude of the effect was much smaller; no gender differences existed on former caregivers’ evaluations of EQOL in the event of marital separation. These findings indicate that women currently in the parent-care role may feel more dependent on their spouses for maintaining their quality of life relative to men in the parent-care role and thus, may expect to be worse off than men in the event of marital separation. One possible explanation for this trend may be that women caregivers are less likely to receive social support in their caregiving role compared to men caregivers (Miller & Guo, 2000) and thus, may rely more on their spouse for their emotional and instrumental needs. Another explanation is that women who are in the caregiving role tend to be less likely to be involved in the paid work force than women who are not providing care (Lee & Gromotnev, 2007) and thus, married women caregivers may depend more than do men caregivers on their spouses for a stable quality of life. Indeed, being married for women caregivers appears to be related to better financial status (Brody et al., 1995).

It is important to note, however, that we found no differences among the four caregiving-transition groups overall on marital disagreement or expected quality of life changes if marital separation were to occur. Even the significant effect for caregiving-transition group in the case of marital happiness indicated that those with prolonged occupation of the parent-care role (i.e., veteran caregivers) were no less happy than those who had exited that role (former caregivers) or those who had never experienced a parent-care transition. In addition, those who were new to the parent-care role (recent caregivers) were just as happy in their marriage as former caregivers and non-caregivers. This suggests that any negative impact of parent-care transitions on adult children’s marriages may be minimal and temporary. Our results are important given the methodological strengths of the NSFH—the prospective design, the follow-up of participants over an extended period of time, the use of a nationally representative US sample that started out as non-caregiving adults at baseline, a comparison of recent, veteran, and former caregivers, and the inclusion of a non-caregiver control group. These characteristics enable us to identify more clearly the immediate and long-term impact of transitioning into and/or out of the parent care role on adult children’s marriages. It is important to point out, however, that because the NSFH design included three waves of data with several years between data collection points, information on caregiving-related experiences that may have occurred during the time lapse between any two waves is not available. More data collection points at shorter intervals would offer even more information on the marital effects of parent-care transitions. Nevertheless, our study makes important contributions by documenting the impact of parent-care transitions on adult men and women’s marital relationships.

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**Address for Correspondence**

Correspondence relating to this paper can be sent to Jamila Bookwala, Department of Psychology, Lafayette College, Easton, PA 18042, USA; bookwalj@lafayette.edu.

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Adult attachment style and the construction of anger scripts

Marie Louise Caltabiano
James Cook University

Joanne Maver
James Cook University

Abstract

This study sought to determine whether anger scripts are constructed in relation to the affect regulation strategies underlying one’s adult attachment style. Anger is motivated by both positive and negative goals, and can therefore be expressed in both functional and dysfunctional ways. Of interest in this study were individual differences in the construction of functional and dysfunctional anger scripts. The subjects for the study were 55 (13 male and 42 female) university students. A lexical decision task was used to measure participant reaction times to functional and dysfunctional anger words, following relational transgression primes. The lexical decision task was constructed according to a 2x2x4 mixed factorial design defined by attachment style (secure, insecure), prime word (transgression, non-transgression) and target word (functional, dysfunctional, control, non-word). Results indicate that relational transgression primes facilitate identification of functional and dysfunctional anger words, with insecure adults holding an overall quicker reaction time. Avoidant participants did not show a contingency effect for only dysfunctional targets. Both males and females held scripts comprising relational transgressions and anger. The main conclusion from this study is that relational transgressions and anger are projected as an if-then contingency, thereby forming a script.

Close relationships can foster a range of emotions. Script theory argues that there are distinct relational elicitors that result in the expression of either positive or negative emotions, and that these are cognitively structured as an interpersonal script (Andrew & McMullen, 2000; Fehr & Harasymchuk, 2005). The interpersonal script holds an ‘if-then’ contingency, whereby ‘if’ projects an antecedent behaviour and ‘then’ reflects a corresponding emotional response (Baldwin, Baccus, & Fitzsimons, 2004). More specifically, the interpersonal script contains expectations about what behaviours tend to be followed by what responses, and therefore acts as a knowledge base constructed of patterns of interpersonal relating.

One class of contingencies that is currently receiving a considerable amount of attention within relationship research is that of anger scripts (Fehr & Harasymchuk, 2005; Kuppens, Van Mechelen, & Meulders, 2004; Weber, 2004). The script contingencies that people establish for anger are indeed complex, as there are numerous external elicitors, and therefore many reasons for why people choose to feel angry. Recognising the situational contexts that act as the antecedent events to the expression of anger is important within relationship research and can inform interpersonal therapy considering the prevalence of violence and abuse within today’s society.

Anger is typically the emotional reaction to a perceived relational transgression (Izard and Kobak, 1991). Within the context of close relationships, Feeney (2005) revealed the relationship rules of supportiveness, loyalty/fidelity, openness and trust as being the most important. Violation of these rules results in anger, with the transgressor being perceived as prioritising their own needs over those of the relationship.

To uncover the script contingencies between negative relational events and anger, researchers typically ask participants to categorise what they believe are appropriate causes of anger and appropriate anger-related actions via interview or self-report measures (Feeney, 2005; Fehr, Baldwin, Collins, Patterson, & Benditt 1999; Mikulincer & Shaver, 2005; Weber, 2004). For instance, Fehr et al. (1999) found that threats such as the betrayal of trust and personal criticism were anger-provoking instigators, whereby women more so than men believed anger was the most appropriate response. Similarly, Weber (2004) found a strong contingency for criticism and anger-related responses of hostility and resentment. Such studies highlight the existence of ‘if-then’ contingencies composing negative relational events and anger responses. However, as anger is widely acknowledged as a socially unacceptable emotion, anger scripts generated through interview and self-report methodologies are likely to be influenced by participant self-preservation response tendencies. It can therefore be argued that the script analyses of anger uncovered within relationship research (Mikulincer & Shaver, 2005; Weber, 2004) provide an incomplete account of the cognitive representation of the elicitors of anger, and the sequencing of, or contingencies between negative relational events and anger, which may be activated using the experimental approach. Furthermore, the research has often not differentiated between individual differences in the expression of anger.

Anger towards negative relational events can be expressed in both functional and dysfunctional ways (Mikulincer & Shaver, 2005). Functional anger is based on constructive goals, whereby an individual will express their needs in a controlled fashion without intending to destroy the relationship or hurt their partner.
Dysfunctional anger has underlying destructive goals that promote continuing resentment, the need for revenge and the expression of animosity and hostility. The distinction between functional and dysfunctional anger response tendencies has not yet been made with regard to script analysis, and it can be argued that researchers interested in this area have too readily defined anger as a simple monolithic response. Instead, it should be expected that anger scripts vary along a continuum, involving both constructive and destructive contingencies, and that the tendency to compose particular contingencies varies accordingly among individuals.

The attachment framework has proved to be useful in understanding individual differences in affect regulation to a threatening event (Feeney, 2005; Mikulincer & Shaver, 2005). Attachment theory proposes that there are different attachment-related strategies in affect regulation, and that these strategies are the result of response patterns developed from interactions with significant others throughout the course of the lifespan. Response patterns essentially define the attachment styles of secure, anxious and avoidant individuals (Feeney, Noller, & Hanrahan, 1994). Attachment-related strategies of affect regulation have been divided into two distinct types termed security-based strategies and secondary-attachment strategies (Mikulincer & Shaver, 2005). Persons with a secure attachment generally employ security-based strategies which project a sense of trust in others’ goodwill, and of personal efficacy (Mikulincer, Shaver, & Pereg, 2003). Secondary-attachment strategies involve hyper-activating strategies (controlling behaviour, seeking partner protection) and deactivating strategies (not seeking closeness). Hyperactivating and deactivating strategies are generally characteristic of anxious and avoidant attachment styles (Mikulincer et al., 2003).

The patterns of affect regulation that define the attachment styles are cognitively stored as a relational schema for interpreting and responding to social information. The relational schema is composed of a self-schema and schema for others, which are organised within a variety of relational scripts. Relational scripts are extremely diverse and are found to exist within a number of domains. Anger scripts are just one of many relational scripts organised within the relational schema. Although there may be gender differences in the outward expression of anger or aggression (Fisher & Rodriguez Mosquera, 2001), fear of rejection elicits anger in both genders (Lafontaine & Lussier, 2005), with men and women being equally likely to construct anger scripts (Murray, Griffin, Rose & Bellavia, 2006).

As the affect regulation strategies underlying the relational schema differ according to each attachment type, the ‘if-then’ contingencies of relational scripts are uniquely constructed (Sakellaropoulo & Baldwin, 2006). Researchers interested in the scripts that are stored within the relational schema have implemented the spreading activation paradigm. Through employing priming techniques, studies have highlighted that one aspect of the relational script activates another related aspect, thereby forming a contingency effect (Sakellaropoulo & Baldwin, 2006). Baldwin, Fehr, Keendian, Seidel, and Thomson (1993) were the first to examine the if-then contingencies of attachment. Through the use of cognitive methodology, Baldwin et al. (1993) investigated the interpersonal expectations underlying subjects’ attachment style within the domains of trust, closeness and dependency. A lexical decision task was used to test whether individuals would have a quicker reaction time for identifying a target word that was congruent with the interpersonal expectations underlying their relational script. The results supported the hypothesis as securely attached individuals had a quicker reaction time for positive targets and those with an insecure attachment had a quicker reaction time for negative target words. This study initiated the investigation into the ‘if-then’ contingencies underlying attachment styles and essentially provided evidence of individual differences in script formation.

The current study sought to determine whether anger scripts are constructed in relation to the affect regulation strategies underlying one’s adult attachment style. Research which has used self-report methodology has found that higher levels of trait anger are associated with both insecure attachment (Troisi & D’Argenio, 2004) and avoidant attachment (Muris et al., 2003). Further, in an observational study of interaction patterns of couples where the women thought they were to engage in an anxiety-provoking situation, both males and females with an avoidant attachment displayed anger. For avoidant males this occurred when support was sought from them, while for avoidant females anger was displayed when highly distressed and support was not received (Rholes, Simpson & Orina, 1999). Other research has found support for anger mediating between insecure attachment and intimate violence (Lafontaine & Lussier, 2005).

In the present study it was expected that those with secure attachment would have anger scripts that embody functional anger, while those employing deactivating and hyper-activating strategies (insecure attachment) would have anger scripts that embody dysfunctional anger. The ‘if-then’ contingencies of interest to this study were relational transgressions surrounding support, loyalty/fidelity, openness and trust (Feeney, 2005) and the affective responses of functional and dysfunctional anger as assessed using a lexical decision task. The specific hypotheses were (1) reaction times (RTs) for functional and dysfunctional target words will be quicker when following relational transgression prime words than neutral prime words; (2) those with insecure attachment will have faster reaction times to a relationship transgression prime; (3) secure individuals will show a greater contingency effect when a transgression prime is followed by a functional anger target; (4) there will be a greater contingency effect for insecure individuals (anxious, avoidant) when a transgression prime is followed by a dysfunctional anger target; (5) males and females construct anger scripts equally.
Method

Participants

Fifty-five (13 male and 42 female) Psychology students at James Cook University were the participants for the study. The age of participants ranged from 17 to 65 years, with a mean of 29 years, and a median of 23 years. Of the participants, 64% were currently engaged in a relationship. With regard to attachment style, 31 participants identified as secure, 20 participants identified as avoidant, and 4 participants identified as anxious. Therefore, overall there were 31 securely attached participants and 24 insecurely attached participants. The repeated measures facet of the design ensured that with a sample of 55 participants there was sufficient power to detect within subjects effects.

Apparatus/Materials

The lexical decision task was programmed using PsyScope 1.2.5 software, with stimuli displayed on a Macintosh G3 computer. Responses were collected via a Carnegie Mellon Button Box which allows millisecond accuracy in timing participant responses, and also provides a count of correct and incorrect responses. The instructions and stimuli were presented in the middle of the monitor and were in black text on a white background. Stimulus items appeared in a size 24 Courier font. By using a light metre the level of brightness and contrast of the computer monitor was set somewhat low.

The Attachment Style Questionnaire (ASQ; Feeney, Noller & Hanrahan, 1994) was administered to determine attachment style. The ASQ has good validity and reliability, with research suggesting it is also suitable for young adults who have had little experience in romantic relationships. The ASQ is comprised of five scales (confidence, discomfort with closeness, need for approval, preoccupation with relationships, relationships as secondary), which are embedded within a total of 40 questions.

The experimental stimuli consisted of 72 transgression primes (e.g. infidelity, neglect) and 72 non-transgression prime words (e.g. building, costume), and these were matched for word frequency. Target words consisted of 24 functional words (e.g. discuss, compromise, reconcile, listen), 24 dysfunctional words (e.g. quarrel, retaliate, attack, spiteful), 24 control words and 72 non-words. Functional and dysfunctional words were arrived at from a pilot study (using a different sample) assessing ratings of anger responses (representing these two categories) to scenarios depicting a relational transgression surrounding support, loyalty, openness or trust. The functional, dysfunctional and control words were matched for word frequency. The non-words and control words acted as distracter items and were discarded from final analyses. Within the task 48 of the relational transgression primes and 48 of the non-transgression prime words were presented randomly paired with a functional, dysfunctional, control and non-word target. The remaining 48 prime words were randomly paired with a non-word, however these acted as filler trials and were later discarded. Therefore, the experiment consisted of 144 trials with 24 target words per condition being randomly paired with either a transgression or non-transgression prime to make a total of 96 experimental trials that were of interest.

Counterbalancing was performed to ensure that no subject saw the same item in more than one condition. As there were 144 item sets, these were equally distributed into four counterbalanced lists each consisting of 12 groups of 12 item pairs. Each participant was randomly assigned to one of the four lists; in that way each list was presented to 15 of the sixty subjects tested (data from 5 were later discarded due to problems with English fluency). Within the computer tasks the items from the list were randomly paired by the PsyScope program for each participant.

Procedure

The participants received written instructions regarding the task procedures via the computer monitor prior to the task commencing. The instructions informed participants that a distracter word (the prime word) would be briefly displayed in the middle of the computer screen and that when this word disappeared it would be immediately followed by another word, which would be either a real word or a non-word. Participants were asked to respond by pressing the ‘yes’ button on the response box for real word and the ‘no’ button if it was not a real word. Participants initiated the task by pressing any button on the response box. Eight practice trials were presented prior to running the experiment. The prime and target stimuli in the practice trials were different from those in the experimental trials.

On each trail the prime stimulus appeared for 500ms. After the presentation of the prime stimulus there was a 500ms pause, which was then followed by a target word. The target word was presented for 500ms followed by an intermittent time space of 1000ms, giving participants a total of 1500ms to respond from the onset of each target stimulus. This sequence was repeated until they had completed all 144 trials (approximately 10 min). After completion of the lexical decision task, the experimenter provided participants with the attachment style questionnaire to complete. As adult attachment is a relatively stable trait, it is unlikely that completing the lexical decision task prior to administration of the attachment scale would influence obtained attachment scores.
Results

As predicted by hypothesis 1, reaction times for functional and dysfunctional target words were quicker when following relational transgression prime words (M= 657.03, SD= 134.57) than neutral prime words (M= 679.50, SD= 133.10) \[F(1,53) = 11.11, p < .05, \eta^2 = .173\].

In support of hypothesis 2, there was a significant main effect for attachment type \(F (1,53) = 6.65, p < .05, \eta^2 = .112\), whereby the insecure attachment group (M= 626.49, SD= 149.52) had on average an overall faster reaction time of 83.56ms when compared to the secure attachment group (M=710.10, SD= 108.66). There was no significant latency difference between target types of functional and dysfunctional anger \(F(1,53) = .011, p > .05\).

In order to test hypotheses 3 and 4 a 3 (secure, anxious, avoidant) x 2 (prime) x 2 (target) ANOVA was conducted with prime and target words as within-subjects repeated factors and attachment as a between-subjects factor. As illustrated in Figure 1, those with an anxious attachment style had significantly quicker reaction times for functional (M= 575.28 , SD= 77.65) and dysfunctional (M= 595.50 , SD= 91.14) target items in both the transgression and neutral priming conditions when compared to the secure group which held a consistent reaction time for functional (M= 709.72 , SD= 116.66 ) and dysfunctional (M= 710.36, SD= 100.65) target items across both priming conditions, thereby not supporting hypotheses 3 and 4. With regards to the difference between the secure and avoidant attachment groups, it can be seen that the avoidant attachment group held a significantly quicker reaction time for functional (M= 638.21, SD= 148.61) and dysfunctional (M= 631.20 SD= 170.40) target items in both the transgression and neutral priming conditions.

Discussion

This study found evidence for a script contingency (Fehr & Harasymchuk, 2005; Kuppens et al., 2004; Weber, 2004) between relational transgressions and anger. Although there were attachment style differences in contingency, there was no support for the role of attachment based affect regulation strategies within anger scripts.
Insecure participants showed a stronger contingency effect between transgressions and anger, suggesting a greater tendency for these adults to construct anger scripts. The faster reaction times for anxious and avoidant persons to both primes seems to indicate an underlying emotional reactivity. These findings are congruent with the attachment literature which argues that insecure adults are generally hyper-vigilant towards signs of threat (Mikuliner et al., 2003), and are consistent with research findings that insecure and avoidant attachment are associated with higher levels of trait anger (Muris et al., 2003; Rholes, Simpson & Orina, 1999; Troisi & D'Argenio, 2004). The present findings also parallel and add to those of Baldwin et al., (1993) that insecurely attached persons have faster reaction times for negative target words consistent with interpersonal expectations relating to trust, closeness and dependency underlying attachment style.

Although the contingency effect was seen to differ between the attachment styles, the expectations surrounding the construction of functional and dysfunctional anger scripts was not fulfilled. Secure individuals had slightly faster reaction times to a transgression than a neutral prime, though they did not distinguish between functional and dysfunctional anger. These findings may be explained by a potential lack of discrimination between functional and dysfunctional anger target words. However, given the rigorous procedure used to arrive at the list of functional/dysfunctional target words, it is unlikely that this finding is due to measurement issues. As the results indicate that the nature of anger scripts is not dependent on attachment style, it can be tentatively suggested that anger scripts are cognitively stored as an ‘if-then’ contingency, with anger as a monolithic response. Nevertheless, the present findings require replication.

There were no differences between genders in the perceptual readiness for functional or dysfunctional anger scripts. Consistent with Murray et al. (2006) both men and women access if-then contingencies composing relational transgressions and anger, and additionally show no preference towards functional or dysfunctional dimensions of anger. As women were over-represented in our sample, gender differences may have occurred if a greater percentage of men had participated. Indeed, there has been dispute regarding gender differences in the construction of anger responses, as studies have revealed that while physical aggression is more common among men (Fisher & Rodriguez Mosquera, 2001), women are more likely to express anger (Fehr et al., 1999). Observational studies (Rholes et al., 1999) and self-report methods (Feene y, 2005; Fehr et al., 1999; Weber, 2004) have provided evidence that there is a behavioural contingency between threatening events and affective responses of anger, enabling researchers to generalise findings to real life threatening contexts. Evidence of if-then contingencies uncovered through cognitive methods such as used in the present study, provide insight into the internal dialogue comprising types of thought.

Within the therapeutic setting of couple counselling the identification of thought patterns involving anger scripts could assist in understanding why partners repeatedly elicit behaviours such as violence. For instance, a contingency between disrespect and aggression could exist, whereby one partner in a relationship believes that disrespectful actions of the other should be followed by aggressive responses. Therefore, the anger script would involve a contingency such as “If my partner disrespects me, then I will hit her”. Identifying anger scripts such as this can help clarify the antecedent events that elicit aggression, and through this assist couples in anger management.

The present findings also provide insight into the ‘clash’ that relationship partners can unfortunately encounter. For instance, if an individual holding a secure attachment has an insecure partner, discrepancies may arise between partners with regards to the type of relational events that should elicit anger. As insecure adults were found to access anger scripts at a greater rate, it can be argued that there may be a greater tendency for insecure adults to elicit anger towards partners who are secure in attachment. For insecure couples, anger and conflict appear to be the most likely response to relational transgressions. The absence of a transgression-anger contingency among adults with a secure attachment indicates these adults either ignore minor transgressions, or pair the transgression with an alternative response such as hurt or surprise. The recognition of these differences within the counselling environment could assist in partners becoming aware of the relational discrepancies that are preventing cohesion. For instance, each partner could be asked to identify what actions they believe should be followed by an anger response. If discrepancies arise, this could provide a foundation for discussion and resolution, whereby it would be acknowledged that the partners hold opposing perspectives and expectations of one another. Identifying the relational expectations partners have of each other can prevent relational transgressions being committed, as each partner becomes aware of what the other perceives as a ‘wrongdoing’.

The main conclusion from this study is that relational transgressions and anger are projected as an ‘if-then’ contingency, thereby forming a script. The evidence of anger scripts essentially contributes to the field of script analysis, and highlights the appropriateness of cognitive methodology for conducting such research.

References


**Address for Correspondence**

Dr Marie L. Caltabiano, Senior Lecturer in the Department of Psychology, James Cook University, Cairns Campus, P.O. Box 6811, Cairns, Qld, 4870
Attachment Bonding and the Receipt of Care in the Face of Chronic Illness

Sian F. Cole (sian.cole@deakin.edu.au)
School of Psychology
Deakin University, Melbourne VIC 3125 Australia

Gery C. Karantzas (gery.karantzas@deakin.edu.au)
School of Psychology
Deakin University, Melbourne VIC 3125 Australia

Abstract

The relationship between social support and the mental health outcomes of chronic illness sufferers is regarded as complex with inconsistent findings across studies. More recently, researchers have argued that these inconsistencies may be explained by attachment theory. In this preliminary study, we explored how attachment bonds with three distinct attachment figures – parents, best friends and romantic partners influenced arthritic young adults’ seeking of care. Forty-one arthritis sufferers aged between 18 and 33 years were administered an online questionnaire which included measures of attachment and the receipt of emotional and instrumental care. Significant differences were found in young adults’ attachment avoidance and anxiety ratings, and seeking of instrumental care across parents, best friends and romantic partners. These differences were associated with differences in the frequency and type of care received by young arthritis sufferers across the three attachment figures. Furthermore, arthritis severity was associated with the receipt of care from attachment figures however this relationship was partially mediated by attachment anxiety.

To date, there exists some evidence that social support can influence both the physical and mental health outcomes of chronic illness sufferers. However, the relationship between social support and outcomes is complex and often inconsistent between studies (Wulsin, Vaillant, & Wells, 1999; Chrousos & Gold, 1992). For instance, while some studies report social support improves mental health outcomes of chronic illness sufferers (Broadhead et al., 1983) other studies suggest that the support exacerbates negative outcomes such as depression and anxiety (Badr & Acitelli, 2006). Researchers argue that these inconsistencies may be explained by assessing whether the quality of the close personal relationships between the care-recipient and their social support network influences support seeking tendencies and satisfaction around the care rendered (Maunder & Hunter, 2001). However, while some emphasis has been placed on the interpersonal nature of care recipient-caregiver relations in chronic illness contexts, most studies have been atheoretical in nature. In this paper we attempt to address this lack of theoretical integration by incorporating an attachment theory (Bowlby, 1969/1982) perspective to the study of chronic illness sufferers’ support seeking tendencies.

Attachment Theory

Attachment theory (Bowlby, 1969/1982) – a theory of human bonding, distress and emotion regulation provides a useful framework to investigate the cognitions and behaviours that shape people’s expectations regarding the seeking of support from one’s social support network. According to Bowlby, people develop different attachment styles (i.e., patterns of relationship bonding and interaction) which emerge as a result of the mental schemas they develop regarding the responsiveness and reliability of attachment figures to provide comfort and support; and people’s sense of self-worth in receiving care during times of need. These mental representations of attachment figures and of self are commonly conceptualised as two independent dimensions termed attachment avoidance and anxiety (e.g., Brennan, Clark, & Shaver, 1998). The avoidance dimension reflects the extent with which an individual will seek attachment figure proximity in order to have emotional and physical needs met. Individuals who rate low along this dimension harbour a mental representation of the attachment figure as reliably responsive to their needs and comfortable in maintaining emotional closeness. The anxiety dimension refers to whether an individual regards him or herself as worthy of receiving care and attention. Individuals who rate low along this dimension harbour a mental representation of the self as worthy of having their care needs met. Individuals characterised by either a high level of avoidance and/or anxiety are regarded as possessing a maladaptive or insecure attachment, while individuals with low avoidance and anxiety are deemed securely attached.

Internal Working Models of Attachment and Support Seeking

Two fundamental components of attachment mental models that are thought to influence support seeking tendencies relate to: (1) the expectations, beliefs and attitudes individuals hold about themselves and their
attachment figures, and (2) the strategies and plans associated with the elimination of distress and the achievement of comfort and security (Collins & Allard, 2001).

Abstracted from attachment memories (i.e., the bank of knowledge acquired over the course of relationships with various attachment figures) individuals develop expectations surrounding their social interactions with their respective attachment figures. Findings from experimental studies using observational methods, priming and latency response paradigms suggest that secure individuals hold more positive expectations regarding the availability and responsiveness of attachment figures compared to insecurely attached adults (Baldwin, Fehr, Keedian, Seidel, & Thomson, 1993; Mikulincer & Orbach, 1995). In particular, highly avoidant individuals hold quite pessimistic interpersonal expectations of attachment figures as unreliable, unresponsive and rejecting, while anxious individuals report expectations filled around fears of rejection coupled with a strong yearning for help and support (Florian, Mikulincer, & Bucholtz, 1995; Shaver, Schachner, & Mikulincer, 2005).

Contingent upon these attachment experiences and expectations it is argued that plans and strategies are derived and encoded as a part of internal working models as a means of regulating attachment-related social and emotional needs (Collins & Allard, 2001; Main, 1991). The seeking of social support is regarded as an important strategy in ameliorating attachment distress and maintaining a sense of security. Research into the nature of arthritis is such that arthritis is often an uncontrollable illness with foreseeable long-term disability that hampers people's physical and instrumental activities of daily living. Furthermore, many of the treatment medications administered to sufferers have inherent side effects such as increases in fatigue as well as mood state changes (Evers et al., 1997). Thus people experiencing arthritis often require support to deal with the physical distress. This notion resonates strongly with Lazarus and Folkman’s (1984) transactional model of stress-coping strategies (typical of individuals attachment styles, as past typical responses may not have resulted in distress resolution. As a result people attempt to alter their self-regulation patterns in a desperate attempt to reduce their distress. This notion resonates strongly with Lazarus and Folkman’s (1984) transactional model of stress-coping that proposes coping responses to distress represent a goodness-of-fit between the individual and the stressful environment.

However, another reason for these mixed findings may relate to the failure to consider how different attachment working models (i.e., parents versus best friends) may influence care-seeking behaviour. Baldwin, Keel, Chen, and Koh-Rangarajaoo (1996; see also Overall, Fletcher, & Friesen, 2003) suggest that people do not hold a single set of attachment working models; rather, they hold a hierarchy of models that at the higher-order level include general representations of the self and other, abstracted from the individual’s history with attachment-related figures. In contrast, relationship-specific models at the lowest levels of the hierarchy represent models that correspond to a specific relationship (e.g., relationship with current romantic partner). Simpson et al. (2002) acknowledge that little is known about the extent to which people’s different working models predict people’s support-seeking in stressful situations.

In an attempt to unravel some of these inconsistencies we applied an attachment theory framework to the study of care-seeking tendencies in the context of arthritis, a group of chronic autoimmune diseases that affect the musculoskeletal system by causing joint inflammation (Evers, Kraaimaat, Geenen, & Bijlsma, 1997). The nature of arthritis is such that arthritis is often an uncontrollable illness with foreseeable long-term disability that hampers people’s physical and instrumental activities of daily living. Furthermore, many of the treatment medications administered to sufferers have inherent side effects such as increases in fatigue as well as mood state changes (Evers et al., 1997). Thus people experiencing arthritis often require support to deal with the physical...
and emotional aspects of the illness. The context of arthritis provides a real world setting whereby the operation of the attachment system can be examined, as the changing nature of an individual’s arthritic condition is likely to activate the attachment system, particularly during instances of the illness aggravation where sufferers report threats to self esteem, a taxation of personal capabilities to deal with the illness, and psychological distress (Evers et al., 1997). Thus, in the context of chronic illness such as arthritis, the extent to which mental models guide expectations and preferences around the receipt of care has important implications for the health and well-being of the care-recipient. Moreover, this research is important in informing health professionals of the extent to which the quality of personal relationships influence the social support dynamics for chronic illness sufferers.

The aim of the study was to examine the extent to which attachment partially mediated the relationship between arthritis severity and the actual seeking of support. In so doing we tested one of the central aspects of attachment theory mental models, that these models should guide people’s seeking and receipt of social support. Furthermore, we attempted to examine whether the seeking of social support may differ as a function of attachment figure and thus aimed to investigate whether specific attachment figures would moderate the effects in care-seeking.

**Method**

**Participants**

A total of 41 young adults (11 males, 30 females) aged 18 to 33 years ($M = 22.49$ years, $SD = 2.89$ years) participated in this study. Fourteen had a clinical diagnosis of rheumatoid arthritis, 9 with fibromyalgia, another 9 with juvenile arthritis, 4 with psoriatic arthritis, 3 with systemic lupus erythematosis, and 3 with ‘other’ inflammatory arthritic conditions. The length of illness ranged from 10 months to 16 years ($M = 4.95$ years, $SD = 3.92$ years) with 70% of the participants having had an arthritic condition for less than 5 years. The participants were recruited through the Arthritis Foundations from around Australia. Fourteen participants lived at home with their parents, 14 co-resided with a romantic partner, 7 were involved in shared living arrangements with friends while 6 participants lived on their own.

**Materials & Procedure**

Information regarding participants’ background details such as gender, town and state of residence, living arrangement, education level, occupation, clinical diagnosis, length of illness, medication type, dosage and frequency was recorded. Health status was assessed using the Multidimensional Health Assessment Questionnaire (MDHAQ; Pincus, Swearingen & Wolf, 1999). The MDHAQ consists of 28 items measuring one’s ability to engage in activities of daily living (ADLs), level of pain, fatigue and personal beliefs associated with the illness. Statements regarding ADLs are rated on a four point scale ranging from 1 (without any difficulty), to 4 (unable to do). Levels of pain and fatigue associated with arthritis are rated across a series of semantic differential scales. Furthermore, nine questions regarding personal beliefs about the illness are rated along a 5 point Likert-scale ranging from 1 (strongly disagree) to 5 (strongly agree). All items can be scored to yield a total for arthritis severity with higher scores denoting greater severity. The measure has high internal consistency ($\alpha = .92$, present study).

Participants’ attachment to a romantic partner was assessed using the Experiences in Close Relationships Scale (ECR; Brennan, Clark & Shaver, 1998) and attachment to best friend and parent was measured using modified versions of the ECR. The original ECR consists of 36 items measuring the two subscales of attachment -avoidance and anxiety. Each subscale consists of 18 statements rated along a 7-point Likert scale ranging from 1 (disagree strongly) to 7 (agree strongly). Both scales have internal consistencies above .90 (Brennan et al., 1998). The modified version of the ECR consisted of 32 items (18 avoidance and 14 anxiety) with four items deleted as deemed not applicable for the assessment of peer and familial attachment relationships. The modified subscales showed acceptable internal consistency with Cronbach alphas of .93 and .83 for avoidance and anxiety respectively. As with the original version of the ECR, items were rated along a 7-point Likert scale.

Social support was assessed using the Carereceiving Questionnaire (CR-Q; Karantzas, Lawrence, & Ryan, 2005). This inventory consists of 26 items assessing an individual’s receipt of emotional and instrumental assistance. Participants are asked to rate all 26 items across a four-point scale ranging from 0 (none of the time) to 3 (all of the time) and to indicate from which member of their social support network (i.e., parent, best friend or romantic partner) they sought each item of assistance. An emotional and instrumental support seeking score is derived for each the three caregivers with Cronbach alphas across both subscales exceeding .80.

Participants were provided with an introductory letter which directed them to a URL address to complete an online questionnaire. The online survey took approximately 40 minutes to complete.
Results

The data was examined for missing values, univariate and multivariate normality, outliers, homoscedasticity and multicollinearity. No variables violated tests of normality and multicollinearity was not detected ($r_s < .80$). Two univariate within-groups ANOVAs were conducted to examine whether differences existed in young arthritic adults attachment anxiety and avoidance across multiple attachment figures. Both analyses revealed significant differences in young adults attachment anxiety ($F[2,80] = 18.10, p < .01$; partial $\eta^2 = .31$) and avoidance ($F[2,80] = 7.50, p < .01$; partial $\eta^2 = .16$) across the three attachment figures. As presented in Table 1, young arthritic adults reported significantly higher levels of attachment anxiety toward their romantic partners compared to best friends and parents while reporting significantly lower levels of attachment avoidance with their best friends compared to their romantic partners and parents.

A second set of repeated measures ANOVAs were conducted to examine differences in the seeking of emotional and instrumental care across the three attachment figures. While no significant differences were found in the receipt of emotional care, significant differences were found in young adults receipt of instrumental care between attachment figures ($F[2,80] = 7.09, p < .01$; partial $\eta^2 = .15$). As shown in Table 1, young arthritic adults sought significantly less instrumental care from their best friends compared to their romantic partners and parents.

In order to test the basic assumption of whether attachment anxiety and avoidance mediated the relationship between arthritis severity and emotional and instrumental forms of care-seeking, a series of mediation analyses were conducted. As presented in Table 2 partial mediation was found across all three attachment figures. Given the small sample size a Freedman-Schatzkin test of mediation was conducted to safeguard against Type I error inflation. Mediation tests resulted in attachment anxiety partially mediating the relationship between arthritis severity and the seeking of instrumental care from both parents and romantic partners (see Table 2). In contrast attachment anxiety mediated the relationship between severity and the seeking of emotional care from best friends. These results are further illustrated in Figures 1 to 3.

Table 1
Descriptive Statistics and Correlations of Variables in the Analyses

<table>
<thead>
<tr>
<th>Attachment Figure</th>
<th>Parent M SD</th>
<th>Best Friend M SD</th>
<th>Romantic Partner M SD</th>
</tr>
</thead>
<tbody>
<tr>
<td>Attachment Avoidance</td>
<td>3.52 1.57</td>
<td>2.72 .96</td>
<td>3.47 1.15</td>
</tr>
<tr>
<td>Attachment Anxiety</td>
<td>3.52 .97</td>
<td>3.47 1.06</td>
<td>4.28 1.15</td>
</tr>
<tr>
<td>Instrumental Care-seeking</td>
<td>4.05 2.04</td>
<td>1.05 1.61</td>
<td>3.78 1.56</td>
</tr>
<tr>
<td>Emotional Care-seeking</td>
<td>2.05 1.88</td>
<td>2.24 1.91</td>
<td>2.68 1.84</td>
</tr>
</tbody>
</table>

Note. $N = 41$. Severity = Arthritis severity; Anx = Attachment anxiety; Inst = Receipt of instrumental care; Em = Receipt of emotional care; $\alpha$ = beta weight of IV to MV (MV regressed on to IV); $\beta$ = beta weight from MV to DV controlling for IV; $\tau$ = IV to DV without MV; $\tau'$ = IV to DV with MV; Freedman-Schatzkin = significance test of $\alpha \times \beta$; LL CI = lower limit 95% confidence interval; UL CI = upper limit 95% confidence interval

Table 2
Test of Mediation on Significant Standardised Regression Paths

<table>
<thead>
<tr>
<th>Attachment Figure</th>
<th>IV</th>
<th>MV</th>
<th>DV</th>
<th>$\alpha$</th>
<th>$\beta$</th>
<th>$\tau$</th>
<th>$\tau'$</th>
<th>Freedman-Schatzkin</th>
</tr>
</thead>
<tbody>
<tr>
<td>Parent</td>
<td>Severity Anx Inst</td>
<td>.64</td>
<td>.28</td>
<td>.51</td>
<td>.38</td>
<td>5.76**</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Romantic</td>
<td>Severity Anx Inst</td>
<td>.54</td>
<td>.25</td>
<td>.52</td>
<td>.38</td>
<td>5.81**</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Best Friend</td>
<td>Severity Anx Em</td>
<td>.45</td>
<td>.23</td>
<td>.35</td>
<td>.26</td>
<td>3.81*</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Note. $N = 41$. Severity = Arthritis severity; Anx = Attachment anxiety; Inst = Receipt of instrumental care; Em = Receipt of emotional care; $\alpha$ = beta weight of IV to MV (MV regressed on to IV); $\beta$ = beta weight from MV to DV controlling for IV; $\tau$ = IV to DV without MV; $\tau'$ = IV to DV with MV; Freedman-Schatzkin = significance test of $\alpha \times \beta$; LL CI = lower limit 95% confidence interval; UL CI = upper limit 95% confidence interval

* $p < .05$. ** $p < .01$
The path coefficients across the three models were then compared to determine whether significant differences could be identified as a function of attachment figure. In order to compare the models presented in Figures 1 to 3, a multigroup invariance path analysis was conducted with attachment figure (best friend, romantic partner or parent) as the within subjects factor. A baseline unconstrained model was fitted to the data and resulted in good fit $X^2(3, N = 41) = 4.80, p > .05; \text{CFI} = .984, \text{RMSEA} = .071, \text{SRMR} = .052$. This model was then compared to a constrained invariant model to identify any significantly different path coefficients.
Discussion

As a first step in exploring the effect of different attachment figures on the social support seeking behaviours of young adult arthritis sufferers, we compared participants’ attachment avoidance and anxiety ratings across three different types of attachment figures – parents, romantic partners and best friends. This analysis provided a test of whether young adults held different mental representations for each of these diverse attachment figures and whether this in turn may affect social support seeking in dealing with arthritis. In line with previous research, our findings suggest that young adults harbour somewhat distinct mental representations of attachment for the different attachment figures (e.g., Baldwin et al., 1996; Overall et al., 2003). Young adults in the current study experienced more anxiety with romantic partners compared to parents and best friends. These findings are in line with past research with young adults’ attachment anxiety being highest in the evaluation of romantic relations (Overall et al., 2003). This finding is to be expected for at least three reasons.

Firstly, the relationships that young adults have with romantic partners are much newer compared to relationships with parents and best friends. Thus it is very likely that these young adults are still developing full-blown attachment relationships with their romantic partners. As such, they may still be developing specific mental representations of these attachment relationships and thus attachment anxiety may reflect ambivalence around the responsiveness of the attachment figure or fears of rejection. This is substantiated by the fact that the majority of young adults in the present sample had been in a romantic relationship for less than two years.

Secondly, a key developmental task for young adults is the ability to form meaningful romantic relationships. In the developmental sequence of events developmentalists such as Havighurst (1972), Levinson (1986) and Erikson (1968) argue that navigating the task of intimate romantic relationships will be a relatively unfamiliar task and with it comes many uncertainties regarding how adult romance should be negotiated which brings with it some trepidation and feelings of relational anxiety. Thirdly, emerging research in the adult literature suggests that adults with chronic illness are likely to report poorer romantic relationship functioning (Packham & Hall, 2002). Studies examining arthritic adults in later later-life have alluded to insecure attachments (particularly high levels of attachment anxiety) as consequences of chronic health issues (Druley et al., 1997). Packham and Hall (2002) found that adults with arthritis have “a high occurrence of psychological problems concerning confidence and perceived attractiveness” (p.1443) due their perceived inability to achieve their desired goals around work, study and relationships (Doeglas, et al., 2004). Thus many young adults with arthritis may have a negative view of self and this is consistent with reports suggesting a majority of young adults with arthritis experience negative self-esteem (Packham & Hall, 2002). Therefore, these complexities brought on by a condition such as arthritis are likely to contribute to the young adults’ insecure attachment style and their sense of concern and worry regarding the close relationships they have, particularly with romantic partners.

In contrast, participants reported the least attachment avoidance with best friends compared to parents and romantic partners. This data is somewhat consistent with the findings of La Guardia, Ryan, Couchman, and Deci (2000) who reported greater attachment security with best friends. These findings also indirectly support the work into attachment networks where young adults commonly report a high frequency in using peers to fulfil the attachment function of proximity maintenance (Fraley & Davis, 1997; Hazan & Zeifman, 1999; Trinke & Bartholomew, 1997). In so doing, it is seems that young adults are unlikely to feel high levels of attachment avoidance with peers given that friends commonly fulfil this primary function.

Significant differences were also found in young arthritic adults’ instrumental care-seeking across attachment figures. Participants sought significantly more instrumental assistance from parents and romantic partners compared to best friends. This finding adds to the evidence suggesting that both parents and romantic partners are important sources of support, particularly during periods of distress. For instance, research examining the support provided by romantic partners has shown that romantic partners are relied on heavily as sources of assistance and care (e.g., Feeney & Collins, 2001). Moreover, parents remain as important sources of support particularly during challenging developmental periods or chronically stressful encounters (Doherty & Feeney, 2004; Mikulincer & Shaver, 2007; Weiss, 1993). In further support of the current study finding Ognibene and
Collins (1998) found that adults were more likely to turn to their family and romantic partners (than peers) for support when a major stress such as a serious illness occurs.

Moreover and in line with our expectations, attachment mental models were found to partially mediate the relationship between arthritis severity and care-seeking. However, these mediation effects were only found for attachment anxiety and not avoidance. The non-significance of attachment avoidance was not surprising and is supported by past findings with researchers often finding that avoidance does not predict care-seeking (e.g., Fraley & Shaver, 1998; Simpson et al., 2002). Mikulincer and Shaver (2007) argue that the mental schemas of avoidant individuals are unlikely to contain highly accessible information regarding the seeking of support. Rather internal working models are dominated by cognitions around excessive self-reliance and a lack of confidence in depending on others. As a result it could be argued that strategies and plans around support seeking as a means of reducing threat are irrelevant for avoidant people rather than inversely related.

Anxiety was found to mediate the relationship between severity when instrumental care was sought from friends and emotional care from romantic partners. However, attachment anxiety did not predict men’s support seeking tendencies nor did Collins and Feeney (2000) find anxiety predicted romantic partners’ support seeking. However as Simpson et al. noted a number of these studies investigated care-seeking tendencies in the context of transient stress. The findings of the present study deal with an enduring stress and under such chronic conditions it is argued that care-seeking behaviour should vary as a function of attachment style. In support of the notion that distress chronicity influences highly anxious people’s calls for assistance, Mikulincer and Florian’s (1995) study on support seeking during Israeli missile attacks found that anxious individuals reported the use of support-seeking as a means of ameliorating distress. Thus it may be the nature of arthritis as a chronic stressor that influences highly anxious young adults to seek care from members of their attachment network.

The robust nature of this partial mediation across all three attachment figures also lends support to Collins and Allard’s (2001) argument that attachment mental models comprise not only of expectations, beliefs and attitudes regarding self worth and attachment figure responsiveness, but strategies and plans about the elimination of distress and the achievement of comfort and security. However, the fact that anxiety mediated the relationship between severity and instrumental care for parents and partners and emotional care for friends requires some further brief commentary. This difference may be best explained by role theory and the attachment networks literature. According to Bee and Bjorklund (2004) various members of our social network maintain specific social roles as a means of serving the diverse needs of developing individuals. Therefore, it is argued that friends fulfil different socio-emotional functions for young adults compared to parents and romantic partners. For example, friends are seen as people to “hang out with” and to provide emotional comfort and support (Doherty & Feeney, 2004) whereas parents and romantic partners while offering emotional support, are consistently called upon for instrumental support (Florian et al., 1995; Larose & Bernier, 2001). As noted previously, peers are often called upon to fulfil the attachment function of proximity maintenance (Fraley & Davis, 1997; Trinke & Bartholomew, 1997) while parents and romantic partners are more desired to fulfil the functions of safe haven and secure base (Trinke & Bartholomew, 1997). Thus in the present study, highly anxious arthritis suffers’ calls for emotional support from friends and instrumental support from parents and partners may reflect social and developmental norms around the roles associated with distinct members of one’s support network. For instance, while highly anxious individuals may deem it inappropriate to ask for instrumental support from a friend, their function as a source of emotional support and social affiliation may motivate these individuals to seek this form of support from them. Nevertheless, these arguments are somewhat speculative at this point and require further empirical evidence to validate these post-hoc assumptions.

There were a number of limitations to the present study. The small sample size was thought to influence the statistical power of findings and mitigated against testing for gender differences. Gender differences have been found at times with respect to the links between attachment and support seeking (see Fraley & Shaver, 1998; Simpson et al., 1992, 2002). Furthermore, while we discuss some of our findings in terms of the attachment networks literature we were unable to determine the extent which people’s attachment networks extended beyond the three figures of interest in this study and nor could we make any claims about the extent to which arthritis sufferers used their attachment figures to fulfil the various attachment functions. Therefore while this current study examined actual care-seeking from three attachment figures, how these findings are associated with attachment functions remains unanswered. Extensions to the present study that address these limitations have been developed and should provide additional answers regarding the function of attachment networks for arthritis sufferers. Irrespective of these limitations, this study makes a useful contribution in exploring how attachment processes can shape the care-seeking tendencies of people suffering chronic illness – a context of research that until now has been neglected by attachment researchers.
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Address Correspondence to:

Sian Cole                 or         Gery Karantzas
School of Psychology     School of Psychology
Deakin University         Deakin University
221 Burwood Hwy          221 Burwood Hwy
Burwood VIC 3125          Burwood VIC 3125
sian.cole@deakin.edu.au   gery.karantzas@deakin.edu.au
Attachment Functions and Networks in Older Adults

Tamara Coupe (Tamara.Coupe@anu.edu.au)
School of Psychology
The Australian National University

Ross B. Wilkinson (Ross.Wilkinson@anu.edu.au)
School of Psychology
The Australian National University

Abstract

Although Bowlby emphasised the applicability of attachment across the lifespan, there has been limited research on attachment in older adult populations. Recent research has gone beyond focusing on just attachment in dyadic relationships to include the multiple attachments that exist in our familial and social environment. This extension of attachment theory has included the study of both hierarchical attachment networks and purported attachment functions. Building on the work of Doherty and Feeney (2004), and incorporating proposals from Socio-Emotional Selectivity Theory and the Convoy Model of Social Relations, the present study examined the network of relationships and associated attachment functions in 213 older Australians (117 females, 96 males: 50 to 96 years). The results indicate that women report a significantly higher number of people in their attachment network than men and that, in order of importance, partners, children, friends and siblings feature as main attachment figures for both sexes. In terms of attachment functions, men have their attachment needs met almost exclusively by their partners, while women have attachment needs met by both their partner and other relationships. The implications for the assessment of attachment and the conceptualisation of the relationship between attachment and psychological health in older adults are discussed.

There is extensive research that focuses on attachment processes in infants, children, adolescents, and young adults, yet there is comparatively little that has focussed exclusively on older adults (Magai & Consedine, 2004). This is despite the fact that attachment theory takes a life-span approach to relationships and that issues relevant to older populations are becoming increasingly salient. An important development in understanding older adults’ relationships from an attachment perspective is that theorists and researchers have moved beyond focusing exclusively on primary attachment relationships to consider the possible network of attachments that may exist in extended social environments.

In the last ten years researchers have looked at the composition of these networks (Doherty & Feeney, 2004; Hazan & Zeifman, 1994; Trinke & Bartholomew, 1997), the strengths of relationships in attachment networks (Doherty & Feeney, 2004), the structure of networks (Fraley & Shaver, 1997; Hazan & Zeifman, 1994; Mikilincer, Gillath & Shaver, 2002; Trinke & Bartholomew, 1997) and the role of normative life events in the organisation of these networks (Doherty and Feeney, 2004). Examination of attachment networks has shown that, consistent with attachment theory, relationships exist in a hierarchy, and the structure and content of this hierarchy can change over the life course. In adulthood, romantic partners are most likely to be nominated at the top of the hierarchy as the primary attachment figure (Doherty & Feeney, 2004) followed by mothers, fathers, siblings and best friends (Doherty & Feeney, 2004). Women have reported more people in their network than males while older adults report fewer important relationships than younger people (Doherty and Feeney, 2004). Further, older adults who were not in a romantic relationship nominate siblings as the strongest attachments in their network (Doherty and Feeney, 2004).

While the attachment network describes the multiple attachment bonds that one may have, the attachment functions describe the components present in a relationship in order for it to be considered an attachment bond (Hazan & Zeifman, 1994). Attachment theorists argue that the attachment functions that operate in infancy are also evident in adult interpersonal relationships (Hazan & Zeifman, 1994). The four functions include: proximity seeking (desire to be with the other person), safe haven (seeking comfort from that person in times of stress), separation protest (being distressed when separated from that person), and secure base (felt security). Attachment functions are said to develop in a sequential fashion with proximity seeking being the first function to develop in the formation of an attachment bond, while secure base forms once the other functions are fulfilled (Hazan & Zeifman, 1994). Attachment functions have been examined in order to determine the relative strength of each attachment figure in the attachment network as well as describing the purpose and importance of a particular relationship (Doherty & Feeney, 2004; Hazan & Zeifman, 1994; Trinke & Bartholomew, 1997). Relationships that fulfil the four functions are considered ‘full-blown’ and are considered the most important and significant relationships in an individual’s network. Figures that are relied upon the most in the network are considered primary attachments, and are not necessary full-blown attachments. That is, primary attachments may fulfil less than all four functions, however the research indicates that it likely that primary attachments are most commonly full-blown relationships as well (Doherty and Feeney, 2004). While those in a romantic relationship
will typically nominate a full-blown attachment with their romantic partner. Doherty and Feeney (2004) found that full-blown attachments are not limited to romantic partners but also exist with mothers, fathers, siblings, children and friends.

There are at least two other relevant theoretical views that should be considered along with attachment process in the current context: the convoy model of social relations (Kahn & Antonucci, 1980) and socio-emotional selectivity theory (Carstensen, 1992). The convoy model represents networks by a concentric 3-circle diagram, where the inner circle represents the closest relationship for that individual. Research suggests that, typically for older people, the convoy is comprised of between five and ten significant relationships and that family members usually hold these positions (Antonucci & Akiyama, 1995). With increasing age members of the outer circle reduce while the inner circle remains relatively intact (Antonucci, 2004). Marital status is said to influence convoy composition, with friends and children compensating for the loss of a spouse by fulfilling the role of confidant (Connidis & Davies, 1990). Single older people appear to have closer bonds to their siblings than their married counter parts, particularly for women who are single or childless (Connidis & Davies, 1992) and friends, siblings and children play central roles in the relationship network of those widowed or separated/divorced (Campbell, Connidis & Davies, 1999). Women typically have more people in their network/convoy than men (Antonucci and Akiyama, 1995).

Socio-emotional selectivity theory describes social network change as one ages (Carstensen, 1995). This theory proposes that as people age they reduce the number of attachment relations they have and become more selective with whom they form these relationships. As we age we develop a need for relationships that provide more meaningful and deeper emotional connection while peripheral and less meaningful contacts are reduced. From an attachment perspective, it would appear that relationships that are more important (i.e., full-blown) are maintained, while those less important (i.e., fulfilling fewer functions) are given less priority and therefore less attention. In line with this theory, we would expect the attachment networks of older people to reduce with age and for those still present in the network to be close and significant relationships.

The Present Study

The aim of the present study was to investigate relationship networks in an older population, using an attachment perspective. The first objective is to examine the size of the attachment network in view of age, gender and relationship status differences. The second is to determine who in the attachment network fulfils the attachment needs for each individual. Specifically, attachment strength to each member in the network will be examined, as well as what relationships constitute full-blown attachments and primary attachments. Based on the convoy model of social relations, socio-emotional selectivity theory, and previous research examining attachment networks and functions, the following hypotheses are proposed. Firstly, older adults’ attachment networks will primarily be comprised of five to ten relationships, with women having a more extensive network than men. Secondly, age will be negatively related with network size, but not the number of full-blown relationships reported (i.e., high quality relationships). Finally, those who are married will typically nominate their spouse as both a full-blown attachment and as their primary attachment figure. Those who are single are predicted to nominate a sibling as their primary attachment figure.

Method

Participants

Participants were 213 older adults (117 females, 96 males) sampled from four main groups: retirement villages (41.6 %), senior citizen/rotary/lawn bowls clubs (26%), school teachers from a local high school (4.4%) and the general community (28%). The mean age of the sample was 66.02 years (SD = 11.29) with a range of 50 to 96 years. Participants reported an average of 2.88 children (SD = 1.08) and 2.77 siblings (SD = 1.74). The majority of the sample was married with a higher proportion of married men.

Procedure and Measures

A total of 500 surveys were distributed and 213 returned (42.8%). Participants were recruited through relevant organisations or through a snowball sampling procedure. Participants completed the questionnaire and returned it via mail.

Attachment network and attachment functions were measured using the Attachment Network Questionnaire (ANQ; Doherty & Feeney, 2004). This measure consists of 2 sections, the first measuring the attachment network, the second assessing targets of attachment behaviour by way of attachment functions. The first section asks participants to list up to 14 people in their life that they feel a strong emotional tie to (whether positive, negative or mixed). The second part asks participants to list up to five people from list of people nominated in part one, in order of importance against the four attachment functions with three questions per function. A total of 12 questions measure the four attachment functions (eg proximity seeking, separation protest, safe haven and
secure base). For example the question ‘Who do you feel you can count on, no matter what?’ measures the function secure base. A scoring system was adopted, similar to the one used by Doherty and Feeney (2004), in order to determine attachment strength. As participants were asked to list people in order of importance, relationship types that were nominated first against the attachment function questions were given a score of 3, those second were given a score of 2, and those in the remaining 3 spaces were given a score of 1. Each relationship type reported was only scored once for that attachment function (i.e., if ‘son’ was reported twice for a particular function, it was only scored once). This scoring method is effective in establishing order amongst the relationships types nominated (see Doherty & Feeney, 2004 for a more detailed scoring description). Full-blown attachments were defined as those in which the significant person fulfils all four of the attachment functions with a score of at least 2 in each.

Results

Information regarding the relationship status of the sample is presented in Table 1. Overall, 68 different types of relationships were recorded. Participants who did not report relationship types necessary for particular analyses, were excluded through listwise deletion.

The nuclear family represented 54.72% of relationships nominated, the extended family 21.41%, and non-relatives (e.g., work colleagues, neighbours etc.) represented 23.87%. An average of 9.45 relationships were nominated with a range of 1 to 14. Women reported significantly more people in their relationship network than men (mean= 10.42, SD=3.67) versus (mean=8.26, SD=3.6), $t = 4.24$, $df = 205$, $p < .001$. Age had a weak, negative correlation with network size ($r = -.258$, $p < .001$). Partnership status (partner vs no partner) did not affect network size ($t = 0.01$, $df = 205$, $p < .996$). The number of full-blown relationships per person ranged from zero to three. Only one participant reported having three full-blown attachments and was therefore regrouped into a ‘two or more full-blown’ category. A one-way ANOVA revealed that age did not vary with the number of full-blown relationships, $F(2,206) = 2.60$, $p < .01$. It appeared that while network size reduced with age, the number of full-blown relationships did not.

Table 1

<table>
<thead>
<tr>
<th>Relationship Status</th>
<th>Married n (%)</th>
<th>Partner (not married) n (%)</th>
<th>Divorced n (%)</th>
<th>Widowed n (%)</th>
<th>No Relationship n (%)</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>Female</td>
<td>66 (56.4)</td>
<td>5 (4.3)</td>
<td>13 (11.1)</td>
<td>28 (23.9)</td>
<td>5 (4.3)</td>
<td>117</td>
</tr>
<tr>
<td>Male</td>
<td>85 (88.5)</td>
<td>4 (4.2)</td>
<td>1 (1)</td>
<td>5 (5.2)</td>
<td>1 (1)</td>
<td>96</td>
</tr>
<tr>
<td>Total</td>
<td>151</td>
<td>9</td>
<td>14</td>
<td>33</td>
<td>6</td>
<td>213</td>
</tr>
</tbody>
</table>

Table 2

Mean Attachment Strength for Sex and Partnership Status

<table>
<thead>
<tr>
<th></th>
<th>Male Mean (SD)</th>
<th>Female Mean (SD)</th>
<th>Overall Mean (SD)</th>
<th>Partner Mean (SD)</th>
<th>No Partner Mean (SD)</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>$n = 96$</td>
<td>$n = 117$</td>
<td>$n = 213$</td>
<td>$n = 162$</td>
<td>$n = 52$</td>
</tr>
<tr>
<td>Partner</td>
<td>2.65 (0.53)</td>
<td>2.28 (0.88)*</td>
<td>2.45 (0.77)</td>
<td>2.45 (0.77)</td>
<td>n/a</td>
</tr>
<tr>
<td>Daughter</td>
<td>0.84 (0.57)</td>
<td>1.47 (0.85)*</td>
<td>1.21 (0.81)</td>
<td>0.98 (0.64)</td>
<td>1.97 (0.83)</td>
</tr>
<tr>
<td>Son</td>
<td>0.69 (0.61)</td>
<td>0.86 (0.65)</td>
<td>0.79 (0.64)</td>
<td>0.70 (0.59)</td>
<td>1.18 (0.72)</td>
</tr>
<tr>
<td>Friend</td>
<td>0.62 (0.61)</td>
<td>0.78 (0.65)</td>
<td>0.72 (0.63)</td>
<td>0.66 (0.59)</td>
<td>0.90 (0.74)</td>
</tr>
<tr>
<td>Sibling</td>
<td>0.34 (0.58)</td>
<td>0.47 (0.51)</td>
<td>0.42 (0.54)</td>
<td>0.39 (0.53)</td>
<td>0.53 (0.57)</td>
</tr>
</tbody>
</table>

*p < .01, *Calculated if attachment figure available
The five most frequently reported relationship types against the four attachment functions were partner, sibling, daughter, son and friend and were the focus of subsequent analyses. The attachment figures reported against the attachment functions were firstly investigated in terms of attachment strength. Attachment strength ranged from 0-3. Mean scores reveal that partners were calculated as having the highest attachment strength score \((M = 2.45; SD = 0.77)\), followed by daughter \((M = 1.21; SD = 0.80)\), son \((M = 0.79; SD = 0.64)\), friend \((M = 0.72; SD = 0.63)\) and sibling \((M = 0.42; SD = 0.54)\). A series of one sampled \(t\)-tests were conducted for those who had both relationship types available in order to make comparisons and differences between all relationship types were significant.

Gender and relationship status breakdowns for mean attachment scores are shown in Table 2. While partners appear at the top of the attachment hierarchy for both men and women, the results indicate that men have more of their attachment needs met by their partners than women, \(t = -3.51, df = 150, p < .001\). Women have significantly higher attachment strength to their daughters than men, \(t = 4.60, df = 120, p < .001\). When examining relationship status, those with a partner, report greatest attachment strength to their partner, followed by daughter, son, friend and sibling. Hierarchy order was maintained for those without a partner.

It is clear from Table 3 that attachment, across all four functions in this sample of older adults, is concentrated in romantic partners. Due to sample size restrictions from listwise deletion of subjects, significance testing could not be conducted.

**Table 3**

<table>
<thead>
<tr>
<th>Attachment Function</th>
<th>Partner (M(SD))</th>
<th>Friend (M(SD))</th>
<th>Sibling (M(SD))</th>
<th>Daughter (M(SD))</th>
<th>Son (M(SD))</th>
</tr>
</thead>
<tbody>
<tr>
<td>Safe Haven</td>
<td>2.58(0.83)</td>
<td>0.96(0.90)</td>
<td>0.54(0.76)</td>
<td>1.06(0.99)</td>
<td>0.66(0.78)</td>
</tr>
<tr>
<td></td>
<td>(n = 156)</td>
<td>(n = 116)</td>
<td>(n = 119)</td>
<td>(n = 126)</td>
<td>(n = 146)</td>
</tr>
<tr>
<td>Secure Base</td>
<td>2.53(0.96)</td>
<td>0.77(0.85)</td>
<td>0.57(0.76)</td>
<td>1.42(0.96)</td>
<td>1.04(0.93)</td>
</tr>
<tr>
<td></td>
<td>(n = 153)</td>
<td>(n = 115)</td>
<td>(n = 119)</td>
<td>(n = 122)</td>
<td>(n = 142)</td>
</tr>
<tr>
<td>Proximity</td>
<td>2.53(0.84)</td>
<td>0.80(0.77)</td>
<td>0.34(0.59)</td>
<td>1.18(0.96)</td>
<td>0.76(0.77)</td>
</tr>
<tr>
<td></td>
<td>(n = 156)</td>
<td>(n = 116)</td>
<td>(n = 120)</td>
<td>(n = 125)</td>
<td>(n = 145)</td>
</tr>
<tr>
<td>Separation</td>
<td>2.19(0.91)</td>
<td>0.31(0.58)</td>
<td>0.24(0.55)</td>
<td>1.13(1.02)</td>
<td>0.70(0.78)</td>
</tr>
<tr>
<td></td>
<td>(n = 156)</td>
<td>(n = 116)</td>
<td>(n = 120)</td>
<td>(n = 125)</td>
<td>(n = 144)</td>
</tr>
</tbody>
</table>

**Table 4**

<table>
<thead>
<tr>
<th>Relationship Type</th>
<th>Overall (^a)</th>
<th>Partner ((n = 162))</th>
<th>No Partner ((n = 52))</th>
<th>Female</th>
<th>Male</th>
</tr>
</thead>
<tbody>
<tr>
<td>Partner</td>
<td>80.2</td>
<td>80.2</td>
<td>n/a</td>
<td>77.5</td>
<td>82.4</td>
</tr>
<tr>
<td>Daughter</td>
<td>22.3</td>
<td>7.1</td>
<td>68.8</td>
<td>35.1</td>
<td>3.8</td>
</tr>
<tr>
<td>Friend</td>
<td>6.2</td>
<td>2.8</td>
<td>15.8</td>
<td>9.1</td>
<td>1.8</td>
</tr>
<tr>
<td>Son</td>
<td>5.3</td>
<td>2.5</td>
<td>16.1</td>
<td>6.9</td>
<td>3.1</td>
</tr>
<tr>
<td>Sibling</td>
<td>3.9</td>
<td>4.1</td>
<td>3.3</td>
<td>5.0</td>
<td>2.1</td>
</tr>
</tbody>
</table>

\(^a\) Percentages represent the proportion of participants with the target figure available.

Relationship types with the highest composite score across the attachment functions were classified as the primary attachment figure for that individual. Table 4 illustrates the percentage of participants reporting any of the five relationships as their primary attachment figure. The results indicate that partners were relied on most as primary attachment figures, followed by daughters, friends, sons and siblings. When examining only those in the sample with a partner, the majority report their partner as their primary attachment figure, followed by daughter, sibling with friend and son being reported equally. For those without a partner, the majority nominated their...
daughter, followed by son, friends and sibling. When examining gender differences, it appeared that a higher percentage of males (82.4%) reported their partner as their primary attachment, when compared to females (77.5%), $x^2 (1) = 15.98, p < .001$. When compared to their male counterparts, a higher proportion of women are using relationships other than their partner as their primary attachment relationship. The majority of the sample (54%) reported having only one full-blown attachment. The majority of those with a partner had a full-blown attachment to them (79%). Males (87.9%) were more likely to have a full-blown attachment to their partner than females (67.6%), $x^2 (1) = 8.73, p = .003$; and females (45.5%) were more than twice as likely to have a full-blown attachment to their daughters, than males (20.8%), $x^2 (1) = 7.33, p = .007$ (Table 5).

<table>
<thead>
<tr>
<th></th>
<th>Partner</th>
<th>Daughter</th>
<th>Son</th>
<th>Friend</th>
<th>Sibling</th>
</tr>
</thead>
<tbody>
<tr>
<td>Male</td>
<td>87.9% (80)</td>
<td>20.8% (11)</td>
<td>14.1% (9)</td>
<td>8.9% (5)</td>
<td>4.3% (2)</td>
</tr>
<tr>
<td>Female</td>
<td>67.6% (48)</td>
<td>45.5% (35)</td>
<td>20.7% (18)</td>
<td>6.8% (6)</td>
<td>5.0% (4)</td>
</tr>
<tr>
<td>Partner</td>
<td>79% (128)</td>
<td>27.6% (27)</td>
<td>12.5% (15)</td>
<td>7.5% (8)</td>
<td>3.1% (3)</td>
</tr>
<tr>
<td>No Partner</td>
<td>n/a</td>
<td>59.4% (19)</td>
<td>38.7% (12)</td>
<td>7.9% (3)</td>
<td>10% (3)</td>
</tr>
</tbody>
</table>

$^a$Percentage calculated if attachment figure available

When examining relationship status differences, those without a partner were more likely to have a full-blown relationship with their daughter ($x^2 (1) = 9.34, p = .002$) or son ($x^2 (1) = 9.81, p = .002$), but not with a sibling or friend (Table 5). Independent sample t tests reveal that single people have significantly fewer full-blown attachments than those with a partner ($t = -3.623, df = 212, p < .001$).

**Discussion**

The aim of this study was to investigate the attachment networks and functions in older Australians and a number of specific hypotheses were supported. The results demonstrated that network size varied as a function of age and gender but not relationship status. Results also indicated that targets of attachment behaviour differed across the five relationship types examined. Partners, followed by daughters were relied upon most across all four attachment functions. Reliance on friends, sons and siblings varied across the functions, indicating that these relationships are used for specific attachment purposes and are not utilised to fulfil all attachment needs. Across both sexes, participants reported strongest attachment to partners followed by children, friends and siblings. There was also some evidence that females, either as partners or offspring, were generally more a target of attachment functions than males.

The predictions that older adults’ attachment networks are primarily comprised of 5 to 10 relationships, with women nominating more people than men, were supported. This is consistent with Antonucci and Akiyama’s (1995) review of studies that have examined the size of social convoys in an older population. Research suggests that men’s social relationships are often activated through their spouse and report using their spouse as a major source of emotional support. Women, however, are said to use their spouse to a lesser extent to fulfil emotional needs, and often turn to children, friends and other relatives.

As predicted, age was negatively correlated with network size. However, it should be noted that this relationship was relatively weak. In examining this trend, it was evident that between the ages of 50 and 90, on average, there was a 2.6 person reduction in network size. Evidence of only a weak significant relationship may be due to the restricted age range of the sample. Examination of social networks representing all ages may give a better indication of the changes that occur in close relationships across the lifespan. Also, as predicted and consistent with socio-emotional selectivity theory (Carstensen, 1992) there was no difference in the number of full-blown relationships across ages, suggesting that network size decreases with age, but the number of high quality relationships remains the same.

There was mixed support for the third hypothesis. Partners were most often reported as full-blown and primary attachment relationships for both sexes. Interestingly, for both primary and full-blown attachments, a higher proportion of men reported their partner to fulfil this role, when compared to women. Furthermore, women were more than twice as likely to report their daughter as a full-blown attachment than men. This finding has also been demonstrated in the social support literature which has shown that women are more likely than men to name children, family and friends as sources of support whereas men most often or only, nominate their spouse (Okun & Keith, 1998). The current findings, as well as previous research, suggest that single, older men
may be at risk of not having their attachment needs met. As the literature clearly shows that attachment bonds are very important to psychological health, it would appear that single older men are vulnerable.

For those without partners, daughters were most frequently nominated as primary attachments. Daughters also constituted full-blown attachments for single participants. While it was predicted that siblings would play an important role in terms of fulfilling the attachment needs of those who are single, the results indicate that while these relationships feature as attachment relationships to some extent for single older people, daughters play the most significant role. This finding is particularly interesting as Doherty and Feeney (2004) found siblings to be the most important relationship for older people who were either childless or single. In the current study, siblings were relied upon least as targets of attachment for those with or without a partner. These conflicting findings may reflect differences in sampling procedure. Proximity to siblings is argued to be a crucial determinant of relationship closeness in later life (Campbell, Connidis and Davies, 1999). Doherty and Feeney’s (2004) sampling strategy relied upon participants recruiting family members and friends, who would presumably have to live within close proximity of each other. Proximity to family members may have been less common in the rural sample used in the current study, particularly as participants were recruited individually and not as a family unit.

The current study has several limitations that should be considered. The social support literature identifies differences in network composition between widowed, divorced and never married individuals. However, the current study grouped all single participations together due to the relatively small, but still substantial, sample size. Future attachment-oriented research should examine the attachment network and functions separately for those never married, widowed and divorced. There are also some issues with regard to the attachment networks and functions assessment. The ANQ appears to solely examine relationships that are secure by asking people to only nominate those in their network that fulfill the attachment functions for them. Bowlby (1980) claimed that attachment security derives from appraisals of availability and responsiveness in current relationships. Future research should closely examine the quality of the attachment network by examining degrees of availability and responsiveness in relation to attachment functions.

In conclusion, while previous studies have investigated the attachment networks and functions in younger samples, (i.e., Hazan & Zeifman, 1994) or have included older people as part of their sample (Doherty & Feeney, 2004), no study has examined these constructs in a sample purely comprised of older adults. The current study contributes to our understanding of the attachment needs of older men and women and the importance of particular relationships addressing these needs. Of particular significance was the finding that apart from spouse; children and daughters are important providers of security and comfort for this population. Use of children as attachment figures was more pronounced for women, with men often solely relying upon their spouse to have their attachment needs met. This finding draws our attention to the particular problems of single older men that may be at risk through not having their attachment needs met. The merit of investigating attachment processes in older people cannot be understated. Through understanding older people’s attachment networks, society is best placed to assist this population in promoting psychological health and wellbeing.

References


Predicting Prosocial Personality from Attachment Facets: Are Some Facets More Critical than Others?

Omri Gillath (ogillath@ku.edu)
Department of Psychology
University of Kansas, Lawrence, KS 66045 United States

Gery Karantzas (gery.krantzas@deakin.edu.au)
School of Psychology
Deakin University, Melbourne VIC 3125 Australia

Abstract

Research across various countries and relationship contexts suggests that attachment anxiety and avoidance are associated with people’s prosocial feelings, tendencies, and behaviours (e.g., Gillath et al., 2005; Karantzas, Evans, & Foddy, 2007). In the present paper we extend the two dimensional model of attachment to include a series of nested facets. Doing so allowed us to examine whether the multifaceted nested factor model provides a better explanation of the associations between attachment and the components of prosocial personality as compared to the bi-factor model (attachment anxiety and avoidance). Three hundred and eighty participants, aged 18 to 33 years completed self-report measures of adult attachment and prosocial personality. Data were fitted to various models – as expected the nested model provided a better fit to the data and explained a significantly larger proportion of the variance in prosocial tendencies than the bi-factor model. The attachment facets were found to make distinct contributions to prosocial personality beyond the broad attachment dimensions (e.g., the preoccupied facet was uniquely associated with personal distress). Implications for the revised attachment structure across various prosocial contexts are discussed, as are the limitations of using the Experience in Close Relationships Scale (ECR; Brennan et al., 1998) to test a multifaceted attachment model.

Prosocial behaviour is defined as acts or behaviours by individuals that are deemed by divisions of society or social groups as beneficial to others (Penner, Dovidio, Piliavin, & Schroeder, 2005). Much research has been conducted in the area of prosocial behaviour from the biological/evolutionary, developmental, and social cognition perspectives (Buck, 2002; Davis, Luce, & Kraus, 1994; Eisenberg, 2000; Garcia, Weaver, Moskowitz, & Darley, 2002). Nevertheless, it is only over the last decade that concerted efforts have been made to understand the aspects of personality that predispose or prevent individuals from engaging in helping acts (e.g., Gillath et al., 2005; Graziano, Habashi, Sheese, & Tobin, in press; Penner, 2002).

Attachment and Caregiving: Complementary Behavioural Systems

According to attachment theory (Bowlby, 1969/1982) the evolution of humans has resulted in the development of various behavioural systems as adaptive means of ensuring the reproduction and survival of one’s genes, with each system comprising unique functions, goals, triggers, and responses (for a full review see Mikulincer & Shaver, 2003). Two of these systems were suggested by Bowlby as shaping the relationships between children and their caregivers - attachment and caregiving. The attachment system is associated with the maintenance of proximity to supportive and caring others (i.e., attachment figures) during periods of threat and distress. The caregiving system is thought to be a complementary system, associated with the provision of comfort, support and care to others in need, fostering in attachment figures the desire to help close and dependent others. According to Bowlby these diverse systems interact to shape people’s behaviour such that mental models and behavioural tendencies associated with attachment security are likely to affect the extent that a person engages in responsive and sensitive caregiving and helping behaviour.

Attachment

Bowlby (1982) described the primary function of attachment figures as providing a secure base and safe haven for their close needy others - usually their children. This, in turn, promotes in the care recipient a sense of security, which enables the person to confidently explore and master his or her environment (Ainsworth, 1989; Bowlby, 1988). Across repeated interactions, the sensitivity and responsiveness of an attachment figure in meeting the child’s needs shapes the mental representations that this child holds about the availability of the attachment figure as a sensitive caregiver, and his or her worthiness for receiving such love and care. These mental representations of self and others (termed by Bowlby as working models) are commonly conceptualised as occupying a bi-dimensional space consisting of two orthogonal dimensions: attachment avoidance and anxiety (e.g., Brennan, Clark, & Shaver, 1998; Erwin, Salter, & Purves, 2004).
The avoidance dimension is thought to reflect the extent to which an individual avoids intimacy and closeness, and is unwilling to trust or depend on others. It is therefore associated with the reluctance to seek out help and support, along with compulsive self-reliance (Bartholomew & Horowitz, 1991; Bowlby, 1982; Griffin & Bartholomew, 1994). Conversely, the anxiety dimension is thought to reflect an individual’s constant fear of rejection, excessive reassurance seeking, and a desire to merge with one’s relationship partner. It is therefore associated with negative affect and a strong yearning for help and support, coupled with frustration due to perceiving support as unavailable (e.g., Florian, Mikulincer, & Bucholtz, 1995; Shaver, Schachner, & Mikulincer, 2005). Someone who is low on both of these dimensions (avoidance and anxiety) is considered to be securely attached. Attachment security reflects a tendency to trust and feel intimate with, and close to, others, an ability to depend on other people for support (Florian et al., 1995), and an increased tendency to help others in need (Gillath et al., 2005).

However, in reviewing the literature on self-report attachment measures authors such as Kurdek (2002), Finney and Fairchild (2006) report that some researchers have found, and continue to find, factor structures more complex than the two-dimensional model accepted by Brennan et al. (1998). (See, for example, Carver, 1997; Collins & Read, 1990; Feeney et al., 1994; Gillath, Hart, Noftle, & Stockdale, 2007.) For instance, Collins and Read (1990) proposed a three-factor model of attachment styles comprising an anxiety dimension, but two facets or subfactors of avoidance: discomfort with closeness and discomfort depending on others (which correlated above .40 with each other). Feeney et al. (1994) identified two avoidance facets – discomfort with closeness and “relationships as secondary,” and two anxiety facets – “preoccupation with attachment” and “need for approval”. They also identified a fifth factor termed “confidence”, which correlated negatively with the anxiety facets. Even Brennan et al. (1998) in their factor analysis of all known attachment scales found multi-factorial structure of attachment in their first round of factor analysis. It was only in their subsequent analysis of these subfactors that a bi-dimensional solution emerged.

In more recent times, the debate concerning how best to represent individual differences in adult attachment has re-emerged with the use of more sophisticated data reduction procedures such as Confirmatory Factor Analysis (CFA). For instance, while Fairchild and Finney (2006) found that a two-factor model (anxiety and avoidance) was an apt representation of attachment dimensions, there was sufficient misfit to suggest that distinct forms of avoidance relating to discomfort with closeness and discomfort depending on others were present in measures such as the ECR.

These complex findings, while fully compatible with Brennan et al.’s (1998) finding of two second-order factors comprising several first-order mini-factors, raise the possibility that specific facets of anxiety and avoidance could make differential predictions with respect to other criterion variables such as prosocial behaviour (see Fossati et al., 2003; Shaver, Belsky, & Brennan, 2000). To test this possibility, we developed a nested eight-factor model of attachment that comprised the broad attachment factor of avoidance along with two avoidance facets – “discomfort with closeness” and “discomfort with depending on others”, broad anxiety factor together with two anxiety facets “fear of abandonment/rejection” and “preoccupation” and two method factors pertaining to the positive and negative wording of the attachment scale items. Given that the broad factors are nested amongst the attachment facets, the nested model is represented as an orthogonal factor structure rather than as an oblique structure. The orthogonality of the structure was validated through preliminary analyses that demonstrated the significant reduction of correlations across attachment facets with the introduction of the broad attachment factors. The model was found to have superior fit compared to alternative conceptions of attachment including the two factor model proposed by Brennan et al. (1998).

The caregiving system

As mentioned earlier, the caregiving behavioural system is designed to reduce another’s distress and, as a function, encompasses a wide set of behaviours and strategies that serve to alleviate the suffering of others in need of support (e.g., comforting a distressed other, assisting in the development of constructive strategies to solve a problem). Driven by a tendency to empathise with another’s suffering (Batson, 1991) the activation of the system directs an attachment figure to engage in behaviours that re-establishes feelings of security and safety in the needy other (for a review see Mikulincer & Shaver, 2007).

Linking Attachment and Caregiving: Implications for Prosocial Behaviour

Thus, the attachment and caregiving systems are regarded as complementary systems, whereby the activation of the attachment system in an individual is thought to activate the caregiving system in their respective attachment figure to render the necessary care and support, ameliorating the distress of the care-recipient (Collins & Feneey, 2004; Gilbert, 2005; Gillath et al., 2005; Mikulincer, Shaver, Gillath, & Nitzberg, 2005). The consequence of receiving responsive and appropriate caregiving from one’s attachment figures is thought to promote both the intra and the intergenerational transmission of secure mental representations (i.e., low anxiety and avoidance) and good models of caregiving (Ainsworth, Blehar, Waters, & Wall, 1978; Mikulincer & Shaver, 2007).
2004). As such, people that receive responsive, sensitive and empathic support during times of need develop positive internal workings models. These models encompass feelings of self worth and competency, confidence and trust in others, and the capacity to assist others in times of distress while forgoing their personal needs.

The links between attachment and caregiving have been widely investigated demonstrating that insecure attachment impedes the optimal functioning of the caregiving system such that insecurely attached people, and especially avoidant people, provide less responsive, sensitive and supportive care to their close others when they are in need (Collins & Feeney, 2000; Feeney & Collins, 2001). More recently, it has been argued that the mental models associated with attachment security and with sensitive and responsive caregiving, are likely to influence beyond the realm of close romantic and familial relationships to contexts where people can exhibit compassion, altruism, and prosocial behaviour toward needy strangers.

In line with this reasoning, across various countries and diverse contexts, dispositional and experimentally manipulated attachment security was found to facilitate people’s prosocial feelings, tendencies, and behaviours such as empathic concern to unknown persons in need, philanthropic volunteerism, and caring for elderly parents (Gillath et al., 2005; Karantzas et al., 2007; Mikulincer et al., 2005). For example, Gillath et al. (2005) and Mikulincer et al. (2005) found that attachment security was positively associated with helping others in need; whereas, attachment avoidance was negatively associated with empathic reactions to others’ suffering. This association was explained due to avoidants’ discomfort with closeness and dependency, perceiving relationships as secondary, and their contempt towards other people’s needs and signals of vulnerability (Collins & Read, 1994; Feeney et al., 1994). Attachment anxiety was not associated with helping itself, but rather with the reasons for helping. Thus, anxiously attached people tend to use their helping of others as means of reducing one’s own worries around personal distress and as a way to maintain their excessive reassurance seeking (Collins & Read, 1994; Gillath et al., 2005; Mikulincer et al., 2005). In a related line of research using the nested factor structure of attachment, Karantzas et al. (2007) found adult children’s current and anticipated future caregiving to be negatively associated with discomfort with dependency; while the willingness to receive future care by older parents was associated with fear of rejection/abandonment. Thus, while some of our findings suggest that broad attachment avoidance and anxiety influence prosocial behaviour, it seems reasonable that specific elements of attachment avoidance and anxiety may broaden our understanding of the factors underlying the inhibition/suppression of prosocial behaviour. Importantly, the nested model may add to previous knowledge about the links between attachment and prosocial behaviour by identifying how distinct mental models of attachment avoidance and anxiety yield different underlying motives in people’s willingness or reluctance to help others in need. To test this possibility, the aim of the present study was to examine the associations between the broad and facet components of attachment and the factors associated with prosocial behaviour.

Method

Participants

A total of 380 participants (238 women, 142 men) from the University of California, Davis took part in the study. Participants ranged in age from 18 to 33 years ($M = 19.79$, $SD = 1.95$) and were ethnically diverse (39.2% Caucasian, 34.5% Asian-American, 10.8% Hispanic, 7.9% mixed background, 2.6% Pacific-Islander, 1.8% African American, 3.2% failed to list a cultural background). Over 45% of participants were currently in a romantic relationship.

Materials and Procedure

Attachment was assessed using the ECR (Brennan et al., 1998). The ECR consists of 36 statements rated on a 7-point Likert-scale ranging from 1 (strongly disagree) to 7 (strongly agree). The instrument is divided into two 18-item scales measuring the two major forms of attachment insecurity: anxiety and avoidance. The measure contains 10 reverse-scored items – nine pertaining to avoidance and one pertaining to attachment anxiety. Both scales, which were created by factor analysis of a large item pool, have consistently yielded high alpha reliability coefficients ($> .90$) in hundreds of studies (reviewed by Mikulincer & Shaver, 2007). In the present study, the two subscales yielded alphas above .90 and were moderately correlated $r = .35$.

Prosocial behaviour was assessed with 30 items from the Penner Prosocial Personality Battery (PSB; Penner et al., 2005), which produce scores on seven factors: ascription of responsibility, empathic concern, perspective taking, mutual-concerns moral reasoning, other-oriented moral reasoning, personal distress, and altruism. The seven scales were reported by Penner et al. to load on two higher-order factors, helpfulness and other-oriented empathy. Personal distress and self-reported altruism loaded on helpfulness, and the remaining five factors loaded on other-oriented empathy. According to Penner et al. both higher-order factors have reliabilities in excess of .80. In the present study, these factors had reliabilities above .70. All items associated with the helpfulness factor are rated on a 5-point Likert-type scale ranging from 1 (strongly agree) to 5 (strongly
All items associated with other-oriented empathy are rated on a 5-point scale ranging from 1 (never) to 5 (very often).

The self-report measures were administered to undergraduate students as a part of an online survey. Completion of the ECR, PSB, and demographics, took approximately 20 minutes.

**Results**

The data was examined for missing values, univariate and multivariate normality, outliers, homoscedasticity and multicolinearity. No variables violated tests of normality and multicolinearity was not detected ($r^2 < .80$). Two structural equation models (SEM) were computed using AMOS 7.0 computer software and estimated using Maximum Likelihood Chi-Square Estimation ($X^2_{ML}$). The first SEM presented in Figure 1 examined the fit and associations between the two-factor model of attachment and prosocial personality. The second SEM examined the associations between the nested factor model of attachment and prosocial personality. Post-hoc respecifications were made by freely estimating parameters on the basis of Modification Indices and Expected Parameter Changes. Modifications to the models were supported by theoretical rationale. In order to evaluate model fit, Hu and Bentler’s (1999) combination approach was adopted. Accordingly, models with incremental fit indices (CFI and TLI) $\geq .95$ and absolute fit indices (RMSEA and SRMR) $\leq .06$, were judged as having good fit.

**Associations between the Two Factor Model of Attachment and Prosocial Personality**

As illustrated in Figure 1, the broad attachment factors were regressed onto the two latent factors of PSB – other-oriented empathy and helpfulness. Furthermore, the model required that numerous correlations amongst the PSB components be freely estimated (see Figure 1). These post-hoc modifications to the model were expected as Penner et al. (2005) noted significant weak to moderate correlations between the PSB components.

![Figure 1. Model outlining significant relationships between the bi-factor model of adult attachment and prosocial behaviour.](image-url)

* $p < .05$, ** $p < .01$, *** $p < .001$.

**Note:** Items pertaining to the ECR, method factors, variances and error covariances have been omitted from the illustration for ease of interpretation.
Specifically, significant correlations were found between ascription of responsibility and empathic concern (r = .23), empathic concern and perspective taking (r = .21), perspective taking and personal distress (r = -.30), and other-oriented moral reasoning and self-reported altruism (r = .40). The model also required that a cross-loading be imposed with self-reported altruism positively loading onto other-oriented empathy (λ = 19). The two latent variables of PSB were not found to correlate significantly. Avoidance was found to be negatively associated with both components of PSB, while a negative association was found between anxiety and helpfulness. Anxiety, however, was also found to be negatively associated with two specific empathy facets – ascription to social responsibility and perspective taking. Nevertheless, the final model resulted in poor fit $X^2 (812, N = 380) = 2183.39, p < .05; CFI = .85; TLI = .83; RMSEA = .07; SRMR = .07$.

**Associations between the Nested Factor Model of Attachment and Prosocial Personality**

As illustrated in Figure 2, the broad attachment factors and all facets were regressed onto the two latent factors of PSB. As with the previous model, correlations between certain PSB components were freely estimated and were found to be of similar magnitude to the model involving the two factor attachment model (refer to Figures 1 and 2). Again, the PSB latent variables were not found to correlate significantly. The final model presented in Figure 2 resulted in reasonable fit $X^2 (772, N = 380) = 1498.43, p < .05; CFI = .92; TLI = .91$.

![Figure 2. Model outlining significant relationships between the substantive dimensions of the nested factor model of adult attachment and prosocial behaviour.](image)

*p < .05. **p < .01. ***p < .001.

*Note.* Items pertaining to the ECR, method factors, variances and error covariances have been omitted from the illustration for ease of interpretation.
and therefore use deactivating strategies to inhibit empathic and compassionate responses to others. Thirdly, avoidant individuals maintain negative models of others they perceive people in need as undeserving of help – individuals do not allocate attention to others and as a result do perceive others’ needs. Secondly, because possible reasons as to why avoidant individuals are unlikely to possess prosocial tendencies. Firstly, avoidant are not harbored by individuals high on attachment avoidance. More specifically, we suggest that there are three Needlham, & Cummings, 2001; Mikulincer et al., 2005; van IJzendoorn, 1997; Wayment, 2006), suggesting that This result supports past findings from our own laboratories and that of others (Gillath et al., 2005; Joireman, Needlham, & Cummings, 2001; Mikulincer et al., 2005; van IJzendoorn, 1997; Wayment, 2006), suggesting that empathy and helpfulness qualities including empathic concern, perspective taking, moral reasoning and altruism are not harbored by individuals high on attachment avoidance. More specifically, we suggest that there are three possible reasons as to why avoidant individuals are unlikely to possess prosocial tendencies. Firstly, avoidant individuals do not allocate attention to others and as a result do perceive others’ needs. Secondly, because avoidant individuals maintain negative models of others they perceive people in need as undeserving of help – and therefore use deactivating strategies to inhibit empathic and compassionate responses to others. Thirdly, avoidant people may in fact realise that another is need but do not offer assistance due to their inability to take responsibility for others well-being.

In this study we aimed to explore the relationships between the broad and facet attachment factors and prosocial tendencies. As expected, both the broad attachment factors and the more specific facets were found to make significant contributions in ways consistent with past literature on attachment and prosocial behaviour. However, the nested factors model of attachment provided a clearer picture of the links (i.e., less unexplained variance and better fit), and a fine-grained delineation of how aspects of attachment anxiety and avoidance are associated with prosocial behaviour not captured by the bi-factor model. The significant increase in the explained variance in prosocial behaviour between the nested attachment factor model and the broad bi-factor model suggests that the detailed structure of attachment has substantive as well as empirical value. The findings pertaining to the relationships between the broad and facet components of attachment and prosocial behaviour are discussed in turn.

Attachment avoidance was found to be negatively associated with other-oriented empathy and helpfulness. This result supports past findings from our own laboratories and that of others (Gillath et al., 2005; Joireman, Needlham, & Cummings, 2001; Mikulincer et al., 2005; van IJzendoorn, 1997; Wayment, 2006), suggesting that empathy and helpfulness qualities including empathic concern, perspective taking, moral reasoning and altruism are not harbored by individuals high on attachment avoidance. More specifically, we suggest that there are three possible reasons as to why avoidant individuals are unlikely to possess prosocial tendencies. Firstly, avoidant individuals do not allocate attention to others and as a result do perceive others’ needs. Secondly, because avoidant individuals maintain negative models of others they perceive people in need as undeserving of help – and therefore use deactivating strategies to inhibit empathic and compassionate responses to others. Thirdly, avoidant people may in fact realise that another is need but do not offer assistance due to their inability to take responsibility for others well-being.

In relation to attachment anxiety, broad anxiety was inversely related to the helpful factor of prosocial behaviour, but unrelated to other-oriented empathy. This is consistent with past research and theory suggesting that the engagement of hyperactivating strategies by individuals high on anxiety during distressful situations activates self-focused worries that mitigate against providing help and support (Britton & Fuendeling, 2005; Mikulincer & Horesh, 1999; Mikulincer & Shaver, 2007).

The nested factor attachment model revealed that the avoidance facet of discomfort with dependency has a greater negative association with other-oriented empathy than broad avoidance. This finding seems to suggest that discomfort with dependency is likely to be the most important attachment facet in determining the tendency to be empathic (or not). This finding is consistent with past research by Joireman et al. (2001, study 1) that found using Collins and Read’s AAS that comfort with dependency (close, i.e., the inverse of discomfort with dependency) was positively associated with empathic concern.

However, this finding was further qualified by the negative covariance between discomfort with dependency and the empathic concern component of other-oriented empathy. Empathic concern has been previously identified as a key factor in people’s engagement in prosocial and altruistic behaviour – people who experience concern and sympathy for others tend to help more (Batson, 1998; Davis, 1983). Therefore the link between discomfort with dependency and empathic concern suggests that individuals high on this attachment facet are not only reluctant to allow others to depend on them, but also do not experience empathy for others in need, and hence are less likely to help.

In relation to attachment anxiety, broad anxiety was inversely related to the helpful factor of prosocial behaviour, but unrelated to other-oriented empathy. This is consistent with past research and theory suggesting that the engagement of hyperactivating strategies by individuals high on anxiety during distressful situations activates self-focused worries that mitigate against providing help and support (Britton & Fuendeling, 2005; Mikulincer & Horesh, 1999; Mikulincer & Shaver, 2007).

The facet of fear of abandonment/rejection, however, was found to have a stronger negative association with helpfulness compared to broad anxiety. This difference in effect implies that people’s worries around abandonment and rejection are so dominant that these cognitions and associated emotions interfere in one’s ability to engage in helpful behaviour (Westmas & Silver, 2001). This result suggests that people whose mental
representations of anxiety encompass worries of rejection and abandonment may resist helping people in need out of fear of having their assistance rejected or judged negatively. This finding supports earlier theories of bystander intervention and cost-reward frameworks of helping behaviour whereby fears of negative evaluations by the needy other or bystanders can result in high negative emotional costs for the helper (Dovidio, Piliavin Gaertner, Schroeder & Clark, 1991; Latane & Darley, 1970). Consequently, the tendency to avoid these negative costs inhibits people’s helping behaviour (Dovidio & Penner, 2001). Thus, individuals whose mental schemas of relationships are dominated by rejection and abandonment are particularly unlikely to offer assistance as they are more aware of these negative self-costs.

The positive association between the anxiety facet preoccupation and the personal distress component of the helpful factor was another finding elucidated by the nested factor attachment model. This positive relationship highlights that preoccupation seems to be the critical facet that impedes people’s helping of needy others as they struggle to ameliorate their own distress (Batson, 1991; Gillath et al., 2005; Mikulincer & Horesh, 1999). As a consequence, while individuals high on preoccupation perceive other people’s suffering they become emotionally overwhelmed by their own personal distress which interferes in their abilities to help others (e.g., Dovidio & Penner, 2001).

The findings related to the nested factor model of attachment and prosocial behaviour distinguish how distinct mental models of attachment avoidance and anxiety yield different underlying motives in people’s reluctance to help others in need. For instance, while it is acknowledged that the egoistic tendencies of people high on broad anxiety are associated with drawing important resources away from attending to dependent others, it seems that the egoistic motives are different for individuals whose attachment mental models are dominated by fear of rejection/abandonment versus those characterised by preoccupation. Mental schemas of fear or rejection/abandonment seem to mitigate against helping as they encompass fear of being evaluated or judged negatively or having assistance rejected, whereas preoccupation interferes with the ability to help, rather than the desire to help. Consequently, while the broad attachment factors contribute to our understanding of prosocial behaviour, the findings associated with the nested factor model of attachment yield new insights into the relationships between attachment processes and helping. These findings about reasons to help and ability to help, might also explain why in some studies (e.g., Gillath et al., 2005) attachment anxiety was only related with reasons to help (or not), and not with the tendency to help.

Despite the importance of our findings and their clear contribution, it is important to mention a psychometric and conceptual limitation associated with the use of the ECR. Using a measure that was constructed with a bi-factorial model in mind to measure facets might have biased some of our results, and our ability to identify further facets. Furthermore, in the preliminary development of the ECR, Brennan et al. (1998) reported a series of facets that resemble the facets represented in the nested factor model in the present study. However, Brennan et al. noted that a number of these facets exhibited high inter-correlations and associations with attachment avoidance and anxiety. Similarly, Fraley, Waller, and Brennan (2000) in their revision of the ECR (known as the ECR-R) found a total of 30 attachment clusters supporting the idea that the broad factors can be partitioned to yield multiple facets. However, in both cases the scale developers made a conscious decision to limit the factorability of these measures to a two factor solution due to its substantive and theoretical relevance to both Ainsworth et al.’s (1978) and Bartholomew and Horowitz’s (1991) underlying dimensions that conceptualised attachment style in a two-dimensional space. Nevertheless, Fraley et al. (2000) note that the underlying multidimensional nature of attachment suggests no simple factor structure.

Therefore, the nested model presented here, can provide an appropriate compromise that moves beyond the bi-factor model without grossly over-complicating the structure of attachment. Moreover, it seems that in contexts such as prosocial behaviour it will be fruitful to delineate the attachment facets from the broad factors as they make meaningful and substantive contributions to our understanding of helping.

References


**Address Correspondence to:**

Omri Gillath or Gery Karantzas
Department of Psychology School of Psychology
University of Kansas Deakin University
Lawrence 221 Burwood Hwy
KS 66045 United States Burwood VIC 3125
ogillath@ku.edu gery.karantzas@deakin.edu.au
Attachment Transfer and the Importance of Romantic Partners in Predicting Adolescent Psychological Health

Daphne Goh (Daphne.Goh@anu.edu.au)

Ross B. Wilkinson (Ross.Wilkinson@anu.edu.au)
School of Psychology
The Australian National University

Abstract

The media and popular culture seem to emphasize the critical importance of romantic relationships to healthy adolescent adjustment. This cross-sectional study takes an attachment transfer perspective in examining the impact of romantic partners on the patterns of major attachment relationships and the psychological health of older adolescents. Self-reported attachment to mothers, friends, and romantic partners is examined in relation to self-esteem and psychological distress in a sample of 546 upper high school students (161 males and 386 females). Although the results support a transfer of attachment to romantic partners in longer-term relationships (> 1 year), there was no difference in psychological adjustment between those with and those without partners. Further, the prediction that attachment to partners in a longer-term relationship would have a greater impact on self-esteem and distress was not supported. Implications for understanding the role of different relationship figures for the psychological wellbeing of adolescents are discussed.

The development of romantic relationships is considered in both popular culture and, to some extent, in the psychological literature to be essential for successful functioning in adolescence (Berscheid, 1999). As well as interpersonal changes, this period is also marked by biological and cognitive changes, and increased vulnerability to psychological distress (Weller & Weller, 2000). Research based on attachment theory has found that parental and peer relationships are the most central relationships in adolescence and remain important to psychological health despite the formation of romantic and other intimate relationships (Wilkinson & Parry, 2004; Wilkinson, 2006a, 2006b; Wilkinson, 2007). While the pre-eminent role of romantic partners in psychological health for adults is well-established (Feeney, 1999), the actual evidence for their importance for adolescent wellbeing is less clear (McMahon & Wilkinson, 2005).

Following from the seminal work by Hazan and Shaver (1987) demonstrating that romantic relationships can be conceived of as attachment relationships, recent research has focused on identifying the processes of attachment and the roles fulfilled by attachment figures in interpersonal relationships. Transference of attachment has been documented as occurring in adolescence, with romantic partners emerging as the primary attachment figure by late adolescence (Hazan & Zeifman, 1994). Further, hierarchies in attachment networks have been found with multiple attachment figures fulfilling different functions of attachment (Doherty & Feeney, 2004). Greater romantic involvement in adolescence and young adulthood was linked with stronger attachment to romantic partners and weaker attachment to mothers and friends, with the transfer of attachment to romantic partners increasing as a function of age and relationship length (Feeney, 2004). Developmental changes in attachment styles and attachment security between parent-adolescent and romantic relationships have also been documented (Furman & Wehner, 1997).

There have, however, been inconsistencies in the literature investigating the concurrent roles of parental and peer attachment relationships and adolescent romantic relationships with regards to adolescent psychological wellbeing. For example, the quality of parent and peer attachment relationships have been found to contribute to different degrees in different areas of adolescent adjustment (Wilkinson & Parry, 2004). Some studies report the primacy of parental relationships with the relationship between peer attachment and depression fully mediated by self-esteem (Wilkinson, 2004). Other studies report peer relationships as more influential even though parental and peer attachments served similar functions for adolescent adjustment (Lubile, Carlo, & Raffaeli, 2000). Adolescent romantic relationships have been associated with positive self-esteem and general positive psychological wellbeing (Campbell, Sedikides, & Bosson, 1994), but also with increased depression (Joyner & Udry, 2000). On the other hand, McMahon and Wilkinson (2005) found that romantic relationships in adolescence have negligible effects on adjustment, and only minor influences on existing attachments to parents and peers in predicting psychological health. Relationship length, though, does appear to influence adolescent wellbeing, with adolescents in long-term romantic relationships reporting more social support from their partners and more favourable views on their relationships than those in short-term relationships (Connolly & Johnson, 1996).
The Present Study

The present study aims to determine the importance of romantic relationships for adolescent psychological health by adopting an attachment transfer perspective. Implications for adolescent adjustment are viewed relative to attachment strength to specific attachment figures. Attachment strength reflects the extent to which an attachment figure is targeted for fulfillment of the four attachment functions: proximity-seeking, safe haven, separation protest, and secure base, postulated as innate in the attachment behavioral system (Feeney, 2004). Whereas extant research on adolescent romantic relationships has utilized attachment styles and relationship quality of attachment figures to explore implications for adolescent adjustment, the current study extends previous work by investigating attachment transference to romantic partners in the context of other attachments, and the implications of this for adolescent wellbeing.

Based on the formulation of romantic relationships as a form of attachment (Hazan & Shaver, 1987), and the notion that attachment relationships are only predictive of psychological health when attachment functions are attached to them (Wilkinson, 2006a), it is hypothesized that adolescent romantic relationships affect psychological wellbeing and that transference of attachment to the romantic partner will be demonstrated. Moreover, as relationship length has been found to differentially affect attachment transference and strength (Feeney, 2004) and the impact on adolescent adjustment (Connolly & Johnson, 1996), it is argued that adolescents in longer-term relationships will report greater attachment strength to their romantic partners, weaker attachments to mother and friends, and higher psychological wellbeing than adolescents in shorter-term relationships. Adolescents without a romantic relationship will report the lowest levels of psychological wellbeing and the most reliance on mothers and friends as attachment figures. Finally, romantic partners are hypothesized to exert greater influence on adolescent adjustment for adolescents in longer-term than shorter-term relationships. Additionally, it is predicted that mothers and friends, as attachment figures, will still retain some role in independently predicting adolescent adjustment for romantically-involved adolescents.

Method

Participants

Participants were 547 volunteers (161 males and 386 females) recruited from high schools in the Australian Capital Territory. Ages ranged from 14.50 to 19.75 years (M = 20.74, SD = 7.75). Participants predominantly live in intact families (66.7%, n = 365), and based on joint parental occupational status, were of middle to upper socio-economic status. 34% (n = 185) of adolescents surveyed reported current involvement in a romantic relationship (26.1% males, n = 42; 37.3% females, n = 144).

Procedure

Parental consent was obtained before commencement of the study. A questionnaire was administered in a classroom setting during normal school hours. The questionnaire included the following measures.

Attachment Functions. The modified Attachment Networks Questionnaire (ANQ; Doherty & Feeney, 2004) is a two-part measure allowing the identification of multiple attachment figures with respect to attachment functions. Participants list parents, friends, and romantic partners who are then ranked according to two items assessing each of the four attachment functions. Individuals ranked first and second are given scores of 3 and 2 respectively, and those thereafter, a score of 1. No ranking equates to a score of zero. The attachment strength score is the average score across all functions for each category of person: parent, friend, or partner (if applicable), with higher scores reflecting greater attachment strength to an individual. Average internal consistency was high for the scales (α = .88).

Romantic Relationships. Adolescent romantic relationship status was assessed with a single item. Responses were coded for status and corresponding length of a current romantic relationship on a 5-point scale. These categorizations were recoded into one of three conditions of No Relationship, Shorter-term Relationship (< 1 year) and Longer-term Relationship (> 1 year).

Psychological Distress. The Kessler Psychological Distress Scale (K10; Kessler & Mroczek, 1994) is a 10-item self-report questionnaire assessing the amount of non-specific psychological distress experienced in the recent four weeks. Items are rated on a 5-point scale. Scores are summed, with higher scores reflecting increased distress (Range 10 to 50). Internal consistency was high (α = .89).

Self-Esteem. The Rosenberg Self-Esteem Scale (RSES; Rosenberg, 1965) is a 10-item self-report questionnaire measuring global self-esteem in an adolescent population. It comprises 5 positively worded items and 5 negatively worded items, and uses a 4-point scale. Items are recoded as appropriate then summed. Higher scores reflect higher self-esteem (Range 10 to 40). Internal consistency was high (α = .90).
Results

Preliminary checks revealed one multivariate outlier which was excluded from further analyses. 361 participants (66.1%) reported no romantic involvement. 131 (24.0%) reported a shorter-term relationship. Only 54 (9.9%) reported a longer-term relationship. Of those currently romantically involved, 102 females (71.3%) and 29 males (69%) defined it as a shorter-term relationship, and 41 females (28.7%) and 13 males (31%), as a longer-term relationship.

Two separate one-way MANOVAs were conducted to examine differences in mean levels of psychological health and attachment according to Relationship Status (No Relationship, Shorter-term, and Longer-term). With Psychological Distress and Self-Esteem as DVs, there was no main effect, $F(4, 1070) = 1.62, ns$, Wilk’s Lambda = .99, partial $\eta^2 = .01$ (see Table 1). A second MANOVA was conducted with Mother Attachment and Friend Attachment as the DVs. There were significant multivariate differences with respect to Relationship Status, $F(4, 1084) = 20.88, p < .001$, Wilk’s Lambda = .86, partial $\eta^2 = .07$ (see Table 1). Univariate $F$ tests, using a Bonferroni adjusted $\alpha = .025$, revealed significant main effects for Mother Attachment, $F(2, 543) = 6.42, p = .002$, partial $\eta^2 = .02$. Post-hoc Tukey’s tests demonstrated that adolescents without a romantic relationship reported stronger Mother Attachment than those in a shorter-term relationship. There were no statistical differences in Mother Attachment between adolescents who were not romantically-involved and those who have a longer-term relationship, and between adolescents in shorter-term relationships, and those in longer-term relationships. A main effect was found for Friend Attachment, $F(2, 543) = 19.70, p < .001$, partial $\eta^2 = .07$. Post-hoc tests revealed a linear trend with adolescents without a romantic relationship reporting greater Friend Attachment relative to both adolescents in shorter-term relationships, and those in longer-term relationships, and adolescents in shorter-term relationships indicating more Friend Attachment than those in longer-term relationships. Excluding those without a romantic relationship, adolescents in a longer-term relationship ($M = 2.36, SD = .82$) reported more Partner Attachment than those in a shorter-term relationship ($M = 1.80, SD = 1.00$), $t(119.42) = -3.96, p < .001, \eta^2 = .08$.

Table 1
Means and Standard Deviations for Maternal Attachment, Friend Attachment, Self-Esteem, and Psychological Distress by Relationship Status for all Adolescents

<table>
<thead>
<tr>
<th>Variable</th>
<th>No Relationship M (SD)</th>
<th>Shorter-term M (SD)</th>
<th>Longer-term M (SD)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Mother Attachment</td>
<td>1.16 (.96)</td>
<td>0.85 (.84)</td>
<td>0.89 (.81)</td>
</tr>
<tr>
<td>Friend Attachment</td>
<td>2.03 (.81)</td>
<td>1.79 (.77)</td>
<td>1.34 (.77)</td>
</tr>
<tr>
<td>Self-Esteem</td>
<td>28.53 (5.28)</td>
<td>28.84 (5.12)</td>
<td>27.96 (5.96)</td>
</tr>
<tr>
<td>Psychological Distress</td>
<td>23.29 (6.95)</td>
<td>24.30 (7.87)</td>
<td>23.83 (7.09)</td>
</tr>
</tbody>
</table>

To assess the effects of Mother, Friend and Partner Attachment on psychological adjustment, separate multiple regression analyses were conducted for the two groups with romantic partners with Self-Esteem and Psychological Distress as DVs. Subsequent planned comparisons of relevant $\beta$ weights using the Fisher Z procedure (critical value for one-tailed Fisher’s $Z = 1.65$ at $p < .05$) were performed. Sex and age were also entered into the equations to control for potential differences due to these factors.

Table 2 presents the results for the separate regression models predicting Self-Esteem and Psychological Distress. There are no significant differences in any of the beta weights of interest across the two groups. With regard to Self-Esteem, all of the attachment relationship variables were significant predictors for the shorter-term relationship group. For those in a longer-term relationship, Mother and Friend Attachments were quite strong predictors. Partner Attachment was non-significant but this is mainly due to the smaller $n$ of this group. For Psychological Distress, Mother Attachment was a significant predictor for both groups. Friend Attachment was a significant predictor for the shorter-term relationship group while it wasn’t for those in a longer-term relationship. Again, this is likely due to the smaller $n$ in the second group. Partner Attachment emerged as a significant predictor of Psychological Distress for those in a longer term relationship while it wasn’t significant in the equation for those in a relationship of less then a year. Several trends are apparent, but mostly contrary to the hypothesised direction, with Mother and Friend Attachments more strongly associated with Self-Esteem for adolescents in longer-term relationships than those in shorter-term relationships. There was no indication that Partner Attachment became more important for Self-Esteem for those in a longer-term relationship. On the other hand, there was some evidence that Partner Attachment was more important with respect to Psychological Distress for those in a longer-term relationship.
Table 2
Multiple Regression on Self-Esteem and Psychological Distress by Relationship Status for Romantically-involved Adolescents

<table>
<thead>
<tr>
<th>Variables</th>
<th>Shorter-term Relationship</th>
<th>Longer-term Relationship</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>B(SE)</td>
<td>β</td>
</tr>
<tr>
<td>Self-Esteem</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Sex</td>
<td>0.89(1.09)</td>
<td>.068</td>
</tr>
<tr>
<td>Age</td>
<td>0.00(0.05)</td>
<td>.003</td>
</tr>
<tr>
<td>Mother Attachment</td>
<td>1.74(0.61)</td>
<td>.297*</td>
</tr>
<tr>
<td>Friend Attachment</td>
<td>1.74(0.70)</td>
<td>.270*</td>
</tr>
<tr>
<td>Partner Attachment</td>
<td>1.25(0.52)</td>
<td>.247*</td>
</tr>
<tr>
<td>Psychological Distress</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Sex</td>
<td>-4.80(1.68)</td>
<td>-.258*</td>
</tr>
<tr>
<td>Age</td>
<td>0.10(0.09)</td>
<td>.099</td>
</tr>
<tr>
<td>Mother Attachment</td>
<td>-2.07(0.95)</td>
<td>-.226*</td>
</tr>
<tr>
<td>Friend Attachment</td>
<td>-2.88(1.08)</td>
<td>-.287*</td>
</tr>
<tr>
<td>Partner Attachment</td>
<td>-1.17(0.80)</td>
<td>-.148</td>
</tr>
</tbody>
</table>

*p < .05.

Discussion

The results of the present study partially support the hypotheses. Transference of attachment to romantic partners was documented in late adolescence and romantic partners were found to influence adolescent psychological health independent of contributions from mothers and friends. However, the study failed to establish that the role of attachments with respect to psychological health changed in relation to adjustment as a function of relationship length, even though attachment transfer seemed to take place. There appeared to be no repercussions on psychological health for adolescents not involved in a romantic relationship.

The inability to find effects in psychological health in relation to romantic involvement parallels the results of McMahon and Wilkinson (2005). Adolescents without romantic partners are more invested in their relationships with parents and peers, with these relationships more predictive of psychological adjustment. Non-involvement in romantic relationships does not appear to constitute the same risk for psychological health in adolescents as it does with adults (Feeney & Noller, 1996). None-the-less, a transfer of attachment to the romantic partner was demonstrated with an increase of attachment strength to the romantic partner as a function of relationship length. Friend attachment also evinced a linear decline, corresponding with suggestions that romantic partners replace, to some extent, close friendships as sources of caregiving, affiliation and attachment (Furman & Wehner, 1997). Maternal attachment was also weaker for those in a shorter-term relationship relative to romantically-uninvolved adolescents but did not decline further for those in a romantic relationship of more than a year. Despite reporting similar mean levels of maternal attachment to those in shorter-term relationships, the small sample size of adolescents involved in longer-term romantic relationships resulted in a larger standard error and the inability to establish a significant difference between this group and romantically-uninvolved adolescents. While some initial transfer of attachment may occur from mothers to romantic partners, it seems that this plateaus and that any further transfer appears to be from friend attachments to romantic partners.

Maternal, friend, and partner attachments were found to independently influence adolescent psychological health, but did not establish differential contributions on psychological health across the two romantically-involved groups. There was a trend for partner attachment to be more important in predicting psychological distress for adolescents in longer-term relationships, which corresponds with romantic partners becoming increasingly important as attachment figures (Furman & Wehner, 1997). However, maternal attachment was of the same magnitude as partner attachment in this regression equation. This finding is significant in that it supports the view that even if adolescents have longer-term romantic partners, other attachment figures remain potent sources of emotional and social support (Wilkinson, 2007). Thus, transference of attachment to romantic partners in late adolescence does not necessarily translate into increased importance of the romantic partner for adolescent adjustment at the expense of existing attachment figures (Furman & Buhrmester, 1992).
Friend attachment did decline somewhat in predictive power for psychological distress across the two groups but became significantly more influential for self-esteem. This indicates that the associations between friend attachment and psychological distress may become increasingly mediated by self-esteem as romantic relationship length increases (Wilkinson, 2004). This finding emphasises the importance of using multiple indicators of adjustment in this research area. It is clear that different attachment relationships are related to different aspects of adjustment in adolescence (Wilkinson & Parry, 2004). Mother and friend attachments generally trended towards an increase in influence on psychological wellbeing across the two groups, suggesting that adolescents are using an attachment figure more specifically for fulfillment of certain functions, which is otherwise obscured by the utility of attachment strength. Parent and peer relationships appear to remain salient despite the formation of romantic relationships, and affect adolescent adjustment in different ways (Wilkinson, 2004).

A number of limitations of the present study and further avenues for research need to be addressed. Firstly, the majority of adolescents in this study did not define themselves as having a current romantic relationship and did not appear particularly troubled by this. This may indicate that there are significant cultural differences between Australian and US adolescents with regard to normative aspects of dating and romantic involvement. There are also known cultural differences in attachment per se (Mikulincer & Goodman, 2006) and research is needed to establish if there are cultural differences in attachment transfer processes. The current study also included more females than males and it may be the case that this influenced the results. Given the developmental differences in adolescent girls and boys, it would be beneficial for future research on this topic to not only seek a larger overall sample but to seek equal numbers of males and females. Finally, the use of cross-sectional data prevents the inference of causal links, and therefore longitudinal studies documenting the transfer of attachment functions between attachment figures, the development of romantic relationships and implications for psychological wellbeing need to be undertaken.

In conclusion, the present study is one of the few studies to systematically examine the transference of attachment to romantic partners among upper high school students. It extends on previous research by adopting attachment strength as an index of reference and demonstrated that romantic partners influence adolescent psychological health independent of contributions from mother and friend attachments. However, the importance of these romantic attachments did not occur at the expense of existing attachment figures, particularly maternal attachment, suggesting that new attachment relationships are formed as part of the expansion of the adolescent’s attachment network. Adolescents without a girlfriend or boyfriend appear just as well-adjusted as those with a romantic relationship, undermining a widely-held belief in popular culture that romantic relationships are essential to adolescent wellbeing.

References


**Address for Correspondence**

Dr. Ross Wilkinson
Email: Ross.Wilkinson@anu.edu.au
Attachment and Need for Certainty and Discovery: The Development of Information Orientations

Charlotte Gray (charlotte.gray@act.gov.au)
Ross B. Wilkinson (Ross.Wilkinson@anu.edu.au)
School of Psychology
The Australian National University
James Schuurmans-Stekhoven (jschuurmans-stekhoven@csu.edu.au)
School of Psychology
Charles Sturt University

Abstract

Recent attempts have been made to link research in individual differences in information orientation and psychological attachment. To examine the relationship between information approach styles and attachment working models the present study employed the newly developed Need for Certainty and Discovery Scales and both dimensional and categorical self-report measures of attachment. Differential predictions were made for the relationship between the information approach dimensions (Need for Certainty and Need for Discovery) and attachment dimensions and styles. A cross-sectional survey of 704 older adolescents and young adults indicated only a weak relationship between attachment dimensions and information approach styles. Using the categorical attachment measures, Secure and Dismissing styles showed higher Need for Discovery compared to Fearful and Preoccupied styles. Dismissing styles were the only group to indicate a low Need for Certainty. The results indicate that high attachment anxiety may inhibit exploratory behaviour in adults.

There are a wide variety of ways we can think about, and behave in, relationships. Studies have shown that there is a large degree of consistency in how an individual perceives their relationships (e.g. Collins, 1996; Fraley, 2002). However, the extent to which these relationship styles extend to areas of personality unrelated to interpersonal relationships has not been comprehensively established. One area of interest is the relationship between interpersonal style and information approach and avoidance. Individual differences exist in information seeking, and how comfortable people are with ambiguity. Individuals show continuity across time and domains in their orientation towards new information. A possible explanation for the development of information orientations is that the way people think about interpersonal relationships is generalised to a way in which to approach their environment. Early in life, expectations about the stability and safety of the environment are based largely on interactions with others. The beliefs formed during this time may affect information orientations later in life. One perspective useful in exploring this area is Attachment Theory.

Attachment theory, developed by Bowlby (1963, 1973, 1980), explains aspects of human behaviour through interpersonal bonds acquired early in life. Over time, these early interactions teach an infant about how caregivers respond to an infant’s needs and are later generalised to an individual’s expectations for future interpersonal relationships. Working models are internal cognitive representations underlying an individual’s interactions with the world. In adulthood, these working models are responsible for many facets of close relationships, including expectations, and filtering and integrating new information, (Bowlby, 1973; Feeney & Noller, 1996). A major assumption in attachment theory is that patterns of attachment are relatively stable over time, and become a characteristic of the individual. While there has been some debate about the extent that attachment is stable across time and relationships, there has been a large amount of research suggesting that working models are relatively stable across time (Feeney 2002; Hazan and Shaver, 1987). This continuity means that attachment working models developed early in life may be assessed during adolescence or adulthood.

Bartholomew and Horowitz (1991) developed a four-category, or two-dimensional, model of adult attachment based on Bowlby’s conceptualisation of the model of self and other. Their model identified individuals as Secure, Preoccupied, Dismissive-Avoidant and Fearful-Avoidant. A number of researchers have converted these category descriptions into multi-item scales, with items representing each construct apparent in the category descriptions. A number of studies have found that two dimensions could be found to underlie these multi-item measures. Brennan, Clark, and Shaver (1998) described these two dimensions as avoidance of intimacy and anxiety about relationships. Brennan et al. extended these dimensions to describe four categories across these two dimensions – Secure, Anxious-Ambivalent, Avoidant, and Disoriented/Disorganised. A Secure individual would be low in both anxiety and avoidance; an Anxious-Ambivalent individual would be high in anxiety but low in avoidance; an Avoidant individual would be low in anxiety but high in avoidance; and a Disoriented/Disorganised individual would be high in both anxiety and avoidance. In infancy, attachment working models direct behaviour including maintaining proximity to caregivers and exploratory behaviour. If
exploratory behaviour in infancy is governed, in part, by working models of attachment, then it is plausible that exploratory behaviour in adulthood may also be directed by these models.

Sorrentino and Roney (2000) developed the concept of uncertainty orientation to describe individual differences in curiosity and openness to new beliefs and ideas. These orientations are thought to be global and enduring across time. Sorrentino and Roney classified individuals as either uncertainty-oriented (UOs) or certainty-oriented (COs). UO individuals enjoy having their belief systems challenged, and actively seek out new information. CO individuals avoid ambiguity, leading to closed-mindedness. COs are said to be less tolerant of those unlike themselves, and perform differently to UO’s in a variety of situations. While various methods have been suggested to capture this construct, the development of uncertainty orientations is less understood.

Sorrentino and Roney (2000) suggest a number of possible developmental paths. One is that individuals who develop a general trust in the world become uncertainty-oriented due to the ability to deal effectively with their environment, while those who view the world as threatening become certainty-oriented:

"The key here is... a deeper psychological dynamic that has its roots in childhood experiences" (p.157).

From an attachment perspective, this explanation clearly links the development of uncertainty orientations with the concept of the secure base. Bowlby (1973) argued that the existence of a trusted secure base allows a child to explore the surrounding environment. Working models produced through early attachment relationships may develop into schemas for information approach and avoidance, responsible for uncertainty orientations.

Various studies have attempted to link individual differences in information orientations to attachment style. Mikulincer (1997) found that Secure and Anxious-Ambivalent participants scored higher in curiosity compared to Avoidant participants. In a subsequent study, Mikulincer assessed cognitive closure, measuring preference for order, discomfort with ambiguity, decisiveness, and closed-mindedness. Ambivalent and Avoidant participants had a higher need for order and predictability. Ambivalent participants had higher levels of discomfort with ambiguity compared to Secure participants. No significant differences were found between Secure and Avoidant participants in discomfort with ambiguity. Cognitive closure can be seen as an alternative description for certainty-oriented, again suggesting that uncertainty orientations may be linked to attachment working models.

Mikulincer and Arad (1999) suggest that Secure individuals are more confident in their ability to deal with distress, so may be more able to incorporate new data at the price of experiencing a temporary state of confusion and ambiguity. Anxious-ambivalent individuals may view the world as filled with imminent threats, and so block incorporation of new information. Avoidant individuals may not process new information because they exclude distress-related cues as a form of defence. Together these studies suggest that there is a relationship between attachment patterns and information orientations. Schuurmans-Stekhoven (2005) developed the Optimal Ignorance Model as an alternative approach to capture individual differences in managing uncertainty. Schuurmans-Stekhoven suggests uncertainty orientations are best captured as two independent dimensions within a given individual. ‘Need for Discovery’ measures the extent to which an individual seeks out new information. ‘Need for Certainty’ reflects difficulty with integrating disparate information with current beliefs.

The current study aims to use Schuurmans-Stekhoven’s Optimal Ignorance Model to assess information orientations and their relationship to attachment working models. The study uses both a four-category approach and a two-dimensional model to establish adult attachment styles. Because the debate between the categorical and dimensional approaches has not been finalised, the present study uses both models to measure attachment. One possible pathway to a high need for certainty may be through lack of a ‘secure base’ (Bowlby, 1973). The perception that significant others are not there as a safe base may develop into a general dislike of ambiguous situations.

From an attachment perspective, the Need for Discovery Scale can also be viewed as an extension of Bowlby’s theory that individuals have an innate need to explore their environment (1973).

Anxiety and need for certainty appear linked through the concept of the secure base. It is therefore predicted that the Need for Certainty Scale will be positively correlated with the Anxiety Scale. Bowlby’s concept of exploration (1973) appears to link need for discovery and avoidance, with support from previous studies. Therefore it is predicted that there will be a negative correlation between the Need for Discovery Scale and the Avoidance Scale.

Using Bartholomew and Horowitz’s (1991) Relationship Questionnaire, it is predicted that Secure and Dismissing individuals will rate themselves lower on the Need for Certainty Scale compared to Preoccupied and Fearful individuals. Secure and Dismissing categories should be low in anxiety, while the Preoccupied and Fearful categories should be high in anxiety. This is based on the assumption that the anxiety and avoidance measures can be mapped onto the four category model. It is also predicted that individuals with Secure and Preoccupied attachment styles will have a higher need for discovery, while individuals with Dismissing and Fearful attachment styles will have a lower need for discovery.
Method

Participants

The sample consisted of 704 students recruited from ACT colleges (n = 586) and first year university classes (n = 118), including 484 females (68.8%) and 220 males (31.2%). The age range was 14.5 to 23 years (mean age = 17.8 years, SD = 1.5).

Measures

The first measure of attachment was a modified version of the Experience in Close Relationships Scale developed by Brennan et al. (1998). This questionnaire is made up of two scales, measuring the dimensions of avoidance and anxiety. These scales have been widely used and are highly reliable (Brennan et al. report $\alpha = .94$ for the Avoidance Scale and $\alpha = .91$ for the Anxiety Scale).

The second measure of attachment was a modified version of the Relationship Questionnaire developed by Bartholomew and Horowitz (1991). Participants were asked to choose one of four attachment style descriptions characterising feelings and behaviour in relationships which best described them. The four descriptions corresponded to Secure, Preoccupied, Dismissing, and Fearful attachment styles.

Need for certainty and discovery were measured using the Need for Certainty and Need for Discovery subscales from Schuurmans-Stekhoven’s Optimal Ignorance Model (2005). Examples of certainty items are “Rules give me certainty” and “I’m attracted to familiar situations”. Examples of discovery items are “I enjoy learning for its own sake” and “I like to find out new facts about the world even if this means I have to rethink my beliefs”. Schuurmans-Stekhoven reported $\alpha = .78$ for the Need for Discovery Scale, and $\alpha = .80$ for the Need for Certainty Scale.

Results

Compared to the distribution in the original sample by Bartholomew and Horowitz (1991), the current study found more participants identified themselves as Secure (62.5% compared to 46%) and fewer identified themselves as Dismissing (5.2% compared to 14%). The distribution of Preoccupied and Fearful attachment styles was similar to the original study. The reliabilities for the scales used (Table 1) are similar to their original sources.

It was hypothesised that the Need for Certainty Scale would be positively correlated with the Anxiety Scale. It was found that there was only a very small correlation between these two scales (Table 1). It was also hypothesised that the Need for Discovery Scale would be negatively correlated with the Avoidance Scale. This was also not supported, with another very small correlation between the scales. The correlation between Need for Certainty and Avoidance was even lower, as was the correlation between the Need for Discovery and Anxiety.

Table 1

<table>
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<tr>
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<th>Certainty</th>
<th>Discovery</th>
<th>Anxiety</th>
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<tr>
<td>Certainty</td>
<td>.781</td>
<td></td>
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<tr>
<td>Discovery</td>
<td>- .162*</td>
<td>.804</td>
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<tr>
<td>Anxiety</td>
<td>.124*</td>
<td>- .089*</td>
<td>.881</td>
<td></td>
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<tr>
<td>Avoidance</td>
<td>- .076*</td>
<td>- .104*</td>
<td>.399*</td>
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Note: alpha coefficients presented in the diagonal. *p < .05

To evaluate the relationship between attachment styles and individual differences in information orientations from a categorical perspective, the Relationship Questionnaire was examined for its relationship to the Need for Discovery Scale and the Need for Certainty Scale. A multivariate analysis of variance yielded a significant overall main effect, Wilks’s $\Lambda F(6,1360) = 5.366, p < .001, \eta^2 = .023$).

The MANOVA revealed significant overall differences between the categories in levels of Need for Certainty ($F(3,682) = 4.110, p = .007, \eta^2 = .018$). It was hypothesised that individuals in the Secure and Dismissing categories would report lower need for certainty than those in the Fearful and Preoccupied categories. This hypothesis was supported using a priori contrasts ($t(64.09) = -2.479, p = .016$). However, post hoc analysis showed that the a priori contrasts did not show the entire picture. Using Scheffé post-hoc comparisons,
significant differences were found in mean levels of Need for Certainty between the Dismissing attachment category and the Secure ($p = .064$) and Preoccupied categories ($p = .007$).

Figure 1: Differences in need for certainty across attachment styles

It was hypothesised that individuals in the Secure and Preoccupied attachment groups would report higher need for discovery than those in the Fearful and Dismissing categories. The MANOVA showed a univariate main effect for Need for Discovery between Attachment styles ($F(3,681) = 6.632, p = .001, \eta^2 = .028$). Analysis of Variance (ANOVA) was then conducted using specific contrasts to test this hypothesis. The hypothesis that Secure and Preoccupied groups would show higher Need for Discovery was not supported using these contrasts ($t(681) = -.408, p = .684$). Scheffé comparisons showed significant differences in mean levels of Need for Discovery between the Secure and Fearful Attachment groups ($p = .005$) and between the Fearful and Dismissing Attachment groups ($p = .022$).

Figure 2: Differences in need for discovery across attachment styles

Discussion

Need for discovery, Need for Certainty, across attachment dimensions

While there was a small significant positive correlation between Need for Certainty and Anxiety, this was most likely caused by the large sample size, rather than a true effect. The first explanation for this lack of correlation is that no relationship exists between anxiety and need for certainty, or that anxiety about relationships only accounts for a tiny part of the way we approach new information. Many factors shape our
beliefs about relationships, and it is possible that those factors that encourage an individual to feel anxious about relationships do not play a part in the development of certainty orientations. Another explanation is that there is not enough variation in Need for Certainty scores within this sample to capture a correlation with other constructs.

The hypothesis that need for discovery would be negatively correlated with avoidance was also not supported. Again, the small negative correlation was statistically significant but is not considered meaningful. While it is possible that there is no relationship between need for discovery and avoidance, Mikulincer’s findings (1997) suggest otherwise. Another explanation is that there is not enough variation in need for discovery in this sample to find a correlation with avoidance. This is not a particularly plausible explanation, as both the Need for Discovery Scale and the Avoidance Scale showed relatively normal distributions.

A third explanation accounts for the findings for both avoidance and anxiety. In the current study, no relationship was found using continuous measures of attachment dimensions. It is possible that this two-dimensional model of attachment does not have the strength to capture these relationships. While the continuous measure of attachment has been considered in many ways superior to a categorical measure (Brennan et al., 1998; Collins & Read, 1990), the clear boundaries between attachment categories may make it easier to pick up differences in information orientations. One reason for this may be that anxiety and avoidance levels amongst adolescents may not be entirely based on underlying working models of attachment. Due to fluctuations in mood and salient relationships, perhaps these continuous measures are less stable than the categorical measures of attachment style. The explanation that the continuous measures of attachment dimensions are not as effective as a categorical approach may account for the difference in findings between the present study and Mikulincer’s study (1997). If this is the case, the second set of hypotheses, relating to specific attachment categories, may be of more use.

**Need for Certainty and Need for Discovery across Attachment Categories**

It was hypothesised that individuals who categorised themselves as having a Secure or Dismissing attachment style would rate lower on the Need for Certainty Scale. As predicted, the Dismissing attachment category was significantly lower in need for certainty. Contrary to predictions, the Secure attachment group did not differ significantly from the Preoccupied or Fearful groups. These findings suggest that those individuals who identify themselves as having a Dismissing attachment style are different from the other attachment styles in their certainty orientation. Individuals from this small subgroup appear to have a much lower need for certainty than others. The majority of research into uncertainty orientations has viewed need for certainty as a negative trait. The present study suggests that the majority of the population, including those with Secure attachments, have a high need for certainty.

The Dismissing attachment style has been associated with disengagement with interpersonal relationships. It may be that this extends to a general disconnection with the world, which is exhibited as lower need for certainty. This would suggest that rather than actively approaching uncertainty in order to resolve it, these individuals are merely comfortable with ambiguity. The Need for Certainty Scale does not adequately differentiate individuals who are driven to approach ambiguous information in order to resolve it, and those who are disengaged and are therefore not distressed by ambiguous information. Another element of the Dismissing attachment style is independence. Because the Need for Certainty Scale includes some items that may be seen as indicating dependence on others (e.g. following social rules helps me to cope), individuals with a Dismissing attachment style may have described themselves as uncertainty-oriented.

It was hypothesised that individuals with a Secure or Preoccupied attachment style would rate higher on the Need for Discovery Scale, compared to the Fearful and Dismissing categories. Participants from the Secure attachment category did show significantly higher need for discovery compared to those in the Fearful category. However, those with a Preoccupied style did not have a similarly high need for discovery. The Dismissing category did however show higher need for discovery compared to the Fearful category. These results suggest that anxiety may be a factor in differences in need for discovery. Both the Secure and Dismissing attachment categories are low in anxiety and also high in need for discovery. The Preoccupied and Fearful categories, on the other hand, are high in anxiety and low in need for discovery. It could be that individuals who experience high levels of anxiety about their relationships are less able to explore their environment. While not originally predicted, this makes sense based on Bowlby’s concept of the secure base and exploration. A lack of safety and security in close relationships may prevent the development of an individual’s need for discovery. This could be either because the world is seen as a threatening place that they do not wish to explore, or because there is no ‘secure base’ from which to explore.

**Limitations and Conclusions**

One limitation of this study was the measurement of attachment. As discussed earlier, the issue of how to best measure adult attachment remains controversial. Many researchers have recommended a two-dimensional
approach as a more effective measure of attachment (Brennan et al., 1998; Collins & Read, 1990). In the current study, the categorical approach seems better able to capture differences in need for certainty and need for discovery; however, the forced-choice may be subject to higher levels of bias. Because of the discrepancy between the two measures, future research is needed to further investigate the relationship between attachment and need for certainty and need for discovery. Another problem was the relatively small sample of individuals in the Dismissing category. The present study found significant differences between this group and the other attachment categories. However, a greater number of individuals in this attachment category may have assisted interpretation of findings.

The present study examined the relationship between attachment working models and exploratory behaviour from a new perspective. By using an opponent processes model of uncertainty, this study was better able to capture individual differences in information orientations. Using both a dimensional and categorical approach to attachment has furthered the debate surrounding these two perspectives. The study found that individuals who classified themselves as having a Dismissing attachment style were the only group to display low need for certainty, possibly due to disengagement or avoidance of reliance. This finding contradicts other studies in that Secure individuals were relatively certainty oriented in this study. The study also found that individuals from the Secure and Dismissing categories showed higher need for discovery. This may be due to lower levels of anxiety about relationships.

This study has provided a first step towards linking attachment, need for certainty and need for discovery. While the exact relationship is still unclear, the present study provides support for the theory that the way individuals approach new information is directed in part by interpersonal relationship styles.

References


For correspondence, please contact:

Dr Ross Wilkinson
School of Psychology, The Australian National University.
Ross.Wilkinson@anu.edu.au
Couple Attachment Interview: Theoretical discussion and sample narratives

Alana Howells (akhowell@deakin.edu.au)
School of Psychology
Deakin University

Jane McGillivray (jane.mcgillivray@deakin.edu.au)
School of Psychology
Deakin University

Abstract

Most measures of adult attachment can be divided into two categories: self-report questionnaires and interviews. This paper presents a theoretical discussion of the Couple Attachment Interview (CAI; Silver & Cohn, 1992). The CAI, which is based upon the Adult Attachment Interview, assesses attachment patterns within couple relationships. A distinguishing feature of this interview is the Couple Attachment Interview Coding System (CAICS; Cowan, Cowan, Alexandrov, Lyon, & Heming, 1999), a unique scoring system that assesses attachment in both a categorical and dimensional manner. Relationships between CAI and other measures of adult attachment are discussed. Procedures for transcribing and coding the interview are presented in the context of sample narratives. These narratives, which are drawn from an ongoing longitudinal study of attachment, relationship satisfaction, and psychological functioning, will demonstrate the complexity and richness of the measure.

The past two decades have seen considerable research being conducted into adult attachment, resulting in a variety of adult attachment measures being developed and used. These measures primarily fall into two broad categories: self-report measures and interview measures. While both measures yield pertinent information about attachment patterns, interview measures have the benefit of providing extensive qualitative information about attachment relationships beyond what is generally provided by self-reports (Alexandrov, Cowan, & Cowan, 2005). This paper will focus on discussion of the Couple Attachment Interview (CAI; Silver & Cohn, 1992), a measure of attachment in romantic relationships. Information regarding the CAI will demonstrate how this measure can be used to assist both researchers and clinicians in identifying attachment issues in couples.

Longitudinal data, which is not a common aspect of interview-based couple attachment research (Scharfe, 2003), will be presented from a longitudinal study, highlighting attachment stability and change over time.

Couple Attachment Interview

The Couple Attachment Interview (CAI) is a semi-structured clinical interview designed for use with adults in a current romantic relationship. Based on the Adult Attachment Interview (AAI; George, Kaplan, & Main, 1996) it is designed to measure the individual’s “state of mind with respect to security of attachment to one’s partner” (Alexandrov et al., 2005). Like the AAI and many other interview measures of attachment, the technique underlying the CAI is one of “surprising the unconscious” (Cowan, Cowan, Alexandrov, Lyon, & Heming, 1999; George et al. 1996), with emphasis on the importance of coherence of mind when assessing attachment. This is examined by providing the participant with opportunities to support or contradict assertions throughout the interview. Low coherence, as evidenced by substantial contradictions, denial, vagueness or failure to support previous statements, is indicative of insecure attachment patterns, while high coherence and metacognitive awareness are linked to secure attachment.

In contrast to the AAI, the CAI specifically measures attachment in the current romantic relationship, yielding information about working models specific to the current partner. It comprises a series of questions about aspects of the current relationship and the individual’s recall of occasions when they have experienced certain emotions. These questions, along with follow-up probes, are asked in a predetermined order. Unlike some other attachment interviews, it does not ask about the individual’s perception of their parents, or their experiences of loss and trauma. The CAI generally takes between 40 and 120 minutes to administer, depending on the response characteristics of the individual being interviewed.

The CAI has been shown to be a valid instrument for assessing romantic attachment, with reasonably high internal consistency. Previous studies have shown interrater reliability, as measured by Pearson correlations, to vary between .63 and .92 (Alexandrov et al., 2005).

Coding the Couple Attachment Interview

A distinguishing feature of the CAI is the Couple Attachment Interview Coding System (CAICS; Cowan et al., 1999). This coding system, which is partially based upon coding systems for the AAI and Current Relationship Interview (CRI; Crowell & Owens, 1998), rates each interview according to its similarity to secure,
dismissing, and preoccupied attachment prototypes. Unlike the AAI coding system, it does not comprise multiple scales, and is therefore easier and faster to use than the AAI coding system. A further advantage of the CAICS is its ability to consider attachment both dimensionally as well as categorically. This is in accordance with current ideas on conceptualisation of attachment, which suggest that it is preferable to consider attachment in terms of dimensions rather than types (e.g., Fraley & Waller, 1998). The CAICS yields a score on each of the attachment categories on a nine-point scale, meaning that a transcript may have, for instance, both dismissing and preoccupied qualities. Given that each insecure category of attachment is believed to have aspects of other insecure categories (Slade, 1999), particularly at an unconscious level (Weiner, 2003), this capacity to assess transcripts from the perspective of several attachment categories is beneficial.

Comparison With Other Interview Measures of Couple Attachment

Several interview measures of attachment in romantic relationships exist. Most of these measures have their basis in the AAI, but differ from each other in their objectives and scoring processes.

Like the CAI, the Current Relationship Interview (CRI; Crowell & Owens, 1998) and the Marital Attachment Interview (MAI; Dickstein, 1993; Dickstein, Seifer, St Andre, & Schiller, 2001) examine working models in the current romantic relationship. The CRI has its own scoring system, based upon the AAI, while the MAI uses a slightly modified form of the AAI scoring system. Consequently, these interviews are more time-consuming to score than the CAI, and do not yield dimensional measures of attachment.

The Peer Attachment Interview (PAI; Bartholomew & Horowitz, 1991) and its newer, modified counterpart, the History of Attachments Interview (HAI; Bartholomew, Henderson, & Dutton, 2001), use a four-category approach to assessing attachment. The HAI is a comprehensive interview that examines attachments to parents, peers, and romantic partners, and yields continuous scores of attachment. Because it is not restricted to the assessment of romantic relationships, it may not be an ideal measure for studies focusing on intimate relationships. Furthermore, unlike the CAI, training in how to code the interview is lengthy, taking at least 200 hours (Bartholomew, 2007).

Some interview measures, such as the Romantic Attachment Interview (RAI; Cockery & Gjerde, 1989) and the Romantic Relationship Interview (RRI; Furman, Simon, Shaffer, & Bouckey, 2002), have been designed to assess romantic attachment in adolescents and young adults. These measures assess romantic attachment in general and do not require the participant to be in a current romantic relationship. The RRI is coded on the basis of scales from the AAI and CRI, making it more difficult to score than the CAI. Conversely, the RAI uses a specially devised Q-Set to assess attachment. This makes the RAI faster to score than interviews using AAI coding systems, with no resulting loss in validity (P. Gjerde, personal communication, July 23, 2007). However, as the Q-Set comprises 57 items across seven categories, which are then compared with prototype composites for secure, dismissing and preoccupied attachment, this scoring process may be more time-consuming than the CAICS.

The Attachment Style Interview (ASI; Bifulco, Moran, Ball, & Bernazzani, 2002a) takes a different approach to most other attachment interview measures, as it focuses on overt feelings about close relationships rather than unconscious processes. It categorises individuals into one of five attachment categories in regard to their relationships with their partner and close others. This interview is quick to administer and score, but does not yield the richness of information about state of mind with respect to attachment that is a characteristic of interview measures such as the CAI.

The Couple Attachment Joint Interview (CAJI; Fisher & Crandell, 2001) is a promising concept. This interview involves both partners in the relationship being interviewed concurrently, and aims to provide an overall measure of relationship security rather than individual attachment ratings. However, it is currently not ready for use, as its coding manual has not been fully developed. There are many difficulties inherent in creating such a measure of couple attachment, placing doubt on the ability of the CAJI to become a meaningful instrument for examining attachment (Lanman & Grier, 2003).

Uses of the CAI

As the CAI is easier to score than many other attachment interviews, there is potential for its use in a broad range of settings. Like other attachment interviews, it may be used in research alongside and as a complement to self-report measures of attachment.

The CAI also provides a useful measure of working models specific to the current relationship. Working models are theorised to comprise both implicit (unconscious) and explicit (conscious) aspects (Collins, Guichard, Ford, & B.C. Feeney, 2004). While self-report measures of attachment focus on explicit content of working models, the scoring system used for the CAI, as with most other attachment interviews, codes the interview in regard to implicit content (Collins et al, 2004). However, the CAI also yields extensive explicit data about relationship experiences. There is potential for this data to be analysed separately and used to measure explicit aspects of working models.
It has been suggested that the AAI could be a useful tool in aiding diagnosis in clinical settings, or in evaluating the outcome of psychotherapy (Steele & Steele, 2003). Similarly, it would be possible for the CAI to be used in clinical assessment of couples presenting for counselling, as part of both initial assessment and evaluation of outcome.

Case Examples

The following excerpts from CAI narratives are drawn from a couple, “Mr and Mrs F”, who participated in an ongoing longitudinal study of attachment, relationship satisfaction, and psychological functioning. Mr and Mrs F were administered the CAI at six-month intervals. As their narratives will illustrate, the CAI is transcribed verbatim, in order to show the coder speaking difficulties and relevant expressions of emotion, such as crying or laughing (Cowan et al., 1999).

“Mr F”

Mr F’s transcripts showed a strong tendency to minimise the importance of attachment-related issues. He often provided superficial statements that suggested his relationship was good, but could not back these up with rich, believable examples of the relationship. His responses to questions tended to be brief. Both of Mr F’s transcripts were classified overall as dismissing.

At Time 1, Mr F’s transcript showed some signs of secure attachment, receiving a score of 4 on the secure scale, but generally lacked the valuing of attachment that is expected in a highly secure transcript. The transcript had many dismissing characteristics (7), such as minimisation of the importance of his attachment relationship, and a reluctance to consider relationship issues in depth. There were few instances of preoccupied qualities (2).

The following excerpt is from responses to questions about Mr F engaging in behaviour that would make his partner feel rejected. It shows Mr F contradicting his earlier statement about his partner being upset by his behaviour by later denying his partner felt rejected. Such contradictory statements are common in insecure transcripts and indicate low coherence of mind.

Interviewer: And uhm, have you ever done anything towards Partner that you’d consider to have been rejecting?

Mr F: Maybe when I gave my brother a hand [financially] ...I think that [incident] sort of bothers her, yeah (mmmm). That, that, that’s bothered her a fair bit--, mmmm. (mmmm)

Interviewer: And uhm, do you realise, did you realise at the time that she felt rejected by you?

Mr F: I, I don’t think she felt rejected, (mmmm) because she just felt uh, cause she said yes, and if you say yes, how can you feel rejected? (mmmm) If you say no well think yeah--, so I don’t think rejection comes into it at all.

Mr F also minimised the importance of thinking about attachment-related issues, and tended to convey that such issues were not worth discussing, as the following excerpt demonstrates:

Interviewer: Uh, would you say there’s anything about your experiences in previous adult relationships that’s affected your relationship with Partner?

Mr F: Nah (mmmm) . . . {{3 secs}} Because like I said I’m just uh--, I don’t think that anything that happened in the past would--, well maybe you learn from it, (mmmm), but, uh, I just tinker along. Uh, you know what’s, uh, the good thing is what’s now and what’s going to happen in the future, and that’s how I look at things, (mmmm) always done that, and probably always will, yeah. (mmmm)

Here, Mr F demonstrates a lack of reflection, and downplays the need to consider issues that have influenced his relationship.

At Time 2, Mr F’s state of mind with respect to his attachment to Mrs F had not substantially changed. He again fell into the dismissing category and retained the same scores on each attachment prototype as at Time 1. One notable difference in Mr F’s Time 2 transcript was increased discussion of topics unrelated to his relationship with his partner, suggesting avoidance of attachment issues. The following excerpt, a response to how his partner copes with being unwell, shows him initially answering the topic and then moving to unrelated matters:

“She likes the bed, she likes being in bed and reading a book, having cups of coffee. You know, she’s not much of a, al-, although recently she did a lot of cooking over the whole week. (mmmm) --Uh, I don’t think her family really liked cooking a lot, (mmmm) they tend to eat out a lot . . . . . . . {{6 secs}} But my family’s a little different, just the opposite, we like to cook, cook a lot.”
Mr F continued to deny or minimise his feelings, often insisting on a lack of memory for significant events, as the following excerpt shows:

**Interviewer:** Uhmm, can you think of a particular time when you felt rejected by Partner?

**Mr F:** There have been a few, but I can’t recall anything. (mmmm) It doesn’t worry me--, doesn’t worry me.

“**Mrs F**

Mrs F’s transcripts showed a strong tendency towards vague, passive, circumstantial speech, with periods of uncontained upset, anger, and resentment towards her partner. While Mrs F’s Time 1 transcript was classified overall as secure, it also contained substantial aspects of the preoccupied prototype. She showed reasonable coherence of mind and achieved a secure score of 6, but sometimes discussed people or incidents unrelated to her partner, and at times downplayed the importance of attachment-related issues. As such, she achieved a dismissing score of 3. There were some instances of uncontained upset or anger throughout the transcript, and relationship issues were discussed at length. Consequently, her Time 1 transcript was given a preoccupied score of 5.

The following are some examples of metacognitive awareness, which is an important aspect of secure attachment, as it suggests high coherence of mind. As these excerpts show, Mrs F found it difficult to answer some questions, but was aware of these difficulties.

“I, I’m not sure, that’s not very informative there, is th-, ma-, is there another way you could ask me that, uh?”

“So-, sorry this is very vague.”

Mrs F’s tendency towards vague, passive speech, where she struggled to convey meaning or find words, is shown as follows, where she was discussing feeling frightened or worried:

“Well, it’s disappointing, ve-, very disappointing, c-, cause he was, like, a person who was, like, h-, glued to me, you know, (mmmm) yeah, uhm, uhm, s-, but he, he, you know, he had, always had that commitment to his, his family as well, (mhmm) ss-, so, uhm . . . {{3 secs}} yeah, I--, I--, was--, uh--, ye--, it’s disappointing...”

At Time 2, Mrs F’s transcript showed increased preoccupied (6) and decreased secure (5) qualities, while her dismissing score remained the same (3). Overall, she fell into the preoccupied category, and her transcript showed increased anger and resentment towards her partner. This angry preoccupation was a prominent feature of her Time 2 transcript that was not as evident at Time 1, where her tendencies towards preoccupation with relationship issues were more confused than angry. The following excerpts illustrate this overt anger and bitterness, with attempts to elicit agreement and sympathy from the interviewer:

**Interviewer:** Has there been a time when Partner did or said something to you that you felt at the time might have threatened your relationship?

**Mrs F:** --Yeah--, cause uhm, he didn’t want me to do this performance, and I said to him, “If I do it you won’t love me any more,” and he said yes. (mmmm) Yeah, that was clarity, wasn’t it?

**Interviewer:** Has Partner ever done anything towards you that you would consider to be abusive?

**Mrs F:** Oh, just only saying, saying that, I don’t care what you think (mmmm) or, yeah, you’re not important, I don’t care what you think, what you want doesn’t matter, that, that’s all (mmmm) . . . . . . {{5 secs}} yep. Does that, is that abuse, do you think?

**Discussion of Transcripts**

These transcripts demonstrate the complex nature of couple attachment, with both Mr and Mrs F demonstrating aspects of all attachment prototypes over time. While Mr and Mrs F were engaged in relationship counselling for a period between Time 1 and Time 2, their transcripts were not used to guide therapy. However, these transcripts could have been useful as both an initial assessment tool to assist with treatment planning, and a follow-up measure to assess progress in counselling. Awareness of Mr F’s dismissing attachment pattern at Time 1 would have helped the therapist to understand Mrs F’s tendencies towards preoccupation with relationship issues at that time, although Mrs F was classified as secure overall. The therapist could have devised interventions that aimed to assist Mr F to develop a more secure attachment pattern in his relationship, which may in turn have reduced Mrs F’s preoccupation with relationship issues. It is possible that as Mr F did not make changes towards increased attachment security over time, Mrs F became increasingly frustrated with his dismissing tendencies. This may have led to her overt anger at Mr F and preoccupied classification at Time 2.
Interview measures of attachment have been found to be more stable than other methods of measurement in longitudinal research (Scharfe & Bartholomew, 1994). These transcripts support this, showing that attachment patterns, while relatively stable over time (Scharfe, 2003), can undergo subtle changes that may have a notable influence on intimate relationships.

**Conclusion**

The CAI is an interesting, flexible instrument that has a variety of potential uses, both in research and clinical work with couples. When compared with other interview measures of romantic attachment, it has the advantage of being easier to score than most measures, without losing the insight into unconscious processes that is an integral aspect of most interview measures of attachment. Excerpts from CAI transcripts have been used here to highlight some of these processes that underlie attachment in romantic relationships. These processes can be considered to be implicit aspects of working models (Collins et al., 2004). The CAI, with its emphasis on measuring implicit aspects of working models, may complement measures of explicit working models, such as self-reports. When combined with such measures, it may allow for increased understanding of the complexities of attachment in couple relationships.

**References**


**Address for Correspondence**

Alana Howells  
School of Psychology  
Deakin University  
221 Burwood Hwy Burwood VIC 3125  
akhowell@deakin.edu.au
Attachment dimensions and the identification of at-risk individuals following the loss of a loved one

Angelique Jerga (Angelique.Jerga@anu.edu.au)
Ross Wilkinson (Ross.Wilkinson@anu.edu.au)
Richard O’Kearney (Richard.Okearney@anu.edu.au)
School of Psychology
The Australian National University

Abstract

The purpose of this study was to investigate intrapersonal factors that identify at-risk individuals following the loss of a significant relationship using an attachment theory perspective. Research has consistently demonstrated that attachment anxiety is associated with greater grief symptoms but there is scarce evidence supporting a relationship between attachment avoidance and increased grief symptoms. In fact, there is some evidence that dismissing-avoidant individuals cope as well as securely attached individuals, with both exhibiting a resilient trajectory following bereavement. The present study examined whether previous findings relating to attachment anxiety and grief symptoms were replicable and to further explore the relationship of dismissing-avoidant attachment to adjustment following loss. 179 individuals (118 females, 61 males) aged between 18 to 80 years completed a survey that included measures of attachment style, grief and trauma symptoms, and relationship characteristics. Findings showed that attachment anxiety was positively related to grief symptoms for non-death loss, while attachment avoidance was positively related to grief symptoms for death loss. These findings highlight the importance of considering the circumstances surrounding the loss. These findings will be discussed and a summary of future research direction will be given.

The loss of a loved one, either through death (bereavement) or relationship dissolution, is a potentially traumatic event that can affect all of us at some point in our lives. In the context of bereavement, although the majority of people will experience a normal resilient trajectory following loss, Raphael and Minkov (1999) estimate that approximately 9% are likely to have a persistent distressing grief reaction. However, little is known about how to identify those people who are most at risk, even though the knowledge about such individual differences could be very important in the prevention of post-loss psychopathology. A number of studies have supported the integration of attachment theory into bereavement research with the finding that an insecure attachment style is an individual risk factor for complicated grief (van Doorn et al., 1998; Fraley & Bonanno, 2004; Wayment & Vierthaler, 2002; Field & Sundin, 2001).

Since its conception, Bowlby’s attachment theory (1969, 1973, 1980) has focused on separation and loss. Bowlby and Parkes (1970) became aware of the similarities of the responses children showed from parental separation and the responses adults showed from partner separation. The attachment theory approach to understanding grief reactions has been very influential in developing an understanding of both normative and pathological responses to bereavement, and individual differences in attachment histories are thought to, in part, be responsible for the intensity and duration of grief following loss.

Bowlby (1980) described how people internalise their early experiences with caregivers to create ‘working models’ or a set of expectations about oneself, other people and relationships. These expectations act as rules that govern interpersonal interactions, affecting the formation, maintenance and dissolution of relationships. They are thought to be relatively stable across time and govern attachment behaviour “from the cradle to the grave” (Bowlby, 1979, p. 129). Over time these mental models are thought to become increasingly a property of the person rather than the attachment relationship and, importantly, they are thought to act as a source of continuity between early attachment experiences and later feelings and behaviours (Bowlby, 1973). Attachment working models are conceptualised as comprising of two complementary orthogonal dimensions referred to by Brennan, Clark, and Shaver (1998) as attachment anxiety and attachment avoidance. Attachment anxiety relates to a fear of rejection and abandonment while attachment avoidance relates to a discomfort with closeness and a discomfort depending on other people. These dimensions define four styles of adult attachment: secure (low anxiety, low avoidance), preoccupied (high anxiety, low avoidance), dismissing (low anxiety, high avoidance), and fearful (high anxiety, high avoidance). The preoccupied, dismissing, and fearful attachment styles are seen as insecure styles of attachment.

There is growing evidence that a person’s attachment style affects adjustment after the loss of a close relationship (Fraley & Bonanno, 2004; Wayment & Vierthaler, 2002; Field & Sundin, 2001). Simply put, people with a secure attachment style tend to fare better after the loss of a loved one, than people with an insecure attachment style. Inconsistencies do exist, however, within the insecure attachment styles with individuals with a
Attachment and loss 69

Bereavement studies have consistently shown a significant positive relationship between attachment anxiety and grief symptoms with no relationship shown between attachment avoidance and grief symptoms. Fraley and Bonanno (2004) investigated attachment style and intensity of grief and found that those people with a preoccupied and fearful attachment style, (people high on attachment anxiety), experienced higher level of grief over time, while those people with a secure and dismissing attachment style, (people low on attachment anxiety), exhibited a resilient trajectory during bereavement. Interestingly, findings showed that people with a dismissing attachment style (low attachment anxiety-high attachment avoidance) coped as well as securely attached participants. This finding directly contradicts traditionally held beliefs that people who are emotionally avoidant, (i.e. those with a dismissing attachment style), will experience some form of a delayed grief reaction (e.g., Bowlby, 1980). Other bereavement studies support these findings, with attachment anxiety being positively related to grief symptoms, and attachment avoidance showing no relationship to grief symptoms (Wayment & Vierthaler, 2002; Field & Sundin, 2001).

Studies investigating attachment and adjustment to non-death loss, such as romantic dissolution, are generally consistent with the research on death related loss (Sprecher, Felmlee, Metts, Fehr, & Vanni, 1998; Davis, Shaver, & Vernon, 2003). At least two studies, however, actually found a significant negative relationship between avoidant attachment style and distress (Simpson, 1990; Feeney & Noller, 1992). In fact, Feeney and Noller (1992) found that avoidant subjects reported the most relief, with the mean response indicating that they were “quite” relieved after their relationship was over. In summary, a consistent positive relationship has been found between attachment anxiety and grief symptoms, with studies failing to show a positive relationship between attachment avoidance and grief symptoms, whether in the context of bereavement or romantic dissolution.

The Present Study

The present study sought to examine the relationship between the attachment dimensions of anxiety and avoidance and grief and trauma symptoms after the loss of a significant relationship. Due to the prevalence of trauma symptoms in bereaved populations (as shown by PTSD), as well as the recent literature suggesting complicated grief and PTSD are unique disorders (e.g., Lichtenenthal, Cruess, & Prigerson, 2004), trauma symptoms were also measured in the present study. The main purpose of this research was to see if previous findings could be replicated when investigating attachment and loss. In the present research, two subgroups were investigated, those reporting a death loss and those reporting a non-death loss. This decision was made as the permanency of the person lost would be different under each type of loss as would the sense of personal rejection. A number of specific hypotheses were examined. Firstly, based on the extant research, it is predicted that attachment anxiety will be positively related to grief symptoms and trauma symptoms for both death and non-death loss. On the other hand, it is expected that attachment avoidance will show a weak or no relationship to symptoms for both death and non-death loss. The other hand, it is expected that attachment avoidance will show a weak or no relationship to symptoms for both death and non-death loss.

Secondly, following the evidence that the quality of a relationship, independent of individual differences in attachment organisation, impacts on adjustment following loss (e.g., Carr et al., 2000), it is predicted that relationship security will be positively related to grief and trauma symptoms for both death and non-death losses. Thirdly, as the significance of a relationship is partly a function of its duration it is expected that relationship length will be positively related to negative symptoms for both death and non-death losses. Finally, grief related symptoms are known to diminish over time for the vast majority of bereaved individuals. Therefore it is expected that the time since a loss will be negatively related to grief symptoms and trauma symptoms for both death and non-death losses.

Method

Participants and Design

A cross-sectional sample of 179 participants aged 18 to 80 years (M = 33.06, SD = 13.57) participated in the study. The sample was comprised of 118 females (65.9%) and 61 males (34.1%) with the majority of participants (91.0%) from an English speaking background. The majority of participants were recruited using a snowball sampling method via emails and word of mouth.

Procedures and Measures

Participants completed a survey booklet in relation to a significant relationship in their life that had ended. Attachment. Attachment anxiety and avoidance were assessed using the Experiences in Close Relationships-Revised Scale (ECR-R; Fraley, Niels & Brennan, 2000). This measure has 36 items each rated on a 7 point scale. Half of the questions measure attachment anxiety and half measure attachment avoidance. Internal reliability for
anxiety and avoidance in this study was greater than .93. This is consistent with previous research which found internal reliabilities in excess of .90 (Fairchild & Finney, 2006; Sibley & Liu, 2004).

**Relationship Security.** This was assessed using two questions from Doherty and Feeney (2004) which relate to the secure base function of a relationship (e.g., Did you feel you could always count of them, no matter what?). The secure base function is seen as a measure of felt security and confidence in a relationship. Items were rated on a 9 point scale and scores were averaged. Internal reliability for this study was high (Cronbach’s \( \alpha = .94 \)).

**Grief.** Current grief symptoms were measured using the Core Bereavement Items (CBI; Burnett, Middleton, Raphael, & Martinek, 1997). This scale has 17 items rated on a 4 point scale and has high internal reliability of .91 (Burnett, Middleton, Raphael & Martinek, 1997). Internal reliability for this study was also high (Cronbach’s \( \alpha = .94 \)).

**Trauma.** Current trauma symptoms relating to the loss were measured using the Impact of Events Scale-Revised (IES-R; Weiss & Marmar, 1997). The IES-R is a measure of current subjective distress designed to parallel criteria for post traumatic stress disorder, with items reflecting the three main diagnostic criteria: intrusive thoughts, avoidance and hyperarousal. The IES-R consists of 22 self-report items rated on a 5 point scale according to experiences in the past seven days. Creamer, Bell, and Failla (2003) report high internal reliability (Cronbach’s \( \alpha = .96 \)) which is similar to the current study (Cronbach’s \( \alpha = .95 \)).

**Final Questionnaire.** The final questionnaire asked questions about the relationship length, the time since loss, the type of relationship, and the reason for the loss.

**Results**

One case was excluded due to missing data and two cases were excluded as they had reunited with their ‘lost’ partner. The final sample consisted of 176 people, 57 of whom reported a death loss and 119 of whom reported a non-death loss. All 176 cases were screened for missing values, univariate and multivariate normality, outliers, homoscedasticity and multicollinearity. Scale reliabilities were all above 0.90. Of the 57 death losses reported, the majority were parents (35%) and grandparents (23%), followed by friends (17.5%), relatives (10.5%), romantic partners (9%), children (3.5%), and siblings (2%). Of the 119 non-death losses reported, the vast majority were romantic partners (75%), followed by friends (18.5%), parents (4%), grandparent (1%), child (1%), and sibling (1%).

To address skewness and kurtosis, three variables were transformed. A log transformation was applied to the variables relationship length and time since loss and a square root transformation was applied to trauma symptoms.

The means and standard deviations of all variables included in the regression analysis are presented in Table 1, including t-tests comparing the two samples for each variable. Significant differences between the two samples were found on anxiety, relationship security, relationship length, and grief symptoms. The group reporting non-death losses scored significantly higher on attachment anxiety than the group reporting death losses. The group reporting death losses scored significantly higher on relationship security, relationship length, and grief symptoms.

<table>
<thead>
<tr>
<th>Variable</th>
<th>Death Loss</th>
<th>Non-Death Loss</th>
<th>t</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>M (SD)</td>
<td>M (SD)</td>
<td></td>
</tr>
<tr>
<td>Avoidance</td>
<td>48.77 (18.32)</td>
<td>52.30 (20.38)</td>
<td>-1.110</td>
</tr>
<tr>
<td>Anxiety</td>
<td>47.31 (21.89)</td>
<td>59.44 (22.04)</td>
<td>-3.423**</td>
</tr>
<tr>
<td>Relationship Security</td>
<td>7.30 (1.92)</td>
<td>5.89 (2.11)</td>
<td>4.224**</td>
</tr>
<tr>
<td>Relationship Length yrs</td>
<td>23.10 (13.75)</td>
<td>5.50 (8.93)</td>
<td>10.105**</td>
</tr>
<tr>
<td>Time Since Loss yrs</td>
<td>9.97 (9.57)</td>
<td>5.54 (7.96)</td>
<td>1.755</td>
</tr>
<tr>
<td>Grief Symptoms</td>
<td>17.01 (9.79)</td>
<td>10.43 (8.48)</td>
<td>4.577**</td>
</tr>
<tr>
<td>Trauma Symptoms</td>
<td>13.57 (15.12)</td>
<td>13.61 (16.34)</td>
<td>0.384</td>
</tr>
</tbody>
</table>

*p<.05, **p<.01, N=57 Death Losses, N=119 Non-Death Losses
Note: means and SDs are based on untransformed variables while t-tests are based on transformed variables.
Multiple regression analyses were performed separately for the two groups to see whether attachment anxiety and attachment avoidance were related to grief symptoms and trauma symptoms after controlling for relationship security, relationship length, and time since loss (Table 2).

For those with a death related loss there was a significant positive relationship between attachment avoidance and grief symptoms with those people scoring higher on avoidance expressing greater grief symptoms. Surprisingly, no significant relationship or trend was detected between attachment anxiety and grief symptoms (β=-.206, p=.242). Relationship security was significantly positively related to grief symptoms with those who felt more secure in their relationship with the lost person showing greater grief symptoms. Time since loss was significantly negatively related to grief symptoms with grief symptoms declining as the length of time since the loss increased. Although not significant, a negative trend was detected between relationship length and grief symptoms (β=-.237, p=.087). In relation to trauma symptoms, a significant positive relationship between attachment avoidance and trauma symptoms was present. Attachment anxiety was, similar to the case for grief symptoms, not related to trauma symptoms. Time since loss was significantly, negatively, and strongly related to trauma symptoms while no significant relationship was detected between the relationship security and relationship length and trauma symptoms.

Table 2
Multiple Regression on Grief Symptoms and Trauma Symptoms by Type of Loss

<table>
<thead>
<tr>
<th>Variables</th>
<th>Grief Symptoms</th>
<th>Trauma Symptoms</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Death Loss</td>
<td>Non-Death Loss</td>
</tr>
<tr>
<td></td>
<td>B(SE)</td>
<td>β</td>
</tr>
<tr>
<td>Grief Symptoms</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Avoidance</td>
<td>.189 (.092)</td>
<td>.351*</td>
</tr>
<tr>
<td>Anxiety</td>
<td>-.092 (.078)</td>
<td>-.206</td>
</tr>
<tr>
<td>Relationship Security</td>
<td>1.388 (.691)</td>
<td>.270*</td>
</tr>
<tr>
<td>Relationship Length</td>
<td>-6.443 (3.69)</td>
<td>-.237</td>
</tr>
<tr>
<td>Time Since Loss</td>
<td>-4.207 (1.527)</td>
<td>-.372**</td>
</tr>
<tr>
<td>Trauma Symptoms</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Avoidance</td>
<td>.041 (.017)</td>
<td>.367*</td>
</tr>
<tr>
<td>Anxiety</td>
<td>-.020 (.015)</td>
<td>-.210</td>
</tr>
<tr>
<td>Relationship Security</td>
<td>.062 (.129)</td>
<td>.058</td>
</tr>
<tr>
<td>Relationship Length</td>
<td>-.853 (.690)</td>
<td>-.149</td>
</tr>
<tr>
<td>Time Since Loss</td>
<td>-1.514 (.285)</td>
<td>-.637**</td>
</tr>
</tbody>
</table>

*p<.05, **p<.01, N=57 Death Loss, N=119 Non-Death Loss. Two-tailed Z-critical:1.96, p<.05 & 2.58, p<.01

For those reporting a non-death loss, attachment anxiety was moderately and positively related to grief symptoms while no relationship was present between attachment avoidance and grief symptoms. Relationship length was significantly positively related to grief symptoms, which is opposite to the trend shown for grief symptoms in death losses. Time since loss was significantly negatively related to grief symptoms while no significant relationship was detected between relationship security and grief symptoms. In relation to trauma symptoms, attachment anxiety was significantly positively related and no relationship was present between attachment avoidance and trauma symptoms. A positive trend was shown between relationship length and trauma symptoms (β=.140, p=.089) while a significant negative relationship was shown between time since loss and trauma symptoms. No relationship was detected between relationship security and trauma symptoms.

Fisher Z-tests were performed to test significant differences for β weights between the two groups. In the prediction of grief symptoms, significant differences between the two groups emerged for avoidance, anxiety, and length of relationship. In the prediction of trauma symptoms, significant differences between the two groups emerged on avoidance, anxiety, and time since loss.
Overall the results from the study partially supported the hypotheses, with important differences emerging between attachment and grief and trauma symptoms, depending on the type of loss. The first hypothesis was partially supported with attachment anxiety positively related to grief and trauma symptoms but only for non-death loss and not for death loss. Partial support was shown for the second hypothesis, with the finding that attachment avoidance was unrelated to grief and trauma symptoms for those reporting a non-death loss. However, contrary to previous findings, attachment avoidance was related to grief and trauma symptoms when the loss was death related. The findings for non-death loss are consistent with previous research in the area of romantic dissolution, in that attachment anxiety was implicated in adjustment while attachment avoidance was not. For those who have lost a significant other through death, however, the failure to find relationships between attachment anxiety and adjustment and the fact that attachment avoidance was predictive of adjustment, is clearly at odds with the majority of previous research.

There are a number of differences between the death-loss sample in the current study and those employed in previous research that may account for contradictory findings. Firstly, and perhaps most importantly, a difference emerges in relation to the recency of the loss. In the present study the average time since the loss for the bereaved sample was 10 years, while in other studies people reported losses occurring in the last two years. Even though two of these previous studies were longitudinal in nature it is possible that these studies did not assess grief symptoms for long enough to be able to detect the delayed grief reaction thought to occur by avoidant individuals (e.g., Bowlby, 1980). By allowing people to report on any significant loss during their life, the present study may have been able to detect delayed grief symptoms, particularly in relation to avoidant attachment. Secondly, the nature of the relationship reported in the present sample of bereaved people differs from previous bereavement research. Over 50% of people in this sample reported a death of a parent or grandparent while the loss of a spouse (9%) or child (3.5%) was a clear minority. This contrasts previous bereavement research, where Fraley & Bonanno (2004) had a sample of bereaved spouses and parents, Field and Sundin (2001) had a sample of bereaved spouses, and Wayment and Vierthaler (2002) had a sample of bereaved spouses, family members and friends with the majority spouses (48%). Thirdly, the average age of participants in this sample was 39 years while the average age of participants in previous research has ranged from 45 years to 54 years (Fraley & Bonanno, 2004; Wayment & Vierthaler, 2002; Field & Sundin, 2001).

Some methodological differences in terms of attachment assessment are present which may also have affected the results. The present study used the ECR-R and found a strong correlation between what are supposed to be the relatively orthogonal attachment dimensions of anxiety and avoidance ($r = .634$ for death loss, $r = .559$ for non-death loss). This deviates from previous research on attachment and bereavement which found correlations between -0.01 and 0.37. Additionally, the three major studies cited in this paper all used different measures of attachment. Although Fraley and Bonanno (2004) and Field and Sundin (2001) measured attachment in dimensional terms, Wayment and Vierthaler (2002) measured attachment using a categorical approach. Also, Field and Sundin (2001) asked people to complete the attachment measure in relation to their prior relationship with their deceased spouse while the present study asked people to complete the attachment measure in relation to how they generally experience romantic relationships. It is unclear how the other two studies asked people to fill out the attachment measures but differences may emerge in terms of measuring attachment more generally versus specific to a relationship. Another final methodological difference is that the present study controlled for the relationship security, relationship length, and time since loss.

Relationship security was predicted to show a positive relationship with grief and trauma symptoms and it was, in fact, positively related to grief symptoms for death loss but not non-death loss. The difference between the groups in relation to relationship security is likely due to differences in relationship length, (relationships in the death-loss group were of much longer standing), or the fact that the relationships for those reporting non-death losses were perhaps coming to an end because they are no longer secure. Relationship length was expected to be positively related to grief and trauma symptoms and partial support was shown for this hypothesis with relationship length positively related to grief symptoms in the context of non-death loss only. Interestingly, the β weight for this variable, although non-significant due to the smaller sample size, was of a similar magnitude for the death related loss group but in the opposite direction. With most death losses involving parents and grandparents in makes sense that relationship length was negatively related to grief symptoms as early death, or deaths that are untimely have been shown to be related to more distressing grief reactions. Finally, results showed full support for the hypothesis that time since a loss would be related to better adjustment. This relationship was particularly strong in relation to trauma symptoms for those with a death loss. Clearly a major factor in adjusting to loss is time.

There are a number of features of the present study that may have affected the findings in comparison to other research in the area. Firstly, the overall strategy was to examine a heterogeneous sample of those who have experienced loss rather than focussing on a particular group or type of loss. This resulted in fewer romantic-death losses compared with much of the previous bereavement research. Importantly, the relatively small sample of people reporting a death loss (N=57) in the current study was not ideal and resulted in lower power in
comparison to the non-death loss group. Future research is needed to clarify the relationship between attachment dimensions and symptoms of grief following loss, especially in relation to attachment avoidance and grief symptoms in the context of death loss. It would be beneficial for future studies to examine romantic death loss separately compared to non-romantic death loss, and within non-romantic death losses, those losses relating to parental figures should be compared separately to other types of non-romantic death loss. Care should also be taken into how attachment is measured, whether it is one’s global attachment orientation or one’s attachment to the deceased person. Future studies should also be more sensitive to detecting delayed grief symptoms in avoidant individuals by extending the time of their longitudinal studies.

Conclusions

Even though previous research generally supports the view that dismissing individuals cope well with loss and are comfortable without close relationships, the present research contradicts this with a finding that attachment avoidance was significantly positively related to grief and trauma symptoms for people reporting a death loss. It is important that future research continue to explore the area of attachment and loss and continue to try and clarify the way people with avoidant attachment styles cope with loss. By incorporating an attachment perspective into research on loss and bereavement, significant gains may be made in identifying and treating the 9% of people who are likely to experience a chronic grief reaction.

References


**Address for Correspondence**

Angelique Jerga, School of Psychology, The Australian National University, ACT 0200

Email: Angelique.Jerga@anu.edu.au
Family as Helpers: Using digital storytelling to explore the help-seeking behaviour of adolescent girls

Nadia Lovett (nadia.lovett@adelaide.edu.au)
University of South Australia

Abstract

This paper outlines the findings of a qualitative study on adolescent help-seeking behaviours. The participants, seven adolescent senior secondary school girls from Adelaide, created personal digital stories to describe how they seek help. Data from the study add to the existing literature relating to young people’s choices regarding help seeking. This particular inquiry supports previous indications that adolescents are inclined to choose informal rather than professional sources for help. Although evidence suggests that adolescents turn to peers more than to their parents for support, most participants in this specific study did choose at least one family member from whom they sought help. Girls, it appears, do sporadically seek help from their parents, particularly their mothers, a finding that is congruent with other studies. Some participants in this study perceive familiarity, helper characteristics, past experiences and accessibility as potential criteria for seeking help from family members. The majority of participants do not generally seek support from their fathers. This study points to brothers, sisters, cousins, godmothers, grandmothers and even the family dog as contributing to the help-seeking stories of the participants.

This paper discusses the findings of a doctoral research project that explores the use of digital storytelling as a tool to gather data about adolescents’ attitudes towards seeking help. The qualitative research is both subjective and interpretive in nature and consists of seven case studies of adolescent girls who attend a senior secondary school in Adelaide.

The aims of the project are: to extend the existing research of help-seeking behaviour of adolescents through the investigation and interpretation of seven adolescent digital stories, to gain a richer understanding of adolescent help-seeking behaviour, to involve participants as co-researchers through the collection, reflection, analysis and interpretation of the data about self and to explore the use of digital storytelling as a methodological tool. The information gathered from the research will be used to create a multimedia package suitable for educational and counselling settings. It is envisaged the package will be a teaching and learning tool that allows helpers to reflect on their own practices.

The findings of this project generally affirm those from other literature: namely that, informal sources of help are chosen above more formal or professional sources (e.g., Lindsey & Kalafat, 1998; Offer et al., 1991; Ang et al., 2004; Ayalon & Young, 2005). Previous indications are that adolescents will seek support from peers (e.g., Dubow et al., 1990; Rickwood et al., 2005) in preference to parents (e.g., Boldero & Fallon, 1995); in the main the participants in this study do indicate a predilection for choosing at least one family member to help them with personal or emotional concerns. The teenage girls who participated in this research periodically seek help from their parents, particularly their mothers, which is consistent with other studies (e.g. Mission Australia, 2005; Wintre et al., 1988). Although Wintre et al., (1988) do suggest that familiarity is a determinant used by adolescent girls when selecting a peer as a helper, familiarity combined with other characteristics such as: accessibility, helper characteristics and past experiences, are also identified as salient criteria for the girls when selecting a helper from the family.

The findings of this study also reveal how other relatives; particularly sisters rather than brothers, as well as cousins, godmothers, grandmothers and even the family dog add to the help-seeking stories of the five local and two Chinese International female Year 11 students.

Method

Participants

The sample is purposeful. Participants are from a senior secondary school in which the researcher is the school counsellor. All participants are year 11 females. Year 12 students were purposely excluded from the research because the school principal was wary of the possible deleterious effects involvement in the research might cause on the year 12 students’ studies.

Seven female adolescents volunteered to be part of this qualitative research. The participants include: two international students, Lizzie and Mel from China, and five local teenage girls, Alex, Cathy, Lydia, Jenna and Paula. The names of participants are pseudonyms. Four of the five local participants are non Anglo-Saxon. Alex describes her parentage as Czech/ Hungarian/ Australian; Cathy has an Italian background; Jenna has a Lebanese/ Scottish heritage and Paula identifies herself as Greek. Lydia parents are English. The ages of the participants range from 15 – 17 years. The youngest is Lydia who is 15 while Mel and Lizzie are 17 and the oldest.
The research uses digital storytelling as its prime tool to elicit information about the participants’ world and the meaning they generate about the phenomenon of help seeking. A digital story is a brief narrative told through a creative multi-media format. Digital stories are ‘mini movies’ created by skilfully weaving images, music, voice and written text together (Lambert, 2006). These stories use a variety of tools, including: cameras, scanners, digital voice recorders, soundtracks, the Internet and computers with film editing programs.

The use of mixed methods assists in the triangulation of the data from this study. Although the main tool is digital storytelling, the data are also gathered using an array of methods including: a demographic survey, focus group activities, focus group transcripts, one on one interviews and transcripts, participants’ notes, a group session showcasing all the digital stories and the researcher’s log. The process of data display and analysis is continual and cyclical. Displaying the data in a variety of forms assists in its interpretation and analysis.

**Results and Discussion**

The relationship each of the participants has with their parents is varied. Three of the seven participants live with both parents (Cathy, Alex and Lydia). Five participants have parents who live together. The parents of the two international students, Mel and Lizzie, live in China therefore these girls have limited access to their parents’ support. Paula’s parents are separated. She lives with her father while her mother on the other hand lives in Greece. Jenna’s parents are divorced and live apart, however, Jenna resides with each parent on alternate weeks.

**Mother as helper**

Most of the participants prefer to seek help from their mothers rather than their fathers and this is backed up in the literature (e.g. Colorassi and Eccles, 2003). The only girl who does not mention accessing her mother’s support is Paula whose mother lives in Greece consequently help seeking in this instance seems impracticable. Some of the other participants, however, are willing to share intimate details with their mums while others choose to keep their mothers at arm’s length and opt only to disclose minimal personal information. In general a number of factors influence the participants to choose or not to choose their mothers for support and include: the daughter’s view of how experienced or knowledgeable her mother is in relation to a specific issue, the helper’s characteristics, the nature of the issue and how the young person has perceived previous mother/ daughter help-seeking experiences. Further research has shown that the nature of a problem (e.g. Regier, et al., 1988), helper’s characteristics (e.g. Yagil & Israelashivili, 2003) accessibility (Steffl & Prosperi, 1985) and an individual’s past help-seeking experiences can influence one’s intention to seek help (e.g., Moran, 2007; Rickwood et al., 2005; Wilson & Deane 2001).

Some of the girls appear hesitant to seek further support from their mothers if their mums have previously broken the daughter’s trust (i.e. Cathy and Lizzie), or have not taken the daughter’s issue seriously (Jenna) or the mother has not listened nor responded to her daughter in a constructive and supportive manner (Lizzie, Jenna and Cathy). These findings correspond with research focussing on the factors that affect an individual’s intention to seek formal help (e.g., Nu, 1987; Pan, 1996; Wilson & Deane 2001). The findings of Timlin-Scalera et al., (2003), although related to male adolescents, are comparable with the findings from this present study, that selection of a potential helper is based on: familiarity, level of trust and whether the helper validated the seeker’s feelings and the severity of the presenting problem.

Although some researchers (e.g. Wintre et al.1988), indicate that older adolescents may disclose personal and emotional information to informal familiar helpers, such as parents; mothers in particular, some of the girls’ stories in this present study do not confirm this. Certain participants make it clear the types of issues they are prepared to discuss with their mothers while others are explicit in identifying the nature of the issues they would definitely not discuss with their mothers. Helper choice and help-seeking intentions appear to be linked with: the type of problem (e.g. Nicholas et al., 2004; Regier et al., 1988), the past help-seeking experiences (e.g. Rickwood et al., 2005; Moran, 2007) and the fear that by obtaining help the seeker may experience a feeling of vulnerability or inadequacy (Barnett, 1988 in Lindsey & Kalafat, 1998).

The absence of detail about Paula’s mother in Paula’s help-seeking story is interesting. She mentions that she chooses not to talk to her mother about any issue. This may be related to her mother’s inaccessibility due to the distance Paula and her mother live from one another. Accessibility is referred to in other studies as factors that facilitate or inhibit seeking support from a professional helper (e.g. Stefl & Prosperi, 1985). Aspects such as the estranged relationship between mother and father, Paula’s loyalties to her father and past help-seeking experiences may also have influenced Paula’s help-seeking relationship with her mother, but evidence for this is not conclusive.

Studies that focus on gender differences in help seeking, identify that adolescent boys tend to approach adults who they perceive as ‘experts’ in a particular field (e.g. Wintre et al., 1998) where as girls prefer to approach their peers rather than familial adults for support (Colorassi & Eccles, 2003; Menna & Ruck, 2004, Printz et al.,
This present study shows that adolescent girls at times, as do some boys from alternate studies, seek help from people, in this case mothers, who have knowledge and/or experience in a particular area.

Past experiences indicate that Lydia is open to her mother’s suggestions to seek professional help. In the past Lydia sought professional help from a psychologist when her parents felt Lydia required extra support. Lydia also states that her family was able to afford the services of a psychologist by accessing benefits through her father’s employment. Affordability is seen as a significant influence on one’s intention to seek professional support (e.g. Dearing et al., 2005; Dubow, Lovkowt Jr & Kausch, 1990; Jorm, 2000; Rickwood & Braithwaite, 1994; Leong, 1986; Morrissey, 1997). Despite affordability having contributed to Lydia accessing formal help I argue that this would not have occurred if a trusting relationship did not exist between Lydia and her mother. Level of trust is only one of the positive helper characteristics that Lydia recognises in her mother. Others include: the proven ability to validate her daughter’s feelings and severity of problems, being attentive and able to give constructive feedback, which are characteristics identified in Timlin-Scalera et al. (2003). Lydia’s mother is classified as a gatekeeper, an identity analogous with that from alternate studies (e.g. Rickwood et al., 2005; Cauce et al., 2002; Cusack, Deane, Wilson & Ciarrochi, 2003). Gatekeepers are generally seen as significant others whose attitudes, mental health literacy and own past help-seeking experiences can have a major influence on the help-seeking behaviour of people.

Trustworthiness and maintaining confidentiality are mentioned in other studies as the characteristics of helpers that promote help seeking (e.g. Nu, 1987; Pan, 1996; Wilson & Deane, 2001). Lizzie, Jenna and Cathy describe that they have occasionally confided in their mothers, but these girls indicate they can be wary about telling their mothers ‘everything’. Examples of these girls’ experiences correspond with psychological factors of: past negative help-seeking experiences (e.g. Wilson & Deane 2001), trust (Nu, 1987; Pan, 1996) and issues related to breaching confidentiality (e.g. Wilson & Deane, 2001) that affect an individual’s future help-seeking intentions.

Father as helper

The majority of participants in this study do not regard their fathers as significant helpers. This view coincides with studies that indicate mothers, rather than fathers are approached for help by their adolescent children (e.g. Colorassi & Eccles, 2003). For some of the girls, fathers do rate a mention, while for other participants approaching the father for help is not considered. Some participants choose not to converse with their dads at all (Mel and Cathy). A reason given for the limited communication with fathers is inaccessibility due to work commitments. Accessibility as a barrier for seeking help is discussed in Stefl & Prosperi (1985).

Only two girls, Paula and Jenna indicate that they do spend time with their fathers. Of these two girls, Jenna classifies her father as one of her main helpers. She has an open relationship with him and chooses to communicate with him regularly. His support is often sought for issues about relationships, which is in contrast to other research findings that specify peers as the helpers of choice for issues related to relationships.

Jenna’s father’s helper traits encourage Jenna to seek further help from him. Accessibility, setting aside time to engage in conversation and his positive communication skills make him an appealing helper for Jenna. Jenna generally prefers to seek her father’s help rather than her mother’s. Reasons for this could be related to the quality of the support that is given, an aspect that has been canvassed in Printz, Shermis, & Webb (1999) as well as positive helper characteristics, such as attentiveness and constructive feedback (e.g. Yagil & Israelashivili, 2003), level of trust, availability, positive past help-seeking experiences (e.g. Timlin-Scalera et al., 2003) and accessibility (e.g. Stefl & Prosperi, 1985).

Paula’s parents are separated and Paula resides with her father. Although father and daughter see each other daily Paula rarely seeks help from her dad. Paula tends to be selective about what she chooses to share with him. In her interview Paula explains that her decision to exclude her father as a helper is usually contextual. Paula identifies the differences in age, experience and level of education between her and her parents as to why she chooses not to confide in either her father or mother. Influences of age on help seeking have been addressed previously (e.g. Wintre et al., 1988; Tishby et al., 2001). The research tended to focus on the age and stage of adolescence in relation to reasons for seeking help and for selecting a helper. In this current research Paula uses age as a way of selecting or excluding potential helpers.

Five of the seven participants would not choose their fathers as their main support. Inaccessibility and lack of a relationship were common reasons given for not seeking a father’s help. The interview data describe that when the fathers of Lizzie, Mel, Cathy, Lydia and Alex were available the girls rarely went to their dads for help.

Siblings as helpers

There is limited information on siblings as helpers in the help-seeking literature. Much of the past research (e.g. Mission Australia, 2005; Rickwood et al., 2005) discusses family either as a general term or specifically mentions parental support. A report into the amount of time adolescents spend communicating with others
indicates that time spent with closest siblings tends not to change between young and older adolescents (Buhrmester & Furman, 1987 in Larson and Richards, 1991).

In this current study participants do discuss help provided by siblings. Siblings feature in the help-seeking stories of Paula, Lydia and Alex and even though Cathy has a younger sister she is not mentioned in Cathy’s story. Mel, Lizzie and Jenna are only children.

Both Paula and Lydia have much older brothers from whom they have sporadically sought help. These girls do not identify their brothers as their main confidants and helpers but both girls mention that they do seek their brothers’ support with specific issues. Choosing a helper on the basis of a person’s expertise is mentioned in Wintre et al. (1998). Accessing their brothers is at times difficult. Lydia’s brother lives interstate and Paula’s brother lives overseas. The girls, none-the-less, suggest that if necessary they would be able to contact their brothers for help. This research, like other studies, acknowledges the salience of accessibility. Two participants, Alex and Lydia specify their only sisters as the main support people in their lives. Alex, who is 16, identifies her older sister Marta who is 18, as her significant helper. Lydia (15) on the other hand, seeks help from her younger sister Hailey (13). The sisters of both Alex and Lydia are the siblings closest in age and in quality of relationship to the participants.

There are similarities in the lives of Alex and Lydia. The employment of each of the girl’s fathers has necessitated the families relocate home and school on a number of occasions. Subsequently Alex and Lydia have left behind friends and extended family. Lydia also left without her pet cat. Different postings for the families have meant establishing new relationships. The family however has been the constant in all the moves. Consequently both girls don’t identify a specific friend as a support person and tend to bond more with their sisters than peers because their sisters are: accessible, have similar experiences and are of comparable ages.

Alex and Lydia’s relationship experiences with their sisters are similar to those found in other studies that focus on the importance of peers in adolescent help-seeking behaviours. Wintre et al. (1998), mention that familiarity with a peer is an important determinant when female adolescents choose helpers. In their study of male adolescents Timlin-Scalera et al. (2003), point out that besides familiarity: level of trust, availability, helpers’ past experiences and having one’s feelings and problems validated, are important criteria when male adolescents seek support. These characteristics also have relevance to the helper/helpee relationships that Alex and Lydia share with their respective sisters.

According to Rickwood et al. (2005), young people will choose peers for support because of accessibility and the pre-established nature of the relationship. Adolescents feel that their friends’ views are valid because experiences are shared and trust has already been forged (Tishby et al., 2001; Wilson & Deane, 2001). These points correspond to Lydia’s and Alex relationships with their sisters. An inference is that Alex and Lydia regard their separate sisters more like close friends than siblings.

**The Extended family: Grandmothers, Godmothers and Cousins.**

Although there is a lack of information in the literature pertaining to support seeking from extended family members this specific area of help is discussed by a number of the participants in the current study. Two participants, Cathy and Jenna identify their maternal grandmothers as support people in their lives. Jenna refers to her Lebanese-born grandmother as *situ* (Arabic for grandmother) and Cathy calls her grandmother, *nonna* (Italian equivalent). Although Jenna still considers her *situ* as a significant person in her life, she does not identify her grandmother as one of her main helpers.

In contrast, Cathy rates her *nonna*, as one of her preferred helpers. Although *nonna’s* English is not fluent this does not diminish the level of support Cathy believes she receives from her grandmother. *Nonna* is a valued support person because she listens, is non-judgmental, trustworthy and accessible. For Cathy disclosing issues to her *nonna* is in some ways cathartic.

This illustrates the positive characteristics of Cathy’s *nonna*. The quality of the support her *nonna* provides and her grandmother’s accessibility are also prevalent in other help-seeking studies. Literature concerning the perception of the quality of support (e.g. Printz et al., 1999), accessibility of help (e.g. Steff & Prosperi, 1985), and helper characteristics such as attentiveness, familiarity, level of trust, ability to validate feelings and severity of a problem (e.g. Timlin-Scalera et al., 2003; Yagil & Israelashivili, 2003) acknowledges the aspects individuals use when selecting a helper. It is important to point out that these findings do not specifically refer to adolescent girls and the choices they make about informal helpers, none-the-less, these factors are applicable to Cathy’s help-seeking relationship with her *nonna*.

Despite Cathy’s maturation and greater independence her grandmother is still significant in her life. Cathy’s transition into late adolescence hasn’t changed the amount of time she spends with her grandmother. This corresponds with accounts given by Buhrmester & Furman, (1987, in Larson and Richards, 1991).

Paula is the only other participant who refers to extended family members in the recount of her help-seeking story. Her godmothers and cousins in Sydney are people she identifies as helpers. These family members are close to Paula because they have a common history. They also share a joint understanding of what it is to be a Greek Orthodox Australian.
Specifics such as accessibility referred to in Stefl & Prosperi (1985) do promote help seeking however Paula’s shift to Adelaide and the subsequent inaccessibility to her godmother’s and cousins’ face to face support have not lessened the value she places on such help. Shared and similar experiences, positive past help-seeking experiences, pre-established trusted relationships and valuing one another’s opinions are reasons mentioned in some studies as to why peers are the preferred helpers of adolescents (e.g. Tishby et al., 2001; Wilson & Deane, 2001).

A dog is a girl’s ‘best friend’

Pets, in particular dogs, are seen as significant support in three of the girls’ lives. Cathy, Jenna and Lydia indicate that spending time with their pet dog has helped the girls cope with life’s ups and downs. Cathy and Lydia indicate that they often talk to their dogs. They feel at ease disclosing personal and emotional issues to these pets because the animals are: accessible, trustworthy, non-judgemental and caring no matter what is disclosed. Kitz, Jenna’s dog is a significant part of her help-seeking story. She mentions that being with him is ‘comforting’.

Accessibility in addition to general positive helper traits, are what make these pets: Oscar, Paris, Buffy and Kitz appealing as potential helpers for Cathy, Lydia and Jenna. For some individuals, suitability of support corresponds not only with accessibility but, also to positive helper characteristics such as being: trustworthy, non-judgemental and attentiveness (e.g. Rickwood et al., 2005; Stefl & Prosperi, 1985; Timlin-Scalera et al., 2003; Yagil & Israelashivili, 2003).

Conclusions

Relationships with family members are important in the help-seeking stories developed by the seven adolescent female participants. The literature alludes to informal support as the preferred choice of help for adolescents, which is accordant with the findings of this study. Previous inquiries have found that adolescents prefer the help of peers to that of parents. Conversely indications exist that adult family members such as parents, and in particular mothers, are perceived as valued helpers for older adolescents.

Previous studies provide details of the particulars that either promote or discourage help-seeking behaviour. Rich and detailed information, that supplements the existing literature about the help-seeking behaviour of teenage girls, is provided by the findings from this study. It is now apparent that family members or even a pet dog have the potential to be helpers for the majority of the girls in this inquiry. Important characteristics influencing the choice of helper include: type of problem, past help-seeking experiences, helper attributes, familiarity and accessibility.

References


“You’re not the boss of me!” – Discipline within Stepfamilies

Linda Male (Linda.Male@jcu.edu.au)
James Cook University
Cairns

Nerina Caltabiano (Nerina.Caltabiano@jcu.edu.au)
James Cook University
Cairns

Abstract

Stepparents have often been vilified in literature and fairy tales; however, research about stepfamilies and stepchildren is relatively limited. Second marriages have a higher rate of failure than first marriages and those with children have the highest failure rate. Family systems theories focus on interactions between family members and can inform the challenges facing stepfamilies. When children pre-date the union, conflicting loyalties, values and traditions must be negotiated at the beginning of the relationship. A major source of potential conflict within these families is discipline. This study examined factors that could influence the types of discipline used within stepfamilies. Stepparents completed an on-line questionnaire (N = 63). Results indicate that the child’s age when meeting the stepparent, the number of past relationships and the percentage of time spent with the other biological parent influence the types of discipline used. The role of the stepparent was perceived very differently by the stepparents and the stepchildren.

Steppfamilies now make up 20% of Australian families, yet formal research in this area is relatively scarce, and hampered by the complex nature of stepfamilies. In the past, remarriage usually took place after the death of a spouse; however remarriage today is much more likely to be preceded by divorce (Schwartz & Kaslow, 1997). There were 52,400 divorces granted in Australia in 2005, and nearly half of them involved families with children. Of these children, 25% were younger than five years old, 40% were aged between five and twelve years, and 35% were aged between twelve and eighteen years (Sexton & Fleming, 2007). The majority of people who divorce will subsequently re-marry and over sixty percent of remarriages will include at least one parent with children (Webber, Sharpley, & Rowley, 1988).

The presence of children is thought to be the main reason that second marriages have a higher rate of failure (33%) than first marriages (10%) in the first three years, according to research by Halford (cited in Readfearn, 2007). Twenty percent of children strongly oppose their parent remarrying and adolescents are particularly resistant to new “parents” (Steinzor, 1969). Family systems theory focuses on the interactions between family members, and suggests that the challenges faced by stepfamilies are the result of more complex demands and the lack of boundaries around relationships (Hetherington, 1991). A stepchild may have relationships with up to four parents and a multitude of half and step-siblings as well as the past partners and children of each current parent. Disruptions in any of these relationships influence children’s adjustments. Stepfamilies are nearly always formed out of an experience of loss (Webber, Sharpley, & Rowley, 1988) and children can experience ongoing transitions. They often move between two households, and this can lead to constant negotiation of different values, traditions and discipline techniques (Webber et al., 1988).

The discipline of stepchildren has been the subject of spirited debate amongst researchers. While some authorities insist that only biological parents should discipline a child (Rodwell, 2002), others argue that this approach marginalises the stepparent and makes them an outsider in their own family (Papernow, 1988). These conflicting findings reflect that one perspective is based on the experiences of the stepchild and the other is based on the experiences of the stepparent. There is general agreement in the literature that older children find it harder than younger children to accept discipline from a stepparent and that stepfamily relationships usually improve over time (Webber et al., 1988).

Discipline within stepfamilies

The age at which children first meet their stepparent is a key factor in their subsequent relationship (Pinsof & Lebow, 2005). A child’s ability to form attachments is strongest in the first few years and reduces after the age of five (Parkes & Hinde, 1982). The younger the child is when the stepparent joins the household, the more likely he or she is to accept the stepparent as a “real” parent (Marsiglio, 1992), with corresponding parental rights to discipline.

The length of time that the step-parent has known the child is also a factor in the relationship. Some therapists argue that a family takes, on average, seven years to fully integrate a stepparent (Papernow, 1988). The stepparent starts off as an outnumbered outsider, and slowly gains a place in the family system. “The wisest
stepparents realise they only have a limited licence to parent and accept that restricted role, while waiting for the
time of full acceptance” according to Furstenberg and Cherlin (1991, p.85).

The custodial parent’s number of previous relationships has been studied in relation to children’s emotional
adjustment (Gupta & Parry-Gupta, 2003). Multiple transitions exacerbate the stress children face, and may lead
to emotional and educational problems. After divorce, some children experience multiple relationship
breakdowns with both parents. This disruption has obvious implications for the relationship with any new
stepparent. Although custodial parents’ past relationships have been studied, there have been no studies on the
impact of the stepparents’ previous relationships on discipline. This study will examine the stepparents’ previous
relationships.

The perceived role of the stepparent varies widely between families (White, 1994; White & Gilbreth, 2001).
The role of a stepparent is “incompletely institutionalized” (Cherlin, 1978) and the stepparent is not guided by
formal rules or cultural norms. If both biological parents are still involved with the stepchild, the stepparent has
no clear role. The ambiguity of the stepparent role is illustrated by the lack of formal titles for stepparents
(Cherlin, 1978). It is unlikely that a stepparent would be addressed as “Step-Dad”. Some African Americans
differentiate between biological and non-biological fathers, by calling the biological fathers “Father” and the
man who cares for the child “Daddy” (Furstenberg & Spanier, 1987). However, most stepchildren call their
stepparents by their first name, a nomenclature which implies a relationship which is not parental. If the
stepparent is not considered a parent then the child may determine that the stepparent has no disciplinary role.
Thus, the perceived role of the stepparent may also influence the types of discipline used.

The amount of time spent with the other biological parent has been a recent focus of stepfamily research.
Stepfamily systems include not only the custodial family, but also the non-custodial family members (Gupta &
Parry-Gupta, 2003). Living arrangements and visitation schedules can change frequently, and can alter the
family system. There is mounting evidence that non-custodial parents continue to have a major influence on the
custodial family system (Ganong & Coleman, 2000). It is thought that visits to non-custodial parents who use a
more lenient approach to discipline result in an idealised image of that parent, and a harsher image of the
custodial parent (Schwartz & Kaslow, 1997). The more often the child sees the other biological parent, the
harder it is for the stepparent to take on a parent-like role (Marsiglio, 1992) and the harder it is for the
stepparent’s discipline to be accepted.

This study builds on the knowledge of stepfamily relationships and specifically examines discipline. It is
hypothesised that factors such as the age of the stepchildren, the length of the current relationship, the number of
past relationships, the role of the stepparent and the proximity of the other biological parent will influence the
types of discipline used. Knowledge from this study will help stepparents to develop realistic and appropriate
styles of discipline, and lead to healthier relationships within stepfamilies.

Method

Design and Procedure

Research was gathered from an on-line questionnaire of stepparents, using the Remark survey program. It
was anticipated that this option would canvas a broad spectrum of participants and facilitate prompt completion
of the survey. Participants were recruited by flyers and posters distributed to Lifeline and Centacare, and by
using the internet. The Stepfamily Association of Victoria provided a link to the questionnaire, as well as a free-
call number for specialised stepfamily counselling.

Participants

The participants were 63 stepparents (45 stepmothers and 18 stepfathers) from various regions around
Australia. All stepparents were eligible, irrespective of whether the stepchildren resided with them or visited
occasionally. The adults could be married, living together or even LATs (living apart together). Stepfathers made
up 26.42% of the participants, while stepmothers made up 73.58%. The mean age of participants was 40.7 years
(SD = 8.26). The youngest stepparent was aged 23 and the oldest was aged 61. Just over half the participants had
been in their current relationship for less than five years. Approximately one third of participants (34%) had
never been in a live-in relationship before, and a further 43.4% had been in just one other live-in relationship.

Materials

Survey questions were created to investigate the various factors that influence stepfamily discipline. The 52
questions included demographic information as well as questions about the age of the stepchildren, the length of
the relationship, the number of relationships the stepparent had been in, the perceived role of the stepparent and
the involvement of the other biological parent (not the stepparent’s partner). There was also a section on the
frequency of different discipline techniques. This included time outs (being sent to their room), consequences
given (such as losing pocket money), mild verbal correction (being told they’ve done the wrong thing), harsh
Discipline within stepfamilies

verbal correction (being shamed, humiliated or yelled at), mild physical punishment (a mild tap) and harsh physical punishment (a hard smack). Most questions were quantitative in nature, and a five point scale was used frequently. Several questions allowed for qualitative data to be collected: for example “did anyone warn you about marrying someone with children?” and “if so, what did they say?”

Results

Discipline is one of the major challenges confronting stepparents (Rodwell, 2002), and this study confirmed this notion, with 57.1% reporting it as a serious issue in their family and 19.1% arguing with their partner about discipline at least weekly. Logistic regression analysis was performed, with each type of discipline commonly used by stepparents as outcome variables. The five predictors were the age of meeting the stepchildren, the length of the relationship, the number of previous relationships, the role of the stepparent and the amount of time spent with the other biological parent.

Almost half of the participants (47.17%) were warned against marrying someone with children. The most common warning given was “don’t do it.....why take on someone else’s problems”. Some comments were even more negative. One stepmother was told:

*Don’t take on someone with baggage. Your SS (stepson) is horrible; don’t straddle (sic) yourself with him because you won’t be welcome in our home if you have your SS with you. All he (your partner) wants is someone to look after his child, he will never love you as much as the x (sic) or his son.*

The child they were discussing was five years old at the time. Some participants felt rejected “I am never really going to be part of their family which leaves me feeling lonely and isolated” and hopeless “I don’t see the current issues fixing themselves; they are winning!” Almost 11% of participants were very unhappy in their relationship. In response to the question “How often do you wish that you were NOT in your current relationship?” 4.6% replied “frequently” and 6.3% replied “every day”. However, there were also some positive results. Over half the stepparents (50.94%) reported that they got on very well with their stepchildren, and 55% rated their current relationship as “very good”. As one participant said “I love my family, and the “problems” are insignificant compared to the joy my wife and stepson (and our other children) bring me.”

It was encouraging that milder types of discipline were used by stepparents more frequently than harsher types. Figure 1 shows that time-outs were regularly used by 14% of stepparents, consequences by 19% of stepparents and mild verbal corrections by 36% of stepparents. In contrast to this, harsh verbal corrections were used regularly by 11% of stepparents, mild physical punishment by 5% of stepparents and harsh physical punishment by 3% of stepparents. Several factors showed significant relationships to the milder types of discipline used; however, harsher types of discipline did not achieve significance. This was due to the lower numbers of participants using harsher discipline and was a limitation of this study.

![Figure 1. Percentages of discipline used at least weekly by stepparents (N = 63).](image)
Table 1 presents the logistic analysis results for different types of discipline. A test of the full model for which the dependent variable was time out with all five predictors against a constant-only model was statistically significant, $\chi^2(6, N = 63) = 14.9$, $p < .05$. According to the Wald criterion, only the age of meeting the child reliably predicted the use of time outs, $z = 5.79$, $p < .05$.

<table>
<thead>
<tr>
<th>Dependent Variable</th>
<th>Independent Variable</th>
<th>$\beta$</th>
<th>Wald</th>
<th>Exp ($\beta$)</th>
<th>Sig.</th>
</tr>
</thead>
<tbody>
<tr>
<td>Time-outs</td>
<td>Meeting child at age 5-12 years</td>
<td>-2.12</td>
<td>5.79</td>
<td>0.12</td>
<td>0.02</td>
</tr>
<tr>
<td>Consequences</td>
<td>Percentage of time spent with other biological parent</td>
<td>-0.29</td>
<td>4.54</td>
<td>0.75</td>
<td>0.03</td>
</tr>
<tr>
<td></td>
<td>Number of previous relationships</td>
<td>-0.90</td>
<td>4.09</td>
<td>0.41</td>
<td>0.04</td>
</tr>
<tr>
<td>Mild Verbal Correction</td>
<td>Percentage of time spent with other biological parent</td>
<td>-0.25</td>
<td>4.58</td>
<td>0.78</td>
<td>0.03</td>
</tr>
</tbody>
</table>

A test of the full model for which the dependent variable was consequences with all five predictors against a constant-only model was statistically significant, $\chi^2(6, N = 63) = 14.74$, $p < .05$. According to the Wald criterion, the amount of time spent with the other biological parent reliably predicted the use of consequences, $z = 4.54$, $p < .05$, as did the number of previous relationships, $z = 4.09$, $p < .05$.

A test of the full model for which the dependent variable was mild verbal correction with all five predictors against a constant-only model was statistically significant, $\chi^2(6, N = 63) = 15.07$, $p < .05$. According to the Wald criterion, only the time spent with the other biological parent reliably predicted the use of mild verbal corrections, $z = 4.58$, $p < .05$.

**Discussion**

The family system of a stepfamily is usually more complex and less stable than that of a nuclear family. Ill-defined boundaries also make stepfamily relationships more challenging (Hetherington, 1991). The use of discipline within stepfamilies is a contentious issue, with child focused studies suggesting that only biological parents should discipline a child (Rodwell, 2002), and stepparent focused studies arguing that stepparents remain outsiders in their family system if they do not discipline (Pinsof & Lebow, 2005).

The age of meeting stepchildren was strongly correlated to the use of time-outs when the age of first meeting was between the ages of five and twelve. This finding supported previous research by Fine, Kurdek and Hennigen (1992) which found that the age of meeting stepchildren was a major factor in stepfamily relationships. Children aged five to twelve usually have strong bonds to their biological parents (Parkes & Hinde, 1982) and tend to resist harsh discipline from stepparents. Time-outs may therefore be preferred as a practical, non-threatening type of discipline that is more likely to be accepted by the stepchildren.

The length of the relationship with the stepchildren approached significance for the harsh verbal correction type. Greater numbers of participants would enable a more accurate analysis of this factor. As Papernow (1988) reported, many years may go by before a stepparent is fully integrated into the family. The use of harsh verbal corrections may indicate that the stepparent is more accepted as time progresses or may be related to the increasing age of the children: teenagers, presumably, are more likely to evoke a strong negative response than younger children. Although Cherlin and Furstenberg (1991) urge stepparents to wait until they are fully accepted to attempt discipline, some stepparents find this hard to do. One participant of this study, with four stepchildren between the ages of 6 and 14, has been in her current relationship for 3 years. She states “I don't want to be subordinated to the children in my own home because of powerlessness over discipline”.

The number of previous (live-in) relationships was found to be significant for the consequences type of discipline. This was classified as one of the mild types of discipline and may reflect a more in depth knowledge of discipline techniques gleaned from past relationships or may reflect a less intense response to the stepchild.
As one stepfather responded “I have been in a few situations with stepchildren…you obviously know what you are getting yourself into, and what the responsibilities and potential issues are.” Although the custodial parent’s number of previous relationships has been researched and found to be positively correlated to poorer outcomes for the children, this is the first study to investigate the stepparent’s number of past relationships. It is possible that multiple relationships are detrimental if the custodial parent has them, (because of instability), but are somewhat beneficial if the stepparent had them before meeting the stepchildren (more experience, without added instability).

No significant relationships were found between the perceived role of the stepparent and the type of discipline used. It was not possible in this study to ask the children for their direct opinion of the stepparent’s role: however the question “what do your stepchildren call you?” was asked to help clarify this. This question was based on previous research by Furstenberg and Spanier (1984) which linked naming titles to acceptance of the stepparental role. In this study there was a discrepancy between how stepparents perceived their role and the name children called them. For example, when given a choice of roles between “like a parent”, “like a friend”, “the parent’s partner”, or “the enemy”, 42.9% of the stepparents perceived that they were “like a parent”, yet only 19% of the stepchildren called their stepparents “Mum” or “Dad”. Future research based on case studies would help clarify this discrepancy.

The final factor examined was the amount of time spent with the other biological parent. This had been researched previously with regard to relationships but not in relation to discipline (Walker & Messinger, 1979). Time with the other biological parent was significant for the consequence type, and also the mild verbal correction type. The more time spent with the other biological parent, the more likely it was that consequences and time-outs (two of the mild forms of discipline) would be used. This may be because regular changes of contact remind the stepparent of their limited role, or it may be that step-children who regularly see their other biological parent behave differently from those who do not. The effect of regular changes of contact on discipline is an area of great potential for future research, especially given the current policy of equal access following divorce (Sexton & Fleming, 2007).

Remarriage has been called “the triumph of hope over experience.” And, indeed, this study found nearly 42% of participants believed (wrongly) that first marriages have a higher divorce rate than second marriages. Despite the challenges, marrying someone with children was regretted by only 11.3% of participants. Although many stepfamilies reported difficulties with discipline or problems within the relationship, only 28.3% had ever sought counselling for problems within the stepfamily. Unfortunately, most stepparents were unprepared and ill-equipped for the realities of stepfamily life. Nearly half (47.1%) of the participants had been warned about marrying someone with children, yet 64% claimed to be only slightly aware or completely unaware of the challenges facing them before forming a stepfamily. This ignorance may reflect the “Brady Bunch Effect”. Television shows like the Brady Bunch both glamorise and trivialise the stepfamily experience (Ganong & Coleman, 2000). The Brady children all have the same surname, any problems are minor, and the ex-partners (and even ex-grandparents) are never mentioned by the couple or the children. However, most stepfamilies are nothing like this. Unlike the cohesive Brady Bunch, “complex step” families, where both parents bring children from a past relationship into the new family, are the most likely to experience major challenges (Schwartz & Kaslow, 1997), including problems with discipline.

Limitations of this study include the relatively small number of participants, and the greater percentage of stepmothers answering the questionnaire. This gender imbalance is a common occurrence in social psychology research, and in this study the discrepancy was quite marked. Stepfathers greatly outnumber stepmothers in the general population (75%), but made up only 26% of the participants. Possibly, women are generally expected to do any “relationship” work, even when they are stepmothers. Stepmothers usually find stepparenting more challenging than stepfathers because of this expectation (White, 1994), so they may be more motivated to take part in research projects. Another limitation was the lack of questions about previous parenting experience. It would have been helpful to know more about stepparent’s past experiences, including the numbers and ages of any biological children or previous stepchildren.

It is recommended that during the early stages of stepfamily formation, stepparents focus on developing relationships with partners and stepchildren, and biological parents continue to be responsible for discipline. It would be beneficial if stepfamilies attended courses and counselling before problems occurred. Research based on case studies and focussing on the extended family system would also be valuable. Stepparents are often undervalued by their stepchildren and overlooked by the public. They give their time, energy, money and often their love in situations where their role is ambiguous and there is no guarantee of gratitude in return. It is hoped that this study has raised awareness of stepparenting and that the knowledge gained will help stepparents to develop realistic and appropriate styles of discipline, and will lead to healthier relationships within stepfamilies.
References


Adolescent Girls’ Exposure and Responses to Warning Signs of Abuse in Intimate Relationships: Implications for Relationship Abuse Prevention

Kylie A. Murphy (S3126078@student.rmit.edu.au)
RMIT University, Bundoora

A/Prof. David Smith (david.smith@rmit.edu.au)
RMIT University, Bundoora

Abstract

This study explored adolescent girls’ experiences of, and responses to, seven domains of intimate partner behaviour that are considered to be early warning signs of relationship abuse; 21 partner behaviours were examined in total. A questionnaire was purpose-built to elicit three responses in relation to each of the 21 behaviours. From these responses, measures of self-reported exposure, perceived seriousness, and proposed response protectiveness were derived for each domain. Girls (N = 131) aged 14-18 years, attending school in the semi-rural Shire of Mitchell in Victoria, were recruited to complete the questionnaire. Significant proportions of these respondents (1) reported exposure to each domain of partner behaviour, (2) lacked awareness particularly of the risks associated with possessive and highly dependent partner behaviours, and (3) regardless of their level of risk awareness, lacked knowledge of behavioural responses that might discourage problematic beliefs and behaviours by their partners. The implications of these and other findings for youth-targeted relationship abuse prevention are discussed.

An Australia-wide study conducted in 2001 (Crime Research Centre & Donovan Research, 2001) found that of the 83% of young people aged 19 to 20 years who reported having intimate relationship experience, 42% reported some form of physical victimisation in their relationships. While male and female adolescents at all ages reported equally high rates of physical abuse perpetration and victimisation—probably due in large part to reciprocal interactions (Harned, 2002)—half the females reported feeling fearful during actual or threatened violence, compared with one in ten of the males.

These statistics are particularly concerning when viewed with other findings that (1) adolescent relationship abuse is associated with physical and psychological adolescent health problems (Callahan, Tolman, & Saunders, 2003), especially for girls (Ackard & Neumark-Sztainer, 2002; Molidor & Tolman, 1998); (2) bi-directional physical relationship abuse in adolescence (as for adults; Crime Research Centre & Donovan Research, 2001) is associated with more frequent violence and more severe injuries than unreciprocated abuse (Gray & Foshee, 1997); and (3) abusive behaviour patterns established in adolescent relationships often carry through into adult relationships (Feiring & Furman, 2000; Smith, White, & Holland, 2003; Wekerle & Wolfe, 1999). Reducing rates of relationship abuse in adolescent relationships should be considered central to efforts aimed at preventing relationship abuse in the Australian community.

Given that the principles of behavioural psychology apply equally to males and females of all ages (Mallot & Suarez, 2004), it is not unreasonable to assume that in adolescent relationships particular responses by one partner might reinforce or, alternatively, discourage certain behaviours by the other partner. Adolescent females therefore wield potential power to modify high-risk behaviour by male partners—where abusive relationship behaviour is not already ingrained—such that these males might learn less problematic beliefs and behaviours over time. Adolescent females, however, typically reciprocate physical relationship abuse (Watson, Cascardi, Avery-Leaf, & O’Leary, 2001) and may interpret jealous and controlling behaviours as signs of love (Follingstad, Rutledge, McNeill-Harkins, & Polek, 1992; Levy, 1990). Girls may thus inadvertently encourage abusive partner behaviours and, hence, play an unwitting part in the establishment of psychologically and physically dangerous relationship dynamics.

Little of the prevention research literature has been devoted to discussion of the precise nature and defensibility of the content selected for inclusion in existing Youth-targeted Relationship Abuse Prevention (YRAP) programs (e.g., Avery-Leaf, Cascardi, O’Leary & Cano, 1997; Foshee et al., 1998; Wolfe et al., 2003). To achieve maximal preventative gain at minimal cost, youth-targeted preventative programs must deliver educational/training experiences that address two elements: (1) the high-risk situations that the adolescent participants are most likely to experience, and (2) the significant gaps that exist in their current knowledge- and skill-banks for resisting unhealthy responses (see Sanci et al., 2002 for a review highlighting the importance of adherence to these and other principles in the context of substance abuse prevention). Research that sheds light on these two elements, in the area of relationship abuse, is difficult to find. The prevalence of specific examples of emotional and social abuse in contemporary adolescent relationships—as forms of relationship abuse themselves, and as potential precursors to physical relationship abuse—is indeterminate. How adolescent females respond to early signs of abuse is also unknown.
Yet investigations of this nature could provide insights into which specific behaviours are most likely to give rise to acts of physical relationship abuse or, if not curbed, lead to chronic emotional and/or social abuse. In short, for YRAP programs to respond to the actual preventative needs of the intended recipients exploratory research must be conducted to ascertain what high-risk situations or “warning signs” of abuse are occurring in adolescent relationships, and what strategies adolescents currently use in response to these warning signs.

The current study was designed to remedy the lack of formative research in this area and, in so doing, promote the development of YRAP programs that respond to the psycho-educational needs of young people in their early relationships. In light of the greater impacts of male-to-female relationship abuse compared to the impacts of female-to-male relationship abuse (Bagshaw & Chung, 2000; Crime Research Centre & Donovan Research; Holtzworth-Munroe, 2005), this study focused on the question of how best to reduce adolescent girls’ vulnerability to victimisation. In particular, it was intended that this study would assist practitioners to develop programs that respond to the needs of female adolescents living in semi-rural Australian settings. A pilot study in this field, it aimed to establish the breadth of exposure of girls aged 14 to 18 years to a range of warning sign behaviours by a partner, and their attitudes and hypothetical behavioural responses to these warning signs.

Relationship abuse in this study was defined as any behaviour by a partner, within or following an intimate relationship that, by physical or psychological means, is likely to erode the other partner’s (a) sense of personal worth or self-confidence, (b) feelings of emotional or physical safety, and/or (c) connectedness to a social support network. Based on the substantial literature on interpersonal and situational (as distinct from background and societal) risk factors for the perpetration of relationship abuse (Barnett, Martinez, & Blustein, 1995; Bird, Stith, & Schladale, 1991; Bookwala & Zdziunik, 1998; Cano, Avery-Leaf, Cascardi, & O’Leary, 1998; Kane, Staiger, & Ricciardelli, 2000; Murphy, Meyer, & O’Leary, 1994; O’Leary and Slep, 2003; Smith, White, & Holland, 2003; Stets & Firog-Good, 1990), a total of 21 high-risk partner behaviours were examined. Each of these behaviours stemmed from one of seven warning sign domains: gender-based denigration (i.e., putdowns based on the subject’s gender), personal putdowns (i.e., derisive comments made in private to a partner), public debasement (i.e., actions that could humiliate or tarnish the subject’s image), verbal aggression (i.e., hostile or intimidating comments delivered in the context of an argument), jealous/possessive behaviour (e.g., overprotective behaviour), social restriction (i.e., behaviours that limit the subject’s access to resources and social support), and exit control tactics (i.e., actions that make leaving the relationship emotionally difficult). Each domain was represented by three specific behaviours.

Three research questions underpinned the development of the questionnaire administered to the adolescent girls in this study: Firstly, what proportions of adolescent girls in the target region have been exposed to partner behaviours in each warning sign domain? Secondly, what is the perceived seriousness of partner behaviours in each domain? Thirdly, how knowledgeable are adolescent girls about behaviours that would constitute protective responses to partner behaviours in each domain? Two further questions with implications for YRAP program development were also addressed: What is the extent of correlation between perceived seriousness and proposed response protective, in relation to each domain? And, finally, what is the effect, if any, of exposure to warning sign behaviours on perceived seriousness and proposed response protective, respectively?

**Method**

**Participants**

A sample of \(N = 146\) adolescent girls in Years 9 \((n = 30; M = 14.37\) years, \(SD = 0.49\)), 10 \((n = 41; M = 15.27\) years, \(SD = 0.45\)), 11 \((n = 33; M = 16.42\) years, \(SD = 0.50\)), and 12 \((n = 42; M = 17.38\) years, \(SD = .58\)) were recruited from the semi-rural Shire of Mitchell in Victoria. Of the Year 9 girls, 77.7% reported relationship involvement since completing primary school. Similarly, 87.8% of the Year 10 girls, 78.8% of the Year 11 girls, and 90.5% of the Year 12 girls reported such involvement.

**Materials**

A questionnaire booklet for adolescent girls (titled “What’s OK & What’s Not OK in Relationships?”) was developed for the specific purposes of this study. The anonymous questionnaire seeks basic demographic information including the participant’s age, year level, and whether or not she has ever been involved in an intimate relationship (short- or long-term, sexual or non-sexual). Three questions elicit participant responses in relation to each of 21 warning sign behaviours (each of the seven domains described in the Introduction was represented by three behaviours). The first question, “Is this OK if it happens in a relationship?” provides a measure of *perceived seriousness*, and is rated on a five-point scale ranging from 1 (*OK, not a problem at all*) to 5 (*a very dangerous problem*). The second question, “Has this happened to you in a relationship?” provides a measure of each participant’s *reported exposure* (but not the frequency of their exposure) to each of the behaviours, and is answered by circling a *yes* or *no*. The third question, “How would you respond if a partner did this to you?” provides a measure of *proposed response protective* in relation to each of the behaviours: Each
behaviour is accompanied by a line of space in which participants are asked to write an open-ended response. Participants’ responses were assigned a response protectiveness value of between 1 and 3 (see data analysis section below).

Data collection procedures

The study was promoted to girls in the target region via posters, local radio and newspaper advertisements, and local secondary schools. The primary researcher visited schools (with the permission of the principals) to explain the nature of the questionnaire and invite participation. Participation required a girl to request a mail-out pack, ask a parent/guardian to read and sign the enclosed consent form, complete the 20-minute questionnaire, and then return the completed consent form and questionnaire by reply-paid mail to the primary researcher.

Data analysis procedures

For each participant, breadth of reported exposure, mean perceived seriousness, and mean proposed response protectiveness scores, respectively, were calculated for each warning sign domain. Pearson r statistics were calculated to determine the extent of any correlations between breadth of exposure, perceived seriousness, and proposed response protectiveness. Non-parametric cross-tabulation procedures were also conducted to examine relationships between perceived seriousness and proposed response protectiveness in relation to selected domains.

Numerical classification of participants’ qualitative responses, to identify levels of proposed response protectiveness, was based on the following criteria: Responses that reciprocated the high-risk behaviour, or were aggressively retaliatory, encouraging, or reassuring, and therefore likely to encourage problem behaviour, were assigned a value of ‘1’. Responses that were passive or vague (e.g., “wouldn’t care,” “walk away,” “ask him ‘why?’,” “ignore it”, or “be upset with him”), or involved leaving the relationship following verbal threats without telling a trusted adult, were rated ‘2’. Responses that involved non-aggressively asserting a personal need, right, expectation, or boundary, or requesting a specific change in the partner’s behaviour, or leaving the relationship (after telling a trusted adult about any threatening behaviour, if the high-risk behaviour involved a threat), were rated ‘3’.

Results

Overall, 18.5% of respondents reported no exposure to any of the warning sign behaviours examined. Of those reporting previous relationship experience, only 8.1% reported no exposure. Almost two thirds of relationship-experienced respondents reported exposure to 4 or more warning sign behaviours, over half reported exposure to 5 or more, and nearly one third reported exposure to 9 or more. The mean number of warning signs encountered for this group was 6.01 (SD = 4.67). Figure 1 shows that significant percentages of respondents with relationship experience reported exposure to any one warning sign domain. Just under 70% of these respondents had experienced at least one jealous/possessive behaviour by a partner; 37 to 57% had experienced one or more behaviours from at least one of the other domains.

Jealous/possessive behaviours were perceived to be the least problematic of all relationship behaviours (see Table 1), recording lower mean perceived seriousness scores than all other domains of behaviour, including exit control tactics, t(145) = -13.99, p < .001. Verbal aggression and public debasement were perceived to be the most serious problems in a relationship. Public debasement, on average, was considered more serious than personal putdowns, t(145) = 3.29, p < .001. As is also evident by inspection of Table 1, respondents’ proposed responses to most domains, on average, were passive (rated 2). Responses tended to be risk-heightening, however, in relation to exit control tactics and jealous/possessive partner behaviours. Proposed responses were more protective to socially restrictive partner behaviours than they were to any other domain of partner behaviour, including gender denigration, t(144) = 7.38, p < .001. Responses were less protective to verbal aggression compared with personal put-downs, t(144) = -3.19, p = .002, and to exit control tactics compared with verbal aggression, t(144) = -2.42, p = .017. It is worth noting that while social restriction was considered to be only the third most serious domain, it was associated with the most protective responses. Conversely, while verbal aggression was considered to be the most serious domain, it ranked only third in terms of proposed response protectiveness.
Figure 1. Percentages of relationship-experienced respondents reporting exposure to behaviours in each domain.

Table 1
Descriptives for Perceived Seriousness and Proposed Response Protectiveness by Domain

<table>
<thead>
<tr>
<th>Domain</th>
<th>Perceived Seriousness</th>
<th>Proposed Response Protectiveness</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>M^a</td>
<td>SD</td>
</tr>
<tr>
<td>Gender denigration</td>
<td>3.66</td>
<td>0.71</td>
</tr>
<tr>
<td>Personal put-downs</td>
<td>3.76</td>
<td>0.70</td>
</tr>
<tr>
<td>Public debasement</td>
<td>3.91</td>
<td>0.64</td>
</tr>
<tr>
<td>Verbal aggression</td>
<td>4.00</td>
<td>0.64</td>
</tr>
<tr>
<td>Jealousy/possessiveness</td>
<td>2.78</td>
<td>0.63</td>
</tr>
<tr>
<td>Social restriction</td>
<td>3.65</td>
<td>0.69</td>
</tr>
<tr>
<td>Exit control tactics</td>
<td>3.57</td>
<td>0.59</td>
</tr>
</tbody>
</table>

^aIn the questionnaire, 4 denoted that the behaviour was deemed to be a serious problem and 5 denoted that the behaviour was deemed to be a very dangerous problem. ^bAny protective proposed response was assigned a value of 3.

Perceived seriousness and proposed response protectiveness were not correlated for three of the domains, and only weakly correlated for exit control tactics (r = .28, p < .01), verbal aggression (r = .21, p < .05), jealousy/possessiveness (r = .18, p < .05), and personal putdowns (r = .18, p < .05). Upon further non-parametric analysis, even in those four domains where weak associations were found between perceived seriousness and response protectiveness, when respondents perceived a partner behaviour to be a serious or very dangerous problem in a relationship, risk-heightening proposed responses were found to be common. For example, 47.6% of risk-aware respondents proposed responses that were reinforcing (e.g., reassuring) in relation to Item 10, “Getting into fights with others who threaten to steal you”, and over a quarter of risk-aware respondents proposed responses likely to be aggravating in relation to Item 11, “Shouting and name calling during an argument.” In relation to Item 11, 44% of risk-aware respondents proposed responses that were passive (e.g., tolerant or forgiving). In other words, the majority of proposed responses were unlikely to discourage a partner from displaying high-risk behaviours in the future, even when respondents viewed the behaviours in question to be serious or dangerous problems.

Broader exposure to warning sign behaviours tended to be associated with more permissive attitudes and less protective proposed responses. Specifically, broader exposure to exit control tactics, jealousy/possessiveness,
verbal aggression, and personal putdowns was associated with lower perceived seriousness regarding these domains (correlations ranged from $r = -0.23$ to $-0.30, p < 0.01$). Girls more widely exposed to jealous/possessive behaviours also perceived exit control tactics and putdowns to be more acceptable ($r = -0.27, p < 0.01$ and $r = -0.24, p < 0.05$, respectively). Likewise, exposure to gender-based denigration, public debasement, verbal aggression, jealousy/possessiveness, social restriction, and exit control tactics was associated with less protective proposed responses in relation to one or more domains (correlations ranged from $r = -0.18, p < 0.05$ to $r = -0.30, p < 0.01$).

**Discussion**

The first aim of this study was to uncover the extent of adolescent girls’ exposure to various warning signs of relationship abuse. The majority of girls reported being exposed to some form of warning sign behaviour, and exposure was widespread across the seven domains. The second aim of this study was to ascertain the attitudes held by girls in relation to warning sign behaviours. Girls were relatively unaware of the risks associated with possessive and emotionally controlling partner behaviours. The third aim was to learn about the likely behavioural responses of girls to high-risk partner behaviours. Most girls lacked awareness of the sorts of responses that would mitigate the risk of abusive relational dynamics becoming entrenched. Finally, this study explored associations between exposure to and attitudes towards high-risk behaviours and the propensity to respond protectively. Girls’ exposure to warning sign behaviours was not associated with wiser, more protective attitudes or hypothetical responses—if anything, the opposite was found—and their attitudes had little bearing on their likelihood of responding protectively.

Two findings observed in this study should be considered in the design of future YRAP programs. Given that wider exposure to certain domains of partner behaviour—personal put-downs, verbal aggression, jealousy/possessiveness and exit control tactics—was associated with lower perceived seriousness in relation to these respective domains, raising awareness among adolescent girls regarding the risks associated with these warning signs is imperative. Further, the finding that exposure to gender-based denigration, public debasement, verbal aggression, jealousy/possessiveness and exit control tactics is negatively associated with response protectiveness in one or more warning sign domains suggests that it may be more efficient to equip adolescent girls with protective skills before they begin to engage in intimate relationships than to wait until high-risk relationship behaviours have occurred. That is, girls might be more receptive to practical training in how to respond protectively before they learn to accommodate and/or reciprocate these behaviours.

In light of the possible effects of exposure, YRAP programs ought to be delivered to adolescents before warning signs of relationship abuse begin to occur. On the other hand, adolescents tend to be more engaged in learning when they perceive it to be personally relevant or useful in the short-term (Murdoch & Wilson, 2004). To achieve optimal developmental timing in the delivery of YRAP interventions, further research is required to establish the ages at which different warning sign behaviours begin to occur for at-risk individuals (in view of delivering targeted interventions; see Vezina & Hebert, 2007) and for significant proportions of young people in general (in the case of universal program delivery). Quantitative research, looking at individual exposure frequencies, must be conducted with large, representative samples of young people in order for valid and useful age (or year level) comparisons to be made. Equally, programs delivered at different stages of adolescence should be rigorously evaluated to determine whether or not program effectiveness—in terms of reduced relationship abuse perpetration and victimisation—is a function of age and/or previous exposure.

Perhaps the major finding of this study is that educating girls that being controlled or hurt by a partner is unacceptable is unlikely to help them to prevent their own victimisation, unless they are also given practical training in how to respond protectively to the early signs of these forms of abuse. Evidently, such warning signs occur in significant proportions of adolescent relationships and, disturbingly, many girls risk inadvertently contributing to hostile patterns of relating and dangerous escalations, and unwittingly increasing their own risk of victimisation by encouraging over-dependence and possessiveness by their partners. Existing YRAP programs that raise awareness about different forms of relationship abuse, that focus on changing attitudes towards relationship abuse, and that educate young people about the characteristics of relationships that are not abusive (for a review of existing YRAP programs, see O’Keefe, 2005) may not adequately address pivotal situations that many girls face but are poorly equipped to deal with.

This study highlights the need to deliver YRAP programs that incorporate teaching adolescents girls practical skills for responding protectively to specific examples of high-risk partner behaviour: particularly overly dependent, possessive behaviours; demeaning comments; and aggressive, intimidating behaviours in the context of interpersonal conflict. Promisingly, adolescent boys report looking for cues about how to act within their relationships (Office of the Status of Women, 2003), and adolescence is a formative period during which attachment style is open to change in response to new relational experiences (Collins & Read, 1994; Feeney & Noller, 1996). There is little reason to suspect that practical training in the safest ways to respond to warning sign behaviours could not also be applied meaningfully to the preventative needs of adolescent boys. Empirical exploration of this issue should be seen as a priority.
To conclude, YRAP programs must empower adolescent girls with awareness and skills to respond to warning sign behaviours in ways that discourage such behaviours without resorting to high-risk behaviours. Practical training for adolescents in ways to assertively express one’s rights, expectations and boundaries with a partner, emphasising the importance of respecting one’s own and each other’s dignity, is critical. The importance of this study might best be gauged by its success in providing an impetus for future research that focuses on the ways that relationships become (rather than are) abusive, and the role that adolescent males and females might both play—with the help of carefully pitched prevention programs—in reducing relationship abuse against women.

References


**Address for Correspondence**

Kylie A. Murphy  
School of Psychology  
RMIT University  
Bundoora campus  
Plenty Road (PO Box 71)  
Bundoora Victoria 3083
The Impact of Living Environment on Satisfaction with Social Relationships upon Commencing University

Elodie J. O’Connor (elodie@deakin.edu.au)
Petra K. Staiger (pstaiger@deakin.edu.au)

Susan Chambers
Deakin University
Victoria, Australia

Abstract

Making the transition to university is a significant life event for many young people. It is believed that strong social relationships can help make this transition more successful. In this study, 201 full-time, first year university students completed a survey in order to examine whether those students who remained living with their parents differed on a range of social relationship variables compared to those who lived on-campus or off-campus independently from their parents. Results revealed that students living independently off-campus reported significantly lower satisfaction with their living environment and opportunities to make new friends at university, as well as significantly higher levels of depression, and higher levels of loneliness which approached significance. These findings indicate that universities may need to focus more attention on this particular sub-group, in an attempt to increase the successful transition of students from high school to university. Future research could endeavour to develop strategies for increasing university students’ social relationships and support networks.

Beginning university is widely recognised to be a very stressful time in a student’s life (e.g., Ross, Niebling, & Heckert, 1999). For example, it has been reported that around thirty percent of students consider withdrawing from university in the first six weeks (e.g., Deakin University, 2004), with many of these never completing their university degree (Enochs & Roland, 2006). This is not surprising considering the many changes that may occur during this time, such as moving away from the family home and adjusting to autonomous learning. Further, there is a troubling prevalence of depression among university students, which appears to be rising; a study conducted by the American College Health Association in 2004, involving 47,202 students from 74 university campuses, found that 14.9% of students had been diagnosed with depression, compared with 10.3% in 2000 (Fisher, 2004). These statistics highlight the significance and impact that commencing university has on students’ lives, and so the recent research literature has attempted to determine which factors may impact students’ adjustment to university.

Previous research has suggested that social relationships are extremely important in adolescents’ lives (e.g. Cheng & Furnham, 2003; Enochs & Roland, 2006; Noom, Dekovic, & Meeus, 1999). In general, adolescents who are securely attached to their parents and peers, as well as being able to establish new friendships, experience high self-esteem (Cheng & Furnham, 2003) and greater autonomy (Noom et al., 1999). They are also more successful in making the successful transition to university than those students who are more isolated (e.g., Enochs & Roland, 2006). It would appear then, that those students who are still living in the parental home, and thus have not experienced a separation from their parents and peers, would transition better than those students who have moved away from home, either to an on-campus residence or to another type of independent living. Further, Enochs & Roland (2006) liken living in on-campus residences to living with family, as the living environment is one with supervision, rules, and boundaries, as well as placing importance on being a warm environment with an atmosphere of caring between students. Therefore, these students may also have some protection from the challenges of making the transition to university. To support this claim, Audin, Davy, & Barkham (2003) found that university students living on-campus were significantly more satisfied with their living environments (e.g., noise, cleanliness, security, socialising, etc) than students living in university owned flats. In addition, those students who live on-campus should have more opportunity to establish new friendships than those still living at home, or in other independent living. This opportunity arises as on-campus students are living with many other commencing students, as well as having more ready access to university social activities. It has been established that participating in university activities is an important factor in making the adjustment to university, in terms of assisting the student to make new friends and establish a sense of where they belong within the university community (Enochs & Roland (2006). On-campus students would have the greatest opportunity to participate in these activities, which may also assist in making the successful transition to university.

Possibly, then, those students who have moved away from the family home to live independently off-campus may experience the greatest challenge when making the transition to university. This may lead to greater levels of loneliness, as well as stress and depression, and a reduced level of subjective well-being. Possible reasons for this include both the dislocation from their existing support network, as well as more limited opportunities to establish new friendships. Data addressing this issue could be used to inform universities as to the best ways to
assist their students in making the successful transition to university. For example, universities could create programs designed specifically to target students living independently off-campus in an attempt to increase their social networking opportunities.

Given the above considerations, it is important that the relationship between living environment and aspects of students’ satisfaction with their social relationships be examined. The primary aim of this study was to determine whether there were any differences between those students living in the parental home, those living independently off-campus, and those living independently on-campus, on satisfaction with their social relationships, as well as levels of depression, stress, and subjective well-being.

**Method**

**Participants**

Full-time first-year university students from one rural and one urban campus of an Australian university were invited to participate. A total of 201 students participated, with a response rate of 29.6%. There were 57 males and 144 females, with a mean age of 19.33 years (SD = 1.90). The majority of participants were enrolled at the urban campus (132; 66%).

**Measures**

*Living environment* was measured by calculating a score from the answers to a number of related questions. Participants were asked “To study at university, did you move your residence”, and “Do you live on-campus”, both of which required a Yes/No response. Participants were also asked “Please indicate who currently lives with you”, which required respondents to choose from a set list of options, such as “One or both of your parents/guardians”, and “One or more adults who were neither your parent nor your partner”. From these answers, it was determined whether participants currently lived with their parents (living with parents), whether they lived away from the parental home off-campus (off-campus), or whether they lived away from the parental home at an on-campus residence (on-campus).

*Social satisfaction* was measured using a number of variables. Participants were asked a number of questions that asked how satisfied they were with the following social domains: living environment while at university, new friends made at university, support from family, and support of existing friends; for example, “How satisfied are you with the support of your family while at university”. The items were rated on an eleven-point end-defined scale (from 0 = very dissatisfied to 10 = very satisfied).

*Loneliness* was measured using a shortened version of the UCLA Loneliness Scale (Russell, 1996). The scale asks participants to rate how often they feel, for example, that they lack companionship or feel isolated from others; for example, “How often do you feel that you lack companionship”. The items were rated on an eleven-point end-defined scale (from 0 = never to 10 = always). Russell (1996) reported a coefficient alpha ranging from .89 to .94. Scores on the scale in the current study had a coefficient alpha of .88.

*Subjective well-being* was measured using the Personal Wellbeing Index (International Wellbeing Group, 2005). It consists of seven questions that ask how satisfied participants are with domains like their standard of living, health, and achievements in life; for example, “How satisfied are you with what you achieve in life”. The items were rated on an eleven-point end-defined scale (from 0 = very dissatisfied to 10 = very satisfied). The reported Cronbach’s alpha for this scale generally falls between .70 and .85 (International Wellbeing Group, 2005). The coefficient alpha for the current study was .80.

*Depression and stress* were measured using the short version of the Depression, Anxiety and Stress Scales (DASS; Lovibond & Lovibond, 1995), which consists of seven items per scale. This study required only the depression and stress scales of the DASS, so the anxiety scale was omitted. The DASS asks participants to rate how much statements applied to them over the past week; for example, “Over the past week, I felt down-hearted and blue”. The anchor points from the eleven-point end-defined scale allowed responses to range from 0 = “not at all” to 10 = “a lot”. The reported alpha values for both the short version of the depression scale and the short version of the stress scale are .81 (Lovibond & Lovibond, 1995). The current study found alpha values of .92 for the depression scale and .91 for the stress scale.

**Procedure**

After obtaining ethics approval, students who met the study’s selection criteria were sent an email by an administrative staff member at the university, inviting students to participate. An active hyperlink was included in the brief letter, and when participants clicked on this link, they were taken to the plain language statement, which then allowed them to agree or disagree to participate. Participants were given two weeks to complete the questionnaire.
Results

Descriptives

Ninety-two (46%) of participants moved house to attend university. Of these, 78 had previously been living with their parents. At the time of data collection, 50 of these participants had lived out of home for more than six months, 37 had lived out of home for between 3 to 6 months, and 4 had lived out of home for less than three months. The majority of these participants had moved more than 150km away from their previous home to attend university (68; 75%). Of the entire sample, 96 (48%) currently lived with their parents, while the other participants lived either with other adults, on their own, with a partner, or with children.

Correlations between variables

The relationships between the social variables, as well as subjective well-being, stress, and depression, were investigated using Pearson product-moment correlation coefficient. Given the number of correlations, the alpha level was set at .01. All correlations were significant, and in the expected direction, except for the correlation between family and loneliness. For example, those students who were more satisfied with their social situation were more likely to have higher subjective well-being, and lower levels of depression and stress. The correlations are presented in Table 1 below.

Table 1
Correlations between Variables

<table>
<thead>
<tr>
<th></th>
<th>Subjective well-being</th>
<th>Stress</th>
<th>Depression</th>
<th>Living situation</th>
<th>New friends</th>
<th>Family</th>
<th>Existing friends</th>
<th>Loneliness</th>
</tr>
</thead>
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<tr>
<td>Subjective well-being</td>
<td>1</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Stress</td>
<td>- .41**</td>
<td>1</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Depression</td>
<td>- .54**</td>
<td>.77**</td>
<td>1</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Living environment</td>
<td>.51**</td>
<td>-.27**</td>
<td>-.26**</td>
<td>1</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>New friends</td>
<td>.44**</td>
<td>-.32**</td>
<td>-.35**</td>
<td>.25**</td>
<td>1</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Family</td>
<td>.40**</td>
<td>-.20*</td>
<td>-.26**</td>
<td>.37**</td>
<td>.20*</td>
<td>1</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Existing friends</td>
<td>.48**</td>
<td>-.32**</td>
<td>-.35**</td>
<td>.28**</td>
<td>.24*</td>
<td>.37**</td>
<td>1</td>
<td></td>
</tr>
<tr>
<td>Loneliness</td>
<td>-.69**</td>
<td>.43**</td>
<td>.53**</td>
<td>-.30**</td>
<td>-.51**</td>
<td>.18</td>
<td>-.33**</td>
<td>1</td>
</tr>
</tbody>
</table>

*p<.01  
**p<.001

Differences in subjective well-being, stress, and depression

Differences in subjective well-being, stress, and depression between living environment groups were examined using MANOVA; the independent variable was living environment, while the dependent variables were subjective well-being, stress, and depression. Means and standard deviations for each of the variables are presented in Table 2.

There was a statistically significant difference between living environment groups on the combined dependent variables: $F(6, 366) = 2.60, p < .05$; partial eta squared = .04. In considering the univariate results, only depression reached statistical significance: $F(2, 184) = 4.31, p < .05$. Post-hoc tests conducted to identify significant comparisons revealed that the significant difference in depression scores lay between the off-campus ($M = 43.56, SD = 27.87$) and the on-campus groups ($M = 29.30, SD = 23.07$).

Differences in social satisfaction

Differences in social satisfaction variables and loneliness between living environment groups were then examined using MANOVA; the independent variable again was living environment, while the dependent variables were satisfaction with living environment, new friends, family, existing friends, and loneliness. Means and standard deviations for each of the variables are presented in Table 2.

There was a statistically significant difference for living environment on the combined dependent variables: $F(10, 376) = 2.80, p < .01$; partial eta squared = .07. In examining the univariate results, satisfaction with living environment ($F(2, 191) = 3.37, p < .05$) and new friends ($F(2, 191) = 3.48, p < .04$) reached statistical significance. Loneliness ($F(2, 191) = 2.77, p = .06$) approached significance, while family ($F(2, 191) = 2.09, p =
and existing friends \((F(2, 191) = 1.12, p = .33)\) did not reach statistical significance. Post-hoc tests conducted to identify significant comparisons revealed that the significant difference in satisfaction with living environment scores lay between the living with parents \((M = 7.41, SD = 2.35)\) and the off-campus groups \((M = 6.45, SD = 2.20)\). The significant difference in satisfaction with new friends scores lay between the off-campus \((M = 6.31, SD = 2.66)\) and the on-campus groups \((M = 7.65, SD = 2.36)\). None of the other comparisons were significant.

### Table 2

<table>
<thead>
<tr>
<th></th>
<th>Living with parents</th>
<th>Independent Off-Campus</th>
<th>Independent On-Campus</th>
<th>F</th>
<th>sr²</th>
</tr>
</thead>
<tbody>
<tr>
<td>Subjective well-being</td>
<td>72.20 12.51</td>
<td>67.39 16.18</td>
<td>69.58 14.76</td>
<td>2.03</td>
<td>.02</td>
</tr>
<tr>
<td>Stress</td>
<td>43.68 26.37</td>
<td>45.69 24.30</td>
<td>37.25 25.33</td>
<td>1.39</td>
<td>.02</td>
</tr>
<tr>
<td>Depression</td>
<td>34.30 23.70</td>
<td>43.56 27.87</td>
<td>29.30 23.07</td>
<td>4.31*</td>
<td>.05</td>
</tr>
<tr>
<td>Living environment</td>
<td>7.41 2.35</td>
<td>6.45 2.20</td>
<td>6.72 2.43</td>
<td>3.37*</td>
<td>.03</td>
</tr>
<tr>
<td>New friends</td>
<td>6.94 2.53</td>
<td>6.31 2.66</td>
<td>7.65 2.36</td>
<td>3.48*</td>
<td>.05</td>
</tr>
<tr>
<td>Family</td>
<td>8.09 2.00</td>
<td>7.97 2.39</td>
<td>8.77 1.86</td>
<td>2.09</td>
<td>.02</td>
</tr>
<tr>
<td>Existing friends</td>
<td>7.42 1.96</td>
<td>7.24 2.38</td>
<td>6.81 2.40</td>
<td>1.12</td>
<td>.01</td>
</tr>
<tr>
<td>Loneliness</td>
<td>35.02 26.55</td>
<td>45.86 30.07</td>
<td>37.83 26.91</td>
<td>2.77</td>
<td>.03</td>
</tr>
</tbody>
</table>

\(p<.05\)

Note: Significant comparisons between groups are indicated by a.

### Discussion

The current study reported significantly higher levels of satisfaction with living environment among those who lived in the parental home, as compared to those students living off-campus. In addition, significantly higher satisfaction with new friends made at university was reported by students living on-campus than students living off-campus. Further, significantly higher levels of depression were reported by students living off-campus than students living on-campus. The relationship between living environment and loneliness also approached significance, with off-campus students reporting higher levels of loneliness.

Inconsistent with predictions, no significant differences were found in relation to living environment and subjective well-being, stress, satisfaction with family, or existing friends. However, examination of the direction of scores between groups for each variable supported original predictions. It was expected that those students living off-campus would score the worst on each of the variables, as those students living with their parents would not have experienced a separation from their social support network, while living on-campus would appear to be a protective factor. This was shown to be the case for all variables except satisfaction with existing friends.

The findings of this study reveal that students living off-campus (independently from their parents) experience the greatest challenges when making the transition to university, with higher levels of depression and loneliness, as well as significantly less satisfaction with their living environment and opportunities to make new friends. As expected, those students living on-campus were significantly more satisfied with new friends made at university than students living off-campus. This confirms earlier predictions, as the on-campus environment is one in which establishing new friendships and relationships is actively encouraged, both with the large number of other students that each student is surrounded by, as well as the many social activities which take place on campus, that these students would have easy access to (e.g., sporting activities, social functions, orientation week activities). Cleave’s (1996) research supports this claim, as they found that one of the main reasons students continued to live on-campus was due to the increased opportunities for social interaction. In addition, Bettencourt, Charlton, Eubanks, Kernahan, & Fuller (1999) examined collective self-esteem in students living in on-campus residence halls; with results revealing that improvements in levels of collective self-esteem throughout the academic year were associated with improvements in adjustment to university. Together these studies suggest that among on-campus students, social identification with other students living on-campus facilitates positive adjustment to university.

In addition, those students who lived in the parental home were found to be significantly more satisfied with their living environment than those students living off-campus. This may likely be due to these students being
required to move to attend university rather than making the choice for its own benefits; or it may also be due to quality of living environment, with many students unable to afford the same quality housing as that of their parental home. A further noteworthy finding was with regard to the relationship between loneliness and living environment. The results approached significance, with off-campus students scoring highest on the loneliness measure. Loneliness was found to have strong negative correlations with subjective well-being and depression, indicating that it may also play an important role in students’ adjustment to university.

Interestingly, there were no significant differences in satisfaction with family or existing friends between groups. It was initially predicted that off-campus students would experience lower levels of satisfaction with their family or existing friends, due to being dislocated from them. However, it is possible that a secure attachment to family and friends prior to leaving for university is sufficient to maintain feelings of satisfaction, even if physically dislocated from them. This is an important finding, as Noom et al. (1999) reported findings indicating a significant positive association between social competence and attachment to parents and peers. Those students with greater confidence and trust in their existing social relationships were more socially competent, in that they felt like they had many friends, and were able to make friends easily (Noom et al., 1999). Therefore, students beginning university with a secure attachment to their family and friends may be more confident in their ability to make new friends, as well as being more confident in their existing friendships and family support, even while being physically dislocated from them.

Students living off-campus scored significantly higher on depression than those students living on-campus. This is a concerning finding, particularly in light of the statistics referred to earlier, indicating the rise in depression among university students (Fisher, 2004). It is likely that higher levels of depression are related to higher drop-out rates from university, as depressive symptomatology would likely limit their ability to cope with the transition to university. For example, Penland, Masten, Zelhart, Fournet, and Callahan (2000) reported that university students scoring high on a measure of depression reported more avoidance coping strategies that students scoring low on depression.

These findings have important implications in university settings. It appears that students who remain living in the parental home, as well as those living on-campus, have the facilities and resources available to them to maintain or increase their social networks, which then may contribute to them making a more successful transition to university. Previous research has examined the importance of social relationships for commencing students, with Enochs and Roland (2006) suggesting that universities should focus on providing additional social opportunities for beginning students, in order to increase retention rates and produce more successful graduates. Attempts have been made to address this; with some on-campus residences designing specialised programs to assist commencing students make the successful transition to university. Enochs & Roland (2006) found that those students living in “Freshmen Year Experience” residence halls had significantly higher levels of social adjustment than those students living in traditional residence halls.

The results of the current study indicate that students living independently from their parents in off-campus accommodation require additional support and intervention in developing new social networks at university. While students living off-campus were no less satisfied with their relationships with family and existing friends, they were significantly less satisfied with new friends made at university. In turn, these students were also the ones with higher levels of depression and loneliness. It is possible then, that university programs designed to assist students living off-campus develop new social contacts may lower depressive symptoms in students and thus lead to lower drop-out rates from university. Possible examples of strategies to be implemented by universities might include attempts to design orientation week activities specifically for students living off-campus, as well as activities and functions throughout the year designed to bring these students onto the university campus for more than just academic purposes. In addition, lecturers and tutors may place more focus on group activities, so students get a chance to know other students in their course and spend time with them outside of class.

A limitation of this study is the lack of measurement of students’ attachment to their family and friends, as this would have deepened the understanding of the impact of the dislocation for those students who moved away from home. In addition, it is not possible to comment on causation, as this study was cross-sectional. A larger, longitudinal study would allow further understanding of the relation between living environment and satisfaction with social relationships in making the transition to university.

Future research should endeavour to examine in more depth the transition experience of students living off-campus, in terms of their social opportunities, social support, and loneliness, as this research has indicated that this is the group most at-risk for social deficiencies. In summary, this research adds to the understanding of students’ transition to university, by considering the impact of living environment. It suggests that those students living off-campus experience higher levels of depression and loneliness, and lower levels of satisfaction with living environment and new friends made at university.
References


Address for Correspondence

Elodie O’Connor
School of Psychology
Deakin University
221 Burwood Highway
Burwood Victoria 3125 Australia
Tel: 61 3 9251 7258
Email: elodie@deakin.edu.au
Constructing adolescent fatherhood: Positive transformations

Keith Tuffin (K.Tuffin@massey.ac.nz)
School of Psychology
Massey University
Palmerston North
New Zealand

Gareth Rouch (rouchmurk@xtra.co.nz)
School of Psychology
Massey University
Palmerston North
New Zealand

Abstract

The parenthood literature has paid scant attention to adolescent fathers. Negative stereotypes portray these young men as delinquents, unwilling to participate in the lives of their children. This study seeks to extend recent research that has challenged negative stereotypes by suggesting that adolescent fathers are involved and interested in their children. Adolescent fathers were interviewed and the data analysed discursively in order to further explore the meaning of fatherhood. The current analysis highlights positive constructions that cast fatherhood as a significant life-changing event. Fatherhood has the power to transform directionless teens into mature young men who acknowledge their parental responsibilities, seek intergenerational repair and seem acutely aware of the difficulties associated with parenthood. The implications for practice are discussed in the context of promoting a more critical agenda and challenging taken for granted assumptions.

The issue of adolescent parenthood provides a challenge that sits at the intersection of biological possibility and cultural expectation. The question of ‘when a child becomes old enough to become a parent’ focusses social expectations regarding maturity, responsibility and adulthood. Teen pregnancy and parenthood are frequently defined in terms of their negative characteristics, for example as undesirable or as a public health problem. Some question the standard assumption of negativity, challenging such contemporary ‘wisdom’ by highlighting they way beliefs are inextricably linked to wider, cultural and political climates (Cunningham, 2001: Cherrington & Breheny, 2005). This research accords with such challenges and follows a more exploratory research agenda.

The adolescent parenthood literature shows a marked gender imbalance favouring young mothers (Strug & Wilmore-Schaeffer, 2003). Adolescent fathers are largely ‘forgotten’ (Allen-Meares, 1984) or ‘invisible’ (Thornberry, Smith, & Howard, 1997) with the research void frequently replaced with myths and negative characterisations. Miller (1997) comments on negative stereotypes of adolescent fathers as unwilling participants in their children’s lives and Strug and Wilmore-Schaeffer (2003) discuss negative traits such as absence, disinterest and inability to meet responsibilities. The potential damage of such stereotypes is their portrayal of young fathers as selfish and callous to the needs of their offspring.

Recent research has done little to unsettle stereotyped understandings. One prominent line of research differentiates between those who become adolescent fathers and those who do not. ‘Risk’ factors such as poverty, poor educational performance, family instability, and drug use differ between these groups (Pirog-Good, 1995; Thornberry, Smith & Howard, 1997). Identifying broad demographic factors fails to fracture stereotypes whereby adolescent fathers typically fare badly in comparison with non-parental peers. Arguably, such studies contribute to pathologising teen fathers through deploying similar discourses to that identified by Kelly (1996:429) for teen mothers as “girls from flawed backgrounds making tragic mistakes”. Such constructions are negative and deflect attention away from issues connected with parental involvement (Miller, 1997).

Some research has undermined common stereotypes by examining adolescent fathers’ involvement and interest in child-rearing. Hendricks and Montgomery (1983) documented an acceptance of fatherhood while Rhein et al. (1997) found the majority of participants involved and interested in child-rearing with disinterest being closely linked to inability to provide financially. While traditional expectations of fathers as breadwinner and disciplinarians have been challenged by debates about ‘new fathering’ (Henwood & Proctor, 2003; Roy, 2006) the ability to provide remains important (Edley & Wetherell, 1999). Such responsibilities place adolescent fathers in an unenviable position, as pursuing employment invariably truncates education and job training which limits future employability (Marsiglio, 1986).

In the current study we aimed to go beyond stereotypes and explore adolescent fatherhood from the teen father’s perspective. We aimed to extend the work of Knoester and Eggebeen (2006) who delineate a transformative perspective suggesting parenthood can lead to personal reorganisation and growth. Our study
sought to provide a fine-grained analysis of the linguistic detail in the talk of adolescent fathers. Our study builds on research (Hendricks & Montgomery, 1983) that seeks improved understanding by privileging and exploring the subjective meaning of adolescent fatherhood.

**Theoretical Orientation and Method**

This interview based study was informed by critical and constructionist epistemologies that examine language use for its constructive and rhetorical features (Potter & Wetherell, 1994; Tuffin, 2005). This orientation privileges the linguistic over what was formerly considered as psychological, and holds that understandings are located in everyday language. Constructionist enquiry seeks to demonstrate how key metaphors and discourses structure meanings through which we make sense of the world. Our theoretical claim is that discourse does not merely describe, but structures the very experience of adolescent fatherhood.

Participants must have become fathers prior to their 19th birthday, and be 20 or younger at the time of interview. These criteria ensured participants were adolescent fathers (Newman & Newman, 1991). Twelve participants were recruited from a large state co-educational high school and from guidance counsellor referrals. Semi-structured Interviews, mostly undertaken in participants homes, were recorded and transcribed consistent with the conventions recommended by Atkinson and Heritage (1984). All personal identifiers were removed to ensure anonymity and confidentiality.

**Analysis**

The data was coded and examined for key themes and discourses (Potter & Wetherell, 1994), one of which has been identified and illustrated here. This discourse characterises adolescent fatherhood as promoting positive change and growth. Parental status provided increased awareness of self importance, newfound responsibility and afforded more mature relationships with significant others. In short, the analysis shows positive transitions which were talked about as part of the experience of adolescent fatherhood. This discourse constructs fatherhood as an agent for personal growth and is most apparent when participants contrast their pre and post parenthood experiences, and when they talk about disparities between themselves and peers who are not parents. Through this discourse parenthood is constructed as an opportunity for personal development, positive change and growth.

In the following extract Jed talks about fatherhood providing him with a wake up call whereby he moves from a life of indolence to one of industry and responsibility.

*I mean I was lazy. I was lazy at school, I was lazy when I finished school and went on to the course. And I, it only took having bubs to really wake me up. You know and make me think okay, I've got to do something with my life otherwise yeah, my baby's not going to have a life so.

If I hadn't been a dad I don't think I would have got off my arse, you know got the gumption to get out there and get a job*

Jed constructs fatherhood as a motivational turning point. The admission of laziness, is discursively interesting as it positions him as self critical, which carries the implication that he is sharing an open and honest account of teen fatherhood. His identity changes following the arrival of his daughter with the accompanying 'wake up' implying fresh awareness. Fatherhood has motivated him and he accepts paternal responsibility and closely links the importance of doing something with his life with his daughter’s future prospects (“I’ve got to do something with my life otherwise yeah, my baby’s not going to have a life”). Jed’s account can be read as him rising to the challenge in order to give his child a life, but it could be read as his child giving him life. This reciprocity resonates with claims about the relationship between parents and children involving mutual influence (Bronfenbrenner, 1979). He constructs himself as a responsible and essential provider thereby illustrating a transformation based on his acknowledged acceptance of paternal responsibility.

‘Having a life’ perhaps implies a quality of life exceeding Jed’s own recent childhood. The notion of intergenerational repair becomes explicit in the following.

*you try and give them what you didn’t have. Because, well, because I’ve come from a broken family, you know and I mean my parents stuffed me up, . . . And I don’t want that for Ace.*

The first part of this relates to material items that can be provided, while the remainder refers to Jed’s desire for his daughter not to suffer the negative aspects of a broken family. This illustrates the common fatherly motivation to repair the mistakes that he suffered and ensure these are not repeated with his children.

In the next extract Jed describes his pre-fatherhood peers as drunkards lacking motivation and eschewing the world of work.

*None of them are stable in their minds or their jobs. None of them. Orrr I mean most of them now have just smoked too much drugs, drunk too much piss, and have just lost the plot. And I don’t think, a lot of them*
really have any get up and go to make it anywhere in life. You know I think they are quite content with ummm sitting on the benefit and getting wasted everyday.

Negative attributions are levelled at former friends providing a contrast suggesting he is not subject to these criticisms. Jed offers an explanation linking instability to drug use, alcohol and the narrative metaphor of having “lost the plot”. This explanation comes as a three part list (Atkinson, 1984) which fulfills the rhetorical function of implying comprehensiveness. The former peers lack motivation (“get up and go”), and ambition for the future (“make it anywhere in life”). This negative construction achieves a powerful contrast implying that if Jed had not become a father, he would similarly be reliant on welfare and drugs.

In some cases fatherhood provided the motivation to avoid illegal and dangerous activities. In the next extract Sam constructs parenthood as helping him stay on the ‘straight and narrow’.

"I see some of my friends now like, you know some of them are in jail, some of them are, some of them are actually, they have potential to do things. But now some of them are just yeah, they just had a bit too much to smoke I think. I would have been basically drug fucked if I wasn’t with Jane [my partner] and that. [Because at the same time Rita [my daughter], gave me a priority, to give it up and all that kind of stuff. Umm for me it’s just made me grow up. You know. I am only 19 but I feel like I am 30, type thing. I do it just in my mentalness I feel like I am 30 because you know I , I’m, I’ve I’m telling someone what to do, I am teaching them something or, teaching my child something and ummm. It’s made me stay on the , ummm, on the straight and narrow.[ ] I wouldn’t recommend it to any parent because we did go through some hard times. You know I was getting bills and I was 16"

Here the motivating effect of becoming a family man is highlighted by invoking the plight of friends whose potential has not been realised due to drug use and incarceration. These comparisons suggest fatherhood has prevented Sam from a similar fate. The causal link in this account are relationships with his partner and daughter, without whom he would have disintegrated into a state of drug incapacitation. The value of these relationships becomes amplified, especially in view of the construction of himself as precariously positioned prior to parenthood. Fatherhood has moved him from a position of risk to a position of responsibility.

Notably in this extract is the “priority” to change, something closely associated with the notion of a developmental leap whereby Sam is catapulted into adulthood (“I am only 19 but feel like I am 30”). This priority is constructed as providing the impetus to “grow up”, something that his responsibility as parent and teacher also contributes to. Thrown into the role of parent at a young age, Sam has responded positively to responsibilities that have put him on a life path described as the “straight and narrow”. While this carries a positive moral loading and has been beneficial this is not recommended due to the “hard times” he faced, being only 16 and yet expected to provide for his young family. While fatherhood is constructed positively, there are more apposite times to undertake it.

The transformative impact of fatherhood illustrated above may be characterised in terms of issues of motivation, direction and developmental maturation. In the next extract Sam explains another transformation which suggests greater empathy for the suffering of others.

"Orr yeah cause I seen it on the news [collapse of the twin towers], when I wasn’t a father I used to just laugh at it, because, I don’t know, stupid. But now I just sometimes feel like . . . crying for the little . . . bastards [suffering children]. Like all the stuff they are going through getting bombed like . . . all that huge bombing on them now in Afghanistan, and seeing them.

Here we see contrasting responses to disastrous events on the world stage. Sam critiques his reaction prior to fatherhood as “stupid”, involving misplaced humour. His subsequent reaction is constructed as more understanding as he vicariously shares the suffering of innocent victims emotionally and empathically. Fatherhood has made him more compassionate and aware of previous insensitivity. This extract signals a broader orientation with teen egocentrism replaced with more empathic understanding.

Next Norton reflects on his life choices that include gang membership and fatherhood.

"Kids, I, I can only say the kids [made me change], cause you know, the kids, who wants their old man in jail? Where you can’t see him and you only visit him ‘see you dad’, can’t even touch him sort of thing. Orr I thought about all that. Got offered the bad life, like gang life and all that. But no. Sometimes I think about that, like gang life and all that. And I think, what if I did take it, I wouldn’t have these kids and all this pressure that I’ve got now. Makes me think back, I should of, I should of, cause that suited me more. In a way. Orrr it is hard to explain, I don’t know aye. It’s just hard, having kids is . . . Yeah. They are not gonna fade away. They gonna be there here, longer than me. So I gotta treat them, treat them preciously I s’pose.[ ] I just like, orr, knowing they are safe and stuff. Knowing they are safe and no one can hurt them. And they trust me with their lives and that.

Norton considers incompatible options: family life and gang life. He chooses family life as he does not want his children to see him imprisoned (something constructed as an inevitable outcome of gang life). The term
“gang life and all that” involves systematic vagueness (Edwards & Potter, 1992) which we take to mean violence, crime, alcohol and drug abuse, and prison. He claims to have thought about, and rejected, the “bad life” in favour of family life. The poignant active voicing “see you dad” of the children stoically bidding farewell illustrates the implications of incarceration. Family life entails problems, summarised by Norton as “all this pressure that I’ve now got”. This leads to some equivocation, the problems explaining his decision and a conclusion regarding the difficulty of having children. A notable feature of the account is the permanence of his children (“They are not gonna fade away”), a biological legacy that must be treated preciousely and which is talked about in terms of safety and trust.

Finally, Norton comments on another development attributed to having children.

I got more love now for everyone aye. My friends, my missus, my friend’s missus, my mum my dad, her [partner’s] mum and dad. I got more love for everyone than hate. Like I umm . . . I don’t think they are arseholes. I rather have a good time with them and stuff.

In reflecting on his earlier negative judgements of significant others, Norton talks about having more positive feeling for those around him. Gone is the bitterness which formerly tainted relationships with friends and family. This transition from negativity to goodwill and love is positive and beneficial for all.

**Summary and Conclusions**

Strug and Wilmore-Schaeffer (2003) conclude that many adolescent fathers ‘care deeply’ about their offspring and participate actively in their care. The current study extends this through a discursive examination of talk about adolescent fathering and the ways in which this was constructed positively, involving personal growth and change. Fatherhood was talked about transformatively, moving them from wayward teenagers into motivated young men. These changes were strongly contrasted with peers who were defined by directionless activities regarded as incompatible with parenting and positive motivations and directions are derived from the experience of fatherhood. This major life event is responded to in a manner that shows self awareness of being catapulted into adulthood, and sensitivity to their children’s needs. These positive features contrast with the ubiquitous negativity that pervades contemporary social science literature.

Participants were aware of parental responsibilities and the changes they had personally undergone. As Jed explains “I’ve got to do something with my life otherwise yeah, my baby’s not going to have a life”. This is consistent with the paternal imperative to provide (Edley & Wetherell, 1999), and, notably, there was much talk of nurturance and protection. Another transformation was the maturational acceleration whereby these boys were expected to become men. Interestingly, there were no complaints about the loss of youth, rather the focus was on positive aspects of fatherhood. While the importance of taking up responsibilities was evident, the difficulties involved were not overlooked. There was reference to hard times, burdensome responsibility and financial pressure. These comments flesh out Miller’s (1997) suggestion regarding the complex stresses of adolescent fatherhood.

A further transformative feature was evident in social relationships where teenage egocentrism gave way to compassionate, prosocial understandings. This was noted in two respects. Firstly, family and friends were now valued more highly. Warmth and love, replaced the negativity that had previously been a feature of these relationships. This is consistent with the findings of Knoester and Eggebeen (2006) who found fatherhood encouraged men to increase intergenerational and extended family interactions, and the recasting of fatherhood (Henwood & Proctor, 2003) where family involvement is valued over detachment. Secondly, a more empathic orientation was noted in respect of issues of human tragedy. Fatherhood, we suggest, encourages considerations that extend the narrow horizons of adolescence.

This study charts a pattern of language use highlighting important aspects of the psychology of adolescent fatherhood. Key changes are constructed, especially in comparison with non-parental peers. Ties are cut with activities regarded as incompatible with parenting and positive motivations and directions are derived from the experience of fatherhood. This major life event is responded to in a manner that shows self awareness of being catapulted into adulthood, and sensitivity to their children’s needs. These positive features contrast with the ubiquitous negativity that pervades contemporary social science literature.

A number of cautions should be stated. The study employs inductive methodology involving micro level analysis of a small number of interviews and should be seen as exploratory and partial in its claims. Further, while the study highlights positive aspects of talk about teen fatherhood this provides no guarantee of sustained commitment, a question best considered by longitudinal study (as would also be the case for non-adolescent fathers). It is also important to acknowledge that participants self-selected and this raises the possibility of a more positive orientation toward parental responsibility.

This study carries implications for practitioners who work with adolescent fathers. Perhaps most obviously is the importance of reversing the trend of ‘invisibility’. The experience of fatherhood has a powerful influence and these young men are not disinterested nor unwilling participants in their children’s lives. They are willing and motivated to become socially, financially and psychologically involved and we would strongly support suggestions (Lehr & MacMillan, 2001) that practitioners consider the needs of young fathers and make more effort to engage them where possible. Another practical implication stems from the finding that participants acknowledge the stresses and difficulties of their situations, suggesting they may need professional support.
Bearing in mind that adolescent fatherhood occurs when the father may be least able and prepared to meet its demands, social researchers and policy makers should make available programs in areas such as child development, parenting and future planning (Miller, 1997).

Finally we would argue for a critical orientation to professional practice and future research. This means not routinely accepting the apparent invisibility of fathers in cases of adolescent pregnancy. This research has highlighted the degree to which fatherhood has a profound impact, and we suggest the importance of the father-child relationship not be minimised. Further, we would argue for a critical examination of age related assumptions. Consider, for example, the research (Danziger & Radin, 1990) that showed younger rather than older men being more involved in their babies lives, and the finding (Rangirajan & Gleason, 1998) that younger fathers are more likely to provide support than older fathers. Being young does not necessarily imply any erosion in the importance of the role that a father might play in the life of his children. Consistent with Rains, Davies and McKinnon (2004) we would urge professionals to define young fathers by their relationships with their children rather than merely as sexually precocious teens. It is also important to consider why adolescent fathers have been largely ignored in the literature. Is this because their actions threaten established views of the “ideal father”?

References


Christine D. Wood (Christine.Wood@utas.edu.au)
School of Psychology
University of Tasmania

John A. Davidson
School of Psychology
University of Tasmania

Abstract

This paper aims to provide a conceptual framework for understanding the development of Parent Effectiveness Training (PET) from Gordon’s (1970) Theory of Healthy Relationships, and to show how, in order to do this, he combined the fundamental skill of active listening with parental assertiveness, self-awareness, and emotional self-regulation to underpin the process of maximising family conflict resolution. Based on his clinical experience of working with troubled teenagers and their parents and his years of intensive research with Carl Rogers at the universities both of Ohio and Chicago, Gordon saw that major problems lay in the power relationships the parents had with their children and the way they talked to each other. His program set up training for parents in the three skills of active listening, parental assertiveness and conflict resolution. Empirical research showing the effectiveness of the PET skills is discussed, as well as the benefit to the community of their dissemination in a world of apparently increasing conflict.

The Theory of Healthy Relationships (1970) was first developed by Thomas Gordon as a foundation for the educational program he called Parent Effectiveness Training (PET), aimed at preventing the kind of family problems he had seen often in his clinical practice. This paper looks at the historical factors which underpin a program aimed at prevention of such problems at a time following WWII when the previously rigid structures of society were collapsing and an explosion of psychological knowledge heralded a new optimism. An early development was the intensive research and subsequent understanding of human relationships which emerged from the programs headed by Carl Rogers, first at the State University of Ohio and after the war at the University of Chicago.

Gordon first trained in psychology as a graduate student at Ohio, where the lectures of a new professor on the treatment of maladjusted children attracted his interest. Not only had Carl Rogers proposed psychological rather than psychiatric treatment for the problems of children and young people, but he also introduced his doctoral students to non-directive, client-centred methods, and an experimentally-oriented evaluation program of counselling outcomes (Rogers & Dymond, 1954). Gordon became involved in the research which produced large numbers of innovative studies of every kind from intensive clinical investigations to semantic differentials and Q-sorts (Shlien & Zimring, 1970). It also included over 11,000 tapes of individual counselling sessions, from which Rogers and his team developed their counselling approach. They found that the categories of evaluative, interpretative, supportive, probing, and understanding statements encompass 80% of all the messages sent between individuals. In a frequently reprinted paper Rogers (1952) suggested that the tendency to evaluate was the main barrier to real communication between persons. His ideas progressed from concentration on method to attitudes in the relationship as key to success in the therapeutic process, including acceptance and unconditional positive regard. This approach was seen as the first viable alternative to psycho-analysis even before the systematic development of behavioural methods. The ideas appealed to many professional therapists, but were not rated highly by mainstream academia (Kirschenbaum, 1995).

The onset of war interrupted Gordon’s studies, but as an officer in the Army Air Corps he further developed his expertise in a leadership program he designed to teach pilots communication skills for team work. After four years in the military, he went to the new interdisciplinary Department of Human Development at the University of Chicago, where Rogers had just set up a Counselling Centre in Psychology. Gordon received his Ph.D in 1949, and became an assistant professor on the faculty at Chicago, teaching and working in psychotherapy and ongoing research.

After five years he decided to leave academia and began working with problem youngsters referred by schools or brought in by their parents. He found that the troubled teenagers he saw did not have mental problems. They were coping as best they could with the ways they were treated by their parents. The parents were normal as well, and the real trouble lay in the relationship they shared (Gordon, 1977). Many of the parents, including professionals with tertiary education, were not aware of the effects of differing styles of interpersonal communication, nor had they any idea of psychological research detailing the development of self and the effects of punishment. Most were trying to be good parents and were concerned when their children disappointed them.
They used the same training methods as their parents had, in patterns of authority and communication, rewards and punishments. More to the point, there was evidence that many of them were finding these methods ineffective, and some actually destructive, even leading to real mental health problems.

Gordon saw that prevention of such outcomes required a new approach. Parents could be taught how to listen, to respect children’s emotional needs and assert their own, and to find fair ways of solving conflicts, all of which he had found to work in the research and treatment programs with Rogers at Chicago. Education, he thought, rather than remediation was necessary for the development of relationship skills, so he decided to design a leadership program for parents which would enable them to avoid further potential problems with their children.

Healthy Relationship as the Basis for a Parenting Program

Gordon first developed his theory of healthy relationships, and then built up a parenting program based upon it. He pointed out that, while the theory was developed in relation to parent and child, it really applied to all healthy human relationships. He explained that the theory proposed a democratic model, in which people could relate to each other in mutual respect, friendship, love and peace, and thus provide an environment in which each could reach maximum potential. The research had shown that healthy people need such a relationship in order to grow through developmental stages towards autonomy. From his Air Force experience, he had also recognised some important factors in the success or failure of any program, including group training, a non-threatening environment, allowing and accepting resistance, the coaching of specific skills, and the merit of modelling by the instructor. All these became part of the development of PET.

The Theory of Healthy Relationships

The theory of healthy human relationships was presented (Gordon, 1970) as a set of principles for one person in a relationship. The requirements were the same for both persons, but Gordon pointed out that as the primary responsibility for initiation of change rests with the person in power, the focus for action was set for the parent. The nine principles of healthy relationship are set out in Table 1.

Table 1
The Nine Principles of Healthy Relationship

<table>
<thead>
<tr>
<th>Principle</th>
<th>Description</th>
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<tbody>
<tr>
<td>1.</td>
<td>Feeling Accepting of the Other</td>
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<tr>
<td>2.</td>
<td>Demonstrating Acceptance of the Other</td>
</tr>
<tr>
<td>3.</td>
<td>Trying to Become Accepting of More of the Other's Behaviour</td>
</tr>
<tr>
<td>4.</td>
<td>Becoming Aware of Nonaccepting Feelings</td>
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<tr>
<td>5.</td>
<td>Learning to Express Unaccepting Feelings Honestly</td>
</tr>
<tr>
<td>6.</td>
<td>Communicating Unaccepting Feelings Nonevaluatively</td>
</tr>
<tr>
<td>7.</td>
<td>Refusing to Use Power in Conflict-Resolution</td>
</tr>
<tr>
<td>8.</td>
<td>Refusing to Give in to the Other's Use of Power</td>
</tr>
<tr>
<td>9.</td>
<td>Resolving Conflicts by a &quot;No-lose&quot; Method</td>
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</table>

The nine principles in Gordon’s theory apply to any interpersonal relationship. They deal with feelings and behaviour, self-awareness, acceptance of the other, two-way communication, and the use of power. They encompass goals towards which parents need to work, and they all relate to the three major skills taught in PET. The first three principles cover acceptance, the second three relate to non-acceptance and the third three to fair conflict resolution. In terms of specific skills, acceptance is demonstrated by the ability to engage increasingly in empathic listening when it is needed. This skill is not often found in Western culture, but is fundamental to the method, and is the most important skill to acquire. Non-acceptance, generally associated with disapproval of a child’s behaviour. It requires a particular style of parental assertiveness. It needs emotional awareness, self-regulation and a capacity for honest disclosure, focusing on the parent’s feelings about the behaviour rather than the child’s shortcomings. Gordon found a basis for this skill in the empirical work of Jourard (1964, 1971) detailing the practice of transparency in relationships. Finally he linked the first two skills into the third, the process of problem solving and the resolution of interpersonal conflict. Again he drew on innovative theories, those of John Dewey (1938) and Abraham Maslow (1954/1970), who devised a hierarchy of human needs from his research into the lives of individuals he regarded as successful. Conflict may be inevitable, but a successful and stable outcome can be achieved if the parties are prepared to listen to each other, define their real needs, and search creatively for a mutually agreed result, without the use of coercion. Such an outcome requires a move away from the traditionally accepted model of parenting towards more flexibility, yet retaining responsibility and the parent’s own core values.
A New Approach in Parenting

The nine principles express the underlying philosophy of PET (Gordon, 1970) which radically challenged commonly accepted traditions of parenting. They also highlight the fact that for PET the structure in which the family functions is not a set of external societal rules, but the parent-child relationship. Parental expectations, Gordon believed, should move away from compliance to rules, and encourage instead the self-responsibility and self-actualisation of the child through an empathic, growth promoting relationship. Moreover parental acquisition of these social and emotional skills means that children can learn them too, through coaching, modelling, and discussion.

There is considerable difference between families that are reasonably competent and those who are dysfunctional. Parents in the latter category have been shown in numerous studies to have benefited from behavioural interventions and training in order to establish boundaries in cases where family management is out of control (Sanders & Markie-Dadds, 1996). The Triple P program (Sanders, 1996) is widely used for training positive family management skills to non-referred parents, and is supported by a vast output of research studies. It emphasises a traditional learning style, and is less concerned with relationship and emotional skills. It has been further developed to cope with management of teenagers, but continues to suggest that emotions should be kept out of problem solving.

Prevention of Problems Today

Nevertheless children’s self-regulation of their emotional responses and behaviour, as well as persistence and flexibility have been shown to be critical for the prevention of the social problems which confront even ordinary families today (Prior, Sanson, Smart & Oberklaid, 2000). Children’s emotional development and competence depend upon reciprocal, sensitive interaction with parents, early carers and families. Children are born into relationships and thriving depends on these being healthy. Baumrind (1980) explained that interpersonal behaviour actually produces the environmental conditions in which families live. To function effectively in a changing world, they need reciprocal flexibility, skills modelled by parents and assimilated by children. L’Abate (1981) in a comprehensive review of skill training programs, included PET as a program of primary prevention, that is one aimed at “normal” families, where most skill training is relevant and comparatively successful. Prevention, he pointed out, is just as important an option, and perhaps even more valuable than treatment because the numbers of families are far greater than those of dysfunctional families, but their needs are just as real.

Need for Strong Families and Relationships

Anti-social behaviour, eating disorders, homelessness, depression and youth suicide (Mitchell, 2000; Spence, 2001) have been increasing among young people across Australia, and yet our responses remain poor (Stanley, 2001; Stanley, Richardson & Prior, 2005). Youngsters caught up in such behaviours frequently experience lack of social connectedness and a sense of belonging. Gordon (1983) argued that a change in parenting attitudes, language and style of interaction with children was essential to establish their social and emotional competence. Even earlier, Dreikurs and Solz (1964) had asserted that traditional modes of parenting had become obsolete. Pinpointing the major change which occurs when the child emerges from infancy and becomes an active youngster, Gordon (1983) suggested that most parents change from being sensitive responders to the needs of the baby, and become active change agents and behaviour modifiers, inexorably taking on the role of controller. Indeed, he went so far as to say that the ten years following infancy and prior to adolescence are crucial for children’s wellbeing and it is seriously compromised by the controlling model of parenthood. A different response is needed to deal with the serious and widespread problems of youth. In PET he offered an entirely different model, a different way of being as a parent, which is far more than simple skill-training to enhance family relationships, because it also depends on a crucial change of attitude (Gordon, 1983). Communication skills play an essential part in relationships, but unless they are rooted in genuineness, empathy, honest self-disclosure and appropriate participation in problem solving, they will not be successful. He pointed out that the traditional and almost universal style of parent-child relationships has always been couched in the “language of power”. The use of power and control to establish rules and standards in the home, according to Gordon (1995) is unnecessary, and shows a lack of parenting skill and expertise. In PET, he suggested, the parent learns to respond to children rather than to control them.

Why Have Another Parenting Course?

A relationship response, as suggested by Gordon (1995) is not permissive, but rather authoritative, with the parent guiding the child towards acceptable behaviour. It is different from the traditional model where the parent is in charge and exerts control. Since the skills are learned, it is arguable that most parents need training to
implement them, and a readily available well-validated course would fulfill an important need. Prior et al. (2000) suggested that accessible community resources must be developed to assist parents in their task.

**Evaluation of the PET Program and Conflict Resolution Skills**

In the US, a meta-analysis which included 26 separate studies, (according to Cedar (1985) the most comprehensive search for PET studies up to that time) supported the overall efficacy of PET (Cedar & Levant, 1990). Australian investigations of Parent Effectiveness Training (PET) have produced evidence-based positive outcomes over a generation, for example Schultz, (1981), Schultz & Khan, (1982) and Schultz & Nystrup, (1980). Between 1987 and 2006, Wood and Davidson conducted a number of controlled investigations showing positive PET outcomes, and Wood (2003) showed in a study of 232 Australian parents that PET groups achieved substantially and significantly higher scores than controls on the skills of empathic listening, appropriate assertiveness and conflict resolution. While in the pretest most of the parents used traditional responses in conflict situations with children, in the posttest those parents who took an eight-week standard PET course learned a more adaptive way, while control parents hardly changed in the same interval. The results showed attitudinal changes in the PET parents and a reduction in parental stress as compared with controls. These parents also reported satisfaction with family changes resulting from implementation of the responses and style they had learned in PET. Wood and Davidson (2003) demonstrated language changes made by individual parents which showed the impact of the program, and indicated that a wide sample of Australian parents is concerned about the kind of relationship they have with their children.

**The Value of Training the Skills**

Davidson and Wood (2004) pointed out the similarity of the Conflict Resolution Model (Littlefield, Love, Peck & Wertheim, 1993) to the process described in PET. The gains made by the PET parents in conflict resolution after training accord with the findings of Feeney and Davidson (1996) who showed that nine hours training in the Conflict Resolution Model (with essentially the same components), improved conflict resolution skills. They also agree with results shown by Davidson and Versluys (1999) who found that participants improved in cooperation and problem solving even after brief periods of training, and that those who had been trained in cooperative skills also succeeded in brainstorming procedures. The substantial gains made by the PET parents in the same skills (Wood, 2003) probably reflect the lengthier training, since the standard PET courses in the investigation were all three hours per week for eight weeks. Both the Conflict Resolution Model and PET have important implications for the value of training both adults and young people in successful methods of conflict resolution in an increasingly polarised world (Wertheim, Love, Peck & Littlefield, 2006).

**Conclusion**

At a time when mainstream interest in problem solving has shifted from individual approaches to exploration of co-operation and creativity, the focus on relationship and interpersonal skills in PET provides a particularly useful form of education for parents who want to find ways of improving their communication with their children. It also offers a valuable opportunity within communities for disseminating successful methods of dispute resolution through a well-validated program. Such a program was suggested by McKenry and Price (1994) as a desirable form of community intervention because it provides an alternative to behavioural parenting methods which highlight compliance. More research is needed to compare the effects of behavioural and relational parent training on parents and children in normal families, and to assess whether the current concentration on the behavioural approach sufficiently meets the differing needs of such families. Finally, the emphasis of PET on relationships, practical interpersonal skills and problem prevention can provide a means for ordinary parents to acquire the kind of capability which is increasingly important for raising families today.

**References**


Address for Correspondence:
Dr. Christine Wood
School of Psychology
University of Tasmania
Private Bag 30
GPO Hobart Tasmania 7001
Christine.Wood@utas.edu.au
Romantic Experiences and Depressive Symptoms: Testing the Intensifying Roles of Rejection Sensitivity and Relationship Commitment

Melanie J. Zimmer-Gembeck
Griffith University
School of Psychology and Griffith Psychological Health Research Centre

Carolyn Vickers
Griffith University
School of Psychology

Abstract

Longitudinal associations between couple relationship satisfaction and dissolution, rejection sensitivity, and depression were investigated using structural equation modeling. Rejection sensitivity and relationship commitment were expected to exacerbate or attenuate some model paths. Participants were aged 17 to 21 (N = 179) in couple relationships. Relationship dissolution was less likely among those who were more satisfied and had lengthier relationships. A greater chance of dissolution was also associated with rejection sensitivity among those high in commitment but not among those who were low in commitment. With regards to predicting depression, rejection sensitivity, but not relationship factors, was directly associated with later depressive symptoms. When the current findings were integrated with previous research, it appears that negative relational thoughts and behaviours of high-rejection-sensitive persons were more likely to be activated and associated with mental health problems when personal relationship satisfaction or commitment was elevated.

The formation, maintenance and dissolution of close relationships can result in negative affect, sleeplessness and many other symptoms of depression (Monroe, Rohde, Seeley, & Lewinsohn, 1999; Welsh, Grello, & Harper, 2003; Zimmer-Gembeck, Seibenbruner, & Collins, 2001; Zimmer-Gembeck & Gallaty, 2006). A first episode of clinical depression often occurs between 13 and 19 years of age and depression often becomes chronic or recurs during the emerging adulthood years (Lewinsohn, Clarke, Seeley, & Rohde, 1994). In the current study of late adolescents and emerging adults between 17 and 21 years of age (labeled ‘late adolescents’ for brevity), couple dissolution and relationship satisfaction were examined as correlates of depressive symptoms over time. Additionally, the roles of participants’ sensitivity to rejection and commitment to the relationship were investigated.

Couple Relationships, Depression, and Individual Vulnerability to Rejection

Interpersonal rejection, particularly romantic rejection, is one of the most potent and distressing events humans can experience. Yet, individuals differ in how much they expect rejection and their anxiety about rejection (Feldman & Downey, 1994). The term rejection sensitivity has been used to describe “individuals who anxiously or angrily expect, readily perceive, and react intensely to rejection” (Feldman & Downey, p. 233). High-rejection-sensitive persons perceive ambiguous partner behaviour as more uncaring, are more hypervigilant for rejection, report lower relationship satisfaction and have shorter romantic relationships, and become more depressed when rejected (see Mort, 2006 for a review). In addition, there is evidence that high-rejection-sensitive persons generate their own stress by prompting negative interpersonal experiences and more rejection via their unpleasant behaviours. These emotions and behaviours can erode relationships and ultimately lead to dissolution and declining mental health (Downey, Bonica, & Rincon, 1999; Stackert & Bursik, 2003).

As well as having direct associations with relationship interactions and depression, rejection sensitivity may function as an individual vulnerability that increases mental health problems when faced with relationship difficulties. Multiple theorists identify individual difference variables, such as rejection sensitivity or the related constructs of heightened anxiety about abandonment and insecure attachment, as vulnerabilities that can increase the impact of stress on mental health (Hammen, 2003; Hazan & Shaver, 1987; Shirk, Gudmundsen, & Burwell, 2005). It is also likely that such interpersonal vulnerabilities interfere with accruing mental health benefits from positive relationships. Hence high rejection sensitivity may play a moderating role by exacerbating the association between interpersonal stress and mental health or attenuating the association between positive relationship experiences and mental health. In the current study, the expected positive association between romantic dissolution (i.e., stress) and depression was expected to be stronger among high-rejection-sensitive persons as compared to others. The expected negative association between romantic satisfaction and depression was expected to be weaker among high-rejection-sensitive persons as compared to others.
Bidirectional Associations: Depressive Symptoms and Relationships

In this study, depression was expected to be both a precursor and an outcome of relationship dissolution. This has repeatedly been acknowledged, but such bidirectional associations are less often empirically examined (Barnett & Gotlib, 1998; Coyne, 1976; Katz & Beach, 1997; Weinstock & Whisman, 2004). Depression can be a precursor of dissolution, because it is often accompanied by behaviours that erode relationship satisfaction. For example, marital distress has been found to be a consequence of depressive symptoms, as well as a vulnerability factor for depression (Heim & Snyder, 1991). Depressed people can be overly dependent on their partners and seek reassurance in ways that may distance their partners (Barnett & Gotlib, 1998; Van Orden & Joiner, 2006). In Coyne’s (1976) Interactional Model of Depression, depressed individuals are described as having fewer positive interactions within their relationship and less satisfying relationships, which maintains or increases depressive symptom levels.

Relationship Commitment as a Moderator

Relationship commitment, defined as making a long-term investment in a relationship, varies greatly during late adolescence. Such commitment may overlap with, but is not redundant with relationship satisfaction (Fehr, 2003). For example, in Rusbult’s (Rusbult & Buunk, 1993) relationship investment model, satisfaction is associated with commitment, but they are two separate model components. It is easy to imagine a young person who is highly satisfied with her couple relationship, but who does not anticipate the relationship to last an extended period of time or expect it to be a life-long partnership or marriage (Furman, Brown, & Feiring, 1999). The level of commitment is an important consideration when studying interpersonal relationships and depressive symptoms. For example, the association between relationship and mental health problems is more often supported when the focus is on committed relationships (i.e., marriage) rather than on dating relationships (Weinstock & Whisman, 2004).

Greater commitment implies more investment in the relationship. This includes personal commitments of dedication and stronger feelings for the other. Greater commitment is also likely to come with certain structures, such as more shared activities, shared friends and public displays of the relationship (Johnson, 1991). Relationship problems could have a more significant impact on mental health when commitment is high, because high personal investments are at risk and problems can change the structure of multiple social domains. This also implies more loss and arenas of perceived rejection, which could have more mental health implications for high-rejection-sensitive persons than others. As such, high commitment, as compared to low commitment, was expected to strengthen associations between relationship dissolution, rejection sensitivity and depression.

The Current Study

In summary, cross-lag, longitudinal associations between depressive symptoms, relationship dissolution and rejection sensitivity were tested and expected. Additionally, the influence of relationship satisfaction was considered, and rejection sensitivity and commitment were tested as moderators of associations in this model. Relationship length and participant gender were examined as these were anticipated to be important covariates.

Method

Participants

The 179 participants (52 males, 127 females) were in their first year of university, unmarried, and 21 years of age or less (M = 18.3 years, SD = 1.4). Following procedures used in previous research (e.g., Stackert and Bursik, 2003), all participants were in a steady couple relationship of at least 1-month duration. Assessments were completed at two times over a 6-month period and represented 66% of the original 271 participants at the time 1 (T1) assessment. Participants reported more satisfying relationships (t(271) = -4.4, p < .01) and were slightly less rejection sensitive (t(271) = 2.1, p = .04) than those who participated at T1 only. There was no other significant group differences in measured variables, all p > .40.

Overall, 82% of the 179 participants were white/Caucasian and 96% were Australian citizens. The average length of relationship at T1 was nearly 13 months. Of the 179 participants, 112 participants (63%) were in the same romantic relationship at both waves of assessment, whereas 67 participants (37%) had dissolved their relationship.

Measures

Measures at T1 and time 2 (T2) included the Beck Depression Inventory (α = .84 and .88, respectively; Beck, Ward, Mendelsohn, Mock, & Erbaugh, 1961), and the Rejection Sensitivity Questionnaire (α = .84 and .83, respectively; Downey & Feldman, 1996). To measure relationship satisfaction at T1, the Relationship Assessment Scale (Hendrick, 1988) was used (α = .88). To measure relationship commitment at T1, each participant answered two questions: “How would you rate your level of commitment to X?” with response options from 0 (no
commitment at all) to 2 (a lot of commitment), and “How likely do you think it will be that you will be with X for the rest of your life?” with response options from 0% to 100%. These two items were correlated, $r = .63, p < .01$.

At T2, participants were asked to report on the status of their T1 relationship. If dissolution was reported, participants reported who initiated the break-up and provided details about any new steady couple relationship. For analyses, relationship dissolution was coded 1, whereas a code of 0 was assigned if the relationship had not dissolved.

**Procedure**

Following human research ethics committee approval for the study, T1 participants completed the questionnaire in groups of about 20 after providing informed consent. The T2 assessment was completed by mail. On average, survey completion took 20 minutes.

**Results**

**Gender Differences**

Some gender differences were found. Hence, gender was accounted for in all models. On average, boys were more rejection sensitive than girls ($t(178) = 3.02, p < .01$) and a higher proportion of boys than girls experienced relationship dissolution (50% and 32%, respectively, $\chi^2 = 5.22, p < .05$). Girls were more satisfied with their relationships than boys ($t(178) = -2.62, p < .05$). Depression and commitment did not show a gender difference ($p > .55$ for both).

**Primary Model**

Hypotheses were tested by estimating cross-lag autoregressive path models. Maximum likelihood estimation available within AMOS software was used to fit these structural models. Model testing began by freeing all hypothesised paths and all within time covariances. Some nonsignificant paths were fixed to 0; those that were significant and retained are shown in Figure 1. This model provided a good fit to the data on all fit indices: $\chi^2(11, N = 176) = 15.47, p = .16$, CFI = .98, RMSEA = .048 (90% CI .000 to .099).

Other than the stability of rejection sensitivity and depressive symptoms, three of the eight hypothesised directional paths were significantly different from 0 (see Figure 1). These paths indicated that participants who reported longer relationships at T1 and more satisfaction with their relationships were less likely to report romantic dissolution at the T2 assessment: -.15 and -.47, $p < .05$ and $p < .01$, respectively. In addition, individuals relatively higher in rejection sensitivity showed greater increases in depressive symptoms over time: .20, $p < .05$.

**Diathesis-Stress Model: Rejection Sensitivity as a Moderator**

Our next two models examined whether associations between depressive symptoms, relationship dissolution, and relationship satisfaction were different among individuals high vs. low in rejection sensitivity. This began with testing a two-group model (high-rejection-sensitive, $n = 56$ and low-rejection-sensitive, $n = 123$) with all paths fixed to be equal between groups. The directional paths in the model were then freed to allow them to differ between groups, and the $\chi^2$-difference test was used to compare the fit of this model to the fit of the model with paths constrained to be equal between groups.

When all directional paths were freed to differ between the two rejection sensitive groups (except stabilities), this model had a good fit to the data: $\chi^2(16, N = 176) = 16.4, p = .43$, CFI = 1.00, RMSEA = .012 (90% CI .000 to .071). Yet, there was not a significantly better fit of this 2-group model when compared to a model with all paths fixed to be equal for the groups ($\chi^2(21, N = 176) = 24.3, p = .28$, CFI = .97, RMSEA = .030, 90% RMSEA CI .000 to .073): $\chi^2$-difference (5) = 7.9, $p > .05$. Nevertheless, there was one path difference worth noting. Among high-rejection-sensitive participants there was a positive and significant association between T1 relationship satisfaction and T2 depressive symptoms: .25, $p < .05$, whereas this association was negative and not significant among lower-rejection-sensitive participants: -.13, $p > .05$. Hence, high-rejection-sensitive participants with higher levels of relationship satisfaction reported relatively more increases in depressive symptoms over time, but there was no association between relationship satisfaction and changes in depressive symptoms over time among lower-rejection-sensitive participants.
Commitment as a Moderator

Paralleling the analysis procedure that compared high vs. low rejection sensitivity groups, associations between depressive symptoms, relationship dissolution and relationship satisfaction were compared for those high vs. low in relationship commitment. Those in the high commitment group reported ‘a lot of commitment’ on the first item and reported a greater than 50% chance that the relationship was for life on the second item (n = 103, 57.5%). Those in the low commitment group reported ‘low commitment or “some commitment’ on the first item, reported a less than 50% chance of a lifetime relationship on the second item or both (n = 76, 42.5%).

When all directional paths were freed to differ between the two groups (except stabilities), this model had a very good fit to the data: \( \chi^2(19, N = 176) = 15.0, p = .72, \text{CFI} = 1.00, \text{RMSEA} = .005 (90\% \text{CI} .000 \text{ to } .050) \). The \( \chi^2 \)-difference test showed that this 2-group model provided a significantly better fit than the 1-group model (\( \chi^2(27, N = 176) = 34.9, p = .14, \text{CFI} = .96, \text{RMSEA} = .041, 90\% \text{RMSEA CI} .000 \text{ to } .076 \)): \( \chi^2 \text{difference} (8) = 19.9, p < .05 \). Path estimates for the two groups are shown in Figure 2.

Three directional paths accounted for the significantly better fit of the 2-group model. Relationship satisfaction was more strongly negatively associated with dissolution when commitment was low rather than high, and the association was only significant when commitment was low (see Figure 2). In addition, rejection sensitivity had a positive and significant effect on dissolution and T2 depressive symptom when commitment was high, but not when commitment was low.
Figure 2. Standardised path coefficients for the 2-group model allowing directional paths to differ for participants classified as low versus high in commitment to the couple relationship.

Note. The first value on each path is the estimate for individuals low in relationship commitment (n = 76); the second value is the estimate for those high in commitment (n = 103). \( \chi^2 (20, N = 176) = 24.8, p = .21, \text{CFI} = .97, \text{RMSEA} = .037 \) (90% CI .000 to .078). Model fit was significantly better when compared to a model with paths fixed to be equal between groups. Bolded paths are those that accounted for the better fit of the 2-group model. Gender and relationship length were included in the model, but are not shown here. See Figure 1 for concurrent correlations between measures.

Discussion

These findings show that individuals who are more satisfied with their couple relationships and who have maintained these relationships for a longer time are less likely to dissolve their unions. After relationship satisfaction and length of relationship were accounted for, however, there was mixed support for our expectation of rejection sensitivity as an antecedent of dissolution. There was a small bivariate correlation showing that participants higher in rejection sensitivity were at an increased risk of dissolution and one association was found after considering commitment as a moderator of model pathways. Nevertheless, in contrast to one previous study (Downey, Freitas, Michaelis, & Khouri, 1998), there was no association in the primary model between earlier rejection sensitivity and later dissolution after accounting for relationship satisfaction and length.

Past research has shown a link between low romantic relationship satisfaction, romantic rejection or dissolution and depressive symptoms (Monroe et al., 1999; Welsh et al., 2003). Concurrent associations were found between depressive symptoms and relationship satisfaction. However, when all late adolescents were considered as a single group and when accounting for earlier depressive symptoms, neither the degree to which adolescents were satisfied in their romantic relationships nor romantic dissolution was associated with later depressive symptoms.

Instead of romantic satisfaction and stress, it was rejection sensitivity that was most informative about late adolescents’ depressive symptoms over time. Adolescents who are more sensitive to rejection are concerned about the possibility of rejection and also expect rejection more than others (Downey & Feldman, 1996). Rejection sensitivity itself captures a distinctive cognitive processing disposition that comes with some degree of personal distress. As such, individuals who are more sensitive to rejection were expected to have more depressive symptoms than those adolescents with less sensitivity to rejection. This was supported by the findings of this study. Late adolescents who were more sensitive to rejection had higher levels of self-reported depressive symptoms concurrently and had increasing depressive symptoms over time.

Other associations emerged when late adolescents’ level of commitment to the relationship was considered. First, there was some evidence that rejection sensitivity is associated with later relationship dissolution, but only among late adolescents who expressed high commitment to their relationships. High-rejection-sensitive persons have been found to play a role in their own relationship problems (Downey et al., 1998). The current study findings support this conclusion, but show that this may be the case only when high-rejection-sensitive persons express high personal commitment to their relationships.
The association between rejection sensitivity and later depressive symptoms also was stronger for participants who reported more commitment to the relationship at the first wave of measurement than for those who reported less commitment. Although all individuals who are high in rejection sensitivity generally have elevated concerns and anxiety about rejection when compared to others (Downey & Feldman, 1996), feeling highly committed to another may activate even more than the typical levels of rumination and concern about rejection, generating even more stress in the form of rejection, culminating in relationship problems and increasing depressive symptoms.

Finally, depression was expected to be a driver of relationship dissolution. Our analyses did show that participants who reported more depressive symptoms were also concurrently lower in relationship satisfaction and higher in rejection sensitivity. Yet, there was little evidence of an association between earlier depressive symptoms and relationship dissolution, regardless of how the data were segmented. In summary, there was little evidence that depressive symptoms generated relationship problems. Instead individuals high in rejection sensitivity seem to generate their own relationship and mental health problems, especially and maybe only when they assert high levels of personal commitment to their couple relationships.

There are a number of limitations to consider when interpreting this study. First, only Australian university students with steady partners were included. Research has shown that high-rejection-sensitive persons and individuals with high levels of depressive symptoms may avoid or not be involved in romantic relationships (e.g., see Torquati & Vazsonyi, 1999). Therefore, the study participants might have had a more limited range of sensitivity and depression than would be found in a general sample of students or community members. Second, multiple sources of social support were not considered. Participants may have had varying levels of social support from family or friends that helped them adjust to relationship dissolution (Kincaid & Caldwell, 1991); support from family and friends have been found to be significant correlates of late adolescents’ mental health (Zimmer-Gembeck & Gallaty, 2006). Third, two items were used to measure commitment and these had not been validated in previous research. Using a validated measure will be important in future research. Finally, the time lag between assessments was about six months, which may be too short for depressive symptoms to substantially change.

To conclude, romantic relationships and individual perceptions of relationships and social competencies are critical developmental advances made in adolescence and emerging adulthood. Continuing research on these topics is likely to lead to best practices in interventions designed to assist individuals to compensate for or modify their individual vulnerabilities, such as rejection sensitivity. The end goals of such research are happier young people and good relationships.

References


**Address for correspondence:**

Melanie Zimmer-Gembeck  
Griffith University, School of Psychology  
Griffith University QLD 4222  
m.zimmer-gembeck@griffith.edu.au