#### **ABSTRACT**

Title of Thesis: THE ROLE OF MOTHERS' AUTHORITATIVE PARENTING

IN ADOLESCENT ATTACHMENT AND SOCIAL

**RELATIONSHIPS** 

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Research has shown the increasing importance of peer relationships for adolescents and a variety of positive outcomes for adolescents with quality, supportive friendships. The literature shows that both parenting style and attachment security influence adolescent social support. However, the mechanism through which parenting style influences adolescent social support remains undetermined. The current study, utilizing a clinical sample of 118 mothers and adolescents, explores the role of adolescent attachment security as a mediating variable for this relationship. Authoritative parenting is assessed using the Parenting Practices Questionnaire (Robinson et al., 1995); attachment using the Relationship Questionnaire (Hazan & Shaver, 1987); and social support using the Social Support Questionnaire (Procidano & Heller, 1983). The findings indicate no significant relationship between mothers' authoritative parenting and adolescent attachment security, but a positive relationship between adolescent attachment security and social support. The possible meaning of the lack of significant relationship for this sample is discussed.

# THE ROLE OF MOTHERS' AUTHORITATIVE PARENTING IN ADOLESCENT ATTACHMENT AND SOCIAL RELATIONSHIPS

By

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**Advisory Committee:** 

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#### **Chapter I: Introduction**

#### **Statement of the Problem**

Adolescence is an important transition into adulthood marked by numerous developmental, academic, and social challenges. While the exact age of adolescence is somewhat varied in the literature, many researchers define this period as beginning around age 12 and ending between ages 18 to 20 (Tanti et al., 2010; Engels et al., 2002). Adolescence has been commonly regarded as a critical period for the development of self and identity. During this stage, adolescents typically experience significant changes in their physical, cognitive, and social domain functioning (Tanti, Stukas, Halloran, & Foddy, 2010). Because of the numerous changes occurring during this time period, it is important to consider the sources of support that are available to adolescents and can help them navigate the difficult transition into adulthood.

Research involving adolescence has documented the shift in importance of peers during this stage, as peers often become equally as important as parents. The period of adolescence has been described as involving a transformation of social relationships, as adolescents spend increasing amounts of time in activities with peers relative to the time spent with their parents (Ryan, 2001). These friendships become more intimate and begin to involve more self disclosure of personal thoughts and feelings as well as greater provision of support (Engels, Dekovic, & Meeus, 2002). Because adolescents' peer relationships become closer and more intimate, they also become more influential in a variety of social domains, particularly with risk taking behaviors such as smoking, drinking, drug use, and sexual activity (Ryan, 2001).

The quality of adolescents' friendships is also important because of the numerous influences that having supportive, meaningful peer relationships has on adolescent adjustment. Colarossi and Eccles (2003) have found that support from friends is related to lower depression and higher self-esteem in adolescence. Studies have shown that support from an adolescents' peer group has consistently been associated with adjustment, specifically lower depression and hyperactivity, higher leadership, and better social skills (Rueger et al. 2010). Contradictory evidence comes from other studies that have shown positive correlations between peer support and negative outcomes such as externalizing problem behaviors (Rueger et al. 2010). In one study, researchers Scholte, van Lieshout, and van Aken (2001) found that adolescents who reported that they did not have a best friend experienced lower levels of social support and tended to report feeling lonely and isolated from peers. Because of the increasing importance and impact of supportive peer relationships for both positive and negative outcomes, it is important to consider the factors that influence adolescents' ability to form supportive friendships.

While many aspects of adolescents' family relationships may be significant, parenting style has been shown to greatly impact adolescents' ability to form quality supportive peer relationships. Parenting style includes several dimensions of parenting, primarily warmth, discipline, and consistency (Milevsky, Schlechter, Netter, and Keehn, 2007). The parenting styles defined by Baumrind (1971) and widely documented in the literature are authoritative, authoritarian, permissive, and neglectful. Authoritative parenting, characterized by a high degree of warmth, non-punitive discipline, and consistency, has been shown to be optimal for children and adolescents' adjustment (Maccoby and Martin, 1983 as cited in Milevsky et al., 2007). In contrast, an

authoritarian style, which involves low warmth, harsh discipline, and inconsistent parenting, as well as a permissive style, characterized by high acceptance but low parental supervision, has been shown to predict negative adjustment for children and adolescents. Neglectful parenting, which involves low acceptance and warmth as well as low supervision and strictness, produces the most negative outcomes for children and adolescents (Milevsky et al., 2007).

Table 1
Parenting Styles

Authoritative Parenting Style	High warmth, non-punitive discipline, consistency
Authoritarian Parenting Style	Low warmth, harsh discipline, inconsistency
Permissive Parenting Style	High acceptance, low parental supervision
Neglectful Parenting Style	Low acceptance, low warmth, low supervision, low strictness

Colarossi and Eccles (2000) found that adolescents with parents who exhibited more supportive and warm behaviors had a greater ability to form supportive friendships with their peers. These researchers found that supportive parenting predicted an increase in the child's self esteem, which influenced his or her ability to form supportive friendships in adolescence (Colarossi & Eccles, 2000). Similar research by Flaherty and Richman (1986) showed that perceived parental warmth and affectivity was correlated with an increased capacity to form supportive relationships in adulthood, as measured by the Social Support Network Inventory. These studies show the importance of warm and

supportive parental behaviors, which are characteristic of an authoritative parenting style, in influencing adolescents' ability to form supportive peer relationships.

Research has also shown that attachment to parents influences adolescents' ability to form quality supportive friendships. Attachments between parents and adolescents are formed in childhood and are relatively stable into adulthood. Seminal works by both John Bowlby and Mary Ainsworth have documented the process of forming attachments and the different patterns that can form as a result of early experiences. John Bowlby (1969, 1991) has proposed that people create internal working models of attachment that are relatively stable throughout the individual's life and influence a variety of interpersonal relationships (Aikens, Howes, & Hamilton, 2009). Based on her strange situation experiment, Mary Ainsworth identified three distinct patterns of attachment, including secure, anxious-resistant, and avoidant. Children who are securely attached to their primary caregiver seek proximity to that individual when they are distressed and are easily comforted, and are also able to be separated from their caregiver without excessive emotional distress. Children with an anxious-resistant attachment show ambivalence towards their caregivers and are unable to be easily comforted when reunited after a separation. Children with an avoidant attachment avoid reuniting with their caregiver after a separation (Bartholomew and Horowitz, 1991).

In a study of attachment in late adolescence, researchers Kobak and Sceery (1988) found that individuals with a secure attachment style were more likely to have high levels of social support from their peers. Attachment was assessed through administration of the adult attachment interview to first year college students. This interview identified three attachment styles: secure, preoccupied, and dismissing. The

students also completed measures of distress, social competence, and social support.

Social support was specifically assessed through the UCLA Loneliness Scale-Revised and the Perceived Social Support from Friends and Family questionnaire. Individuals with a dismissing attachment style reported their relationships with others as less supportive than individuals with a secure attachment style, and also reported experiencing more loneliness. Those with a preoccupied attachment were found to be perceived as anxious by peers. Securely attached individuals reported high levels of social support and low levels of psychological distress (Kobak & Sceery, 1988).

In an attempt to examine the shift in attachment from parents to peers during adolescence, Hazan et al. (1991) examined the behavioral manifestations of attachment, including proximity seeking, separation protest, and secure base. Proximity seeking describes seeking support and closeness from someone. During childhood, that person is usually a parent or primary caregiver and during adulthood, that person is typically a peer or significant other. For adolescents, attachments to parents are still very salient, but attachments to peers and significant others become more important. Separation protest describes the degree to which separation from an attachment figure produces anxiety. Secure base involves comfort with new experiences knowing an attachment figure would provide support if needed (Freedman & Brown, 2001). Hazan et al. also found that 75% of their adolescent sample considered peer relationships more important than parental relationships when considering the constructs of separation protest and proximity seeking, demonstrating their increasing desire to spend a greater amount of their time with their friends. However, when considering the construct of secure base, parents were favored slightly more over peers, showing the continued importance of parents for

long term security and support. These findings show the relationship between adolescents' attachment to their parents and their peers and the important changes that occur during this stage (Hazan et al., 1991 as cited in Freedman & Brown, 2001).

Ironically, one factor that has been shown to impact children's ability to form secure attachments is parenting style. Karavasilis, Doyle, & Markiewicz (2003) found that parenting style dimensions such as warm involvement, psychological autonomy granting, and behavioral monitoring were associated with more secure attachments in middle childhood and adolescence. These components are consistent with authoritative parenting, which has been shown to be predictive of secure attachment between children and their parents. Similarly, these researchers also found that less optimal parenting practices such as neglectful or authoritarian parenting was related to insecure attachments, particularly avoidant attachment in middle childhood and dismissing attachment in adolescence (Karavasilis et al. 2003). In a review by De Wolff and Van Ijzendoorn (1997), the authors found that maternal sensitivity, mutuality, synchrony, positive attitude, and emotional support were correlated with the development of attachment security in children. These results show the important aspects of parenting that contribute to a child's attachment style and support research that has shown the correlation between optimal authoritative parenting and security of attachment.

#### **Purpose**

The primary research question for this study was:

What factors affect adolescents' ability to form quality supportive friendships, which have been shown to influence adjustment during this stage?

Previous research has indicated the link between parenting style and attachment, between parenting style and the ability to form supportive friendships, and between attachment and the ability to form supportive friendships. However, the mechanism by which these three are related has not clearly been established. It was the purpose of this study to test the proposition that the mechanism by which parenting style impacts the ability to form supportive peer relationships is attachment. That is, attachment was proposed to mediate the connection between parenting style and adolescents' ability to form supportive friendships. In addition, while previous research has studied these variables in the general population, the current study proposed to test this link in a particularly vulnerable population, those whose families are seeking therapy for some type of distress. Because this population experiences various degrees of family dysfunction, it is possible that the relationship between parenting style, attachment, and social support could be different in this population. It is especially important to determine the influence of parenting style and attachment on adolescent social support, as this support may be more important for a clinically distressed population.

#### **Theoretical Background**

The relationship between parenting style, attachment, and adolescent social support can best be described through symbolic interaction theory. This theory focuses on how individuals generate and acquire meaning through interaction with their environment. Children and adolescents create social meaning through their relationships with their parents and other family members (White & Klein, 2008). This theory can be used to describe how adolescents create meaningful social relationships with peers through their interaction with their parents. One of the major concepts of symbolic

interaction theory is the notion of an individual's role. Mead (1934) described the role as the "place of an actor" which involves the ability to take the perspective of others in social situations. Roles are typically learned throughout a child's development based on his or her experiences with parents. Thus, authoritative parenting, which involves consistency, warmth, and predictability, prepares adolescents to form high quality, supportive peer relationships. Another concept involving taking the role of another person is "the looking glass self." This concept explains an individual looking at his or her actions through the view of others. Looking glass self could describe the ways in which adolescents interact socially with their peers based on their learned ability to examine their own actions through others' perspectives. The interaction approach of this theory describes the ways in which families influence children's development of roles and identity. This aspect of symbolic interaction describes how individuals create their roles in society through their experiences interacting with their family (White & Klein, 2008). Interaction with authoritative parents who provide consistent support allows the adolescent to form a more secure attachment style, which will likely affect their role in relationships with individuals outside of their family. Both parenting style and attachment influence parents' relationships and interactions with their children, which affects children's ability to form quality supportive social relationships in adolescence. This influence demonstrates how symbolic interaction theory provides a cohesive framework for describing the relationship between these three variables.

#### **Chapter II: Literature Review**

Adolescence, the transition stage between childhood and adulthood, involves many physical, cognitive, and emotional changes as well as many developmental challenges. It is during this stage that adolescents typically begin to desire a greater amount of autonomy from their parents and begin to develop their own individual identities (Tanti, Stukas, Halloran, & Foddy, 2010). In particular, adolescents experience marked changes in their social experiences especially as they transition into secondary school. During this time, they encounter a variety of new social situations through which they must determine group membership, roles, expectations, and responsibilities (Tanti et al., 2010). Research has shown that group membership and peer affiliation has a tremendous impact on adolescent adjustment in a variety of academic and social domains because of the increasing influence of peers relative to the influence of parents during this stage. Because these changes often occur in conjunction with greater academic rigor and increased responsibilities at home, adolescents require a great deal of social support from both their peers as well as their parents as they navigate their new sense of self and the numerous challenges associated with the transition from childhood to adulthood.

#### **Importance of Peers**

During adolescence, which many researchers agree occurs around age 12 to 18 (Engels et al., 2002; Tanti et al., 2010), there is typically a significant shift in the importance of relationships with parents relative to the importance of relationships with peers. Adolescents begin to spend increasing amounts of time with their peers and also begin to reference peers for decision making and problem solving. Fulgini, Eccles, Barber, and Clements (2001) studied adolescents' orientation towards their peers and the

implications for positive adjustment. The authors describe the increasing importance of peers during adolescence, which has been found to peak in early adolescence and decline as older adolescents begin to strengthen relationships with their parents. Fuligini et al. also discussed the changes in importance of peer acceptance and popularity in addition to increasing time spent with peers. In their study, adolescents completed self report questionnaires that assessed their orientation to peers, which included measures of peer advice seeking relative to parental advice seeking, as well as extreme peer orientation which included sacrificing talents, school performance, and parental rules to maintain peer relationships. The adolescents also completed measures of academic achievement, problem behavior, and family cohesion. The results showed a high orientation towards peers for all adolescents, and overall low levels of extreme peer orientation. Girls were found to seek more advice from their peers than boys, and boys were found to be more likely to have an extreme peer orientation. Adolescents with this extreme orientation were found to have higher levels of problem behavior and lower academic achievement. Seeking advice from peers did not have a significant influence on adjustment. The results show that healthy supportive peer relationships have a critical effect on adolescent development and promote positive academic and social adjustment (Fulgini et al., 2001).

Palmonari, Pombeni, and Kirchler (1990) conducted a study of peer group importance in adolescence. Adolescents in the study completed self report questionnaires that assessed their involvement in peer groups. Two characteristics of peer groups were addressed: 1) structural aspects of the groups such as characteristics of the group and activities and goals and 2) similarities and differences between themselves, their group, and other peer groups. The adolescents also completed assessments of their ability to

cope with a variety of developmental tasks. The results showed that most of the adolescents in the study (98.5 %) reported membership in peer groups, and spending time with these peers was ranked as important regardless of the content of the group's activities. Adolescents who were highly identified with a peer group described themselves and their peer groups more positively than those who were not. Peer group identification was also found to be predictive of more successful coping with developmental tasks such as decision making, puberty changes, self awareness, finding values, and coping with everyday problems (Palmonari et al., 1990).

Research has shown that increasing peer influence in adolescence occurs through both direct peer pressure and indirect peer modeling. In a study of peer influence, Padilla-Walker and Bean (2009) gave adolescents measures of direct positive influence, indirect positive and negative peer influence as well as measures of self-esteem, depression, aggression, and delinquency. These self report measures of indirect influence determined the extent to which adolescents were affected by their peers engaging in positive and negative behaviors. Positive behaviors included studying and participation in extracurricular activities and negative behaviors included drug use, running away from home, and destruction of property. Direct positive peer pressure was measured by asking how much friends helped the adolescent make positive decisions such as doing the right thing and following rules. The results of the study showed that indirect negative peer influence was predictive of negative risk behavior including aggression, delinquency, and depression. Positive direct and indirect peer influence was correlated with pro-social behaviors. This study demonstrates the influence of peers for both positive and negative behaviors in adolescence (Padilla-Walker & Bean, 2009).

#### **Role of Supportive Relationships in Adolescence**

Having close, supportive relationships impacts adolescent adjustment in a variety of areas. Social support has been defined as "an individual's perception that he or she is cared for, esteemed, and valued by people in his or her social network" (Demaray et al., 2005, p. 691). It has been found to buffer the adverse effects of stress as well as enhance personal functioning and coping. Research has shown that adolescents with low levels of familial and peer support experience a variety of negative outcomes, including delinquency, withdrawn behavior and hopelessness, depression, emotional problems, and lower self-concept. Social support has been found to be even more important for minority adolescents, who are at a greater risk of experiencing environmental factors such as poverty, discrimination, and violence that produce a variety of negative behavioral and emotional problems (Demaray et al., 2005). Studies have shown that social support from family members, teachers, and peers can serve as a buffer against some of these negative outcomes.

Helsen, Vollebergh, and Meeus (2000) describe the relational changes in adolescence as a restructuring of the network of "significant others." As children, significant others typically include parents and other family members, and although these are still important relationships for adolescents, they often begin to consider peers and dating partners as "significant others." As adolescents experience relational changes with their peers, the nature of relationships with their parents change as well, developing into a more "equal" relationship. Helsen et al. emphasize the continued importance of support from parents in addition to the increasing support provided by peers. Research has shown that the degree of social support that children and adolescents receive from parents

and peers varies with age. Younger children primarily receive support from their family members, and older children are more likely to receive support from both immediate family members and extended family and friends (Levitt et al., 2005). Research involving children and adolescents' social networks demonstrates the role of both parental and peer support in adolescent adjustment. While many studies examine the role of social support from multiple sources such as parents, extended family, and teachers in addition to peers, this review will focus on peer support in adolescence and the role that supportive relationships with friends has on adolescent adjustment.

In their study of the effects of social support on adjustment, Demaray, Malecki, Davidson, Hodgson, and Rebus (2005) assessed child and adolescent perceived social support using the Child and Adolescent Social Support Scale that measures four dimensions of social support including emotional, informational, appraisal, and instrumental, from five different sources, including parents, teachers, classmates, close friends, and school. In addition, the children completed assessments of clinical adjustment, school adjustment, personal adjustment, and emotional symptoms. The researchers found that females indicated higher levels of social support than males, particularly from classmates and close friends. The degree of perceived classmate support was found to be negatively correlated with emotional symptoms such as anxiety, social stress, depression, sense of inadequacy, self esteem, and interpersonal relationships for both boys and girls (Demaray et al., 2005).

In a similar longitudinal study, Rueger, Malecki, and Demaray (2010) assessed the impact of social support from a variety of sources on psychological and academic adjustment. Their assessment instruments included the Child and Adolescent Social

Support Scale and the Social Support Scale for Children. These researchers found gender differences in the effects of social support, as girls and boys perceived similar levels of parental support, but girls perceived support from all other sources (teachers, classmates, and close friends) more than did boys. In addition, girls perceived the most support from close friends relative to other sources of support. Classmate support was found to be a unique predictor of positive adjustment for boys, including higher academic achievement, higher self esteem, and fewer depressive symptoms (Rueger et al., 2010).

In another study of perceived social support in adolescence, Scholte, van Lieshout, and van Aken (2001) examined the social support that adolescents received from their mothers, fathers, siblings, and best friends. These researchers studied the effects of perceived support from those four sources on several measures of adolescent adjustment including psychological well being, specifically brooding, self esteem, loneliness, and worrying about home, and internalizing and externalizing behaviors such as delinquency, bullying, and substance use. In this study, Scholte et al. administered the Relational Support Inventory which measures emotional support, respect for autonomy, quality of information, convergence of central and peripheral goals, and acceptance. Adolescent adjustment was assessed on the following dimensions: psychological well being, bullying, delinquency, substance use, peer group reputation and social status. The results of this study support the provider/provision model, which emphasizes the combination of both provision of support and providing support for others as most comprehensively representing the construct of adolescents' perceived support. This model emphasizes the importance of examining the support that adolescents provide for their friends as well as the support they receive. Across all ages, adolescents were found

to perceive the greatest degree of support from their parents, followed by support from their best friends. By age 17, adolescents perceived their best friends to be equally as supportive of their parents, demonstrating the shift in importance of support from peers throughout this transition (Scholte et al., 2001).

The results of this study also showed several configurations of parental and peer support and their effects on adolescent adjustment. Adolescents who perceived low support from both parents and close friends experienced a variety of adjustment problems, including high levels of internalizing and externalizing behavior as well as increased bullying and substance use. Adolescents with low parental support but high peer support also showed a high degree of problematic behaviors. The researchers described this result by explaining that adolescents with low parental support often turn to deviant peers, who do not serve as buffers against the negative effects of low parental support. Adolescents in this study who reported that they did not have a best friend experienced low self esteem and higher loneliness and isolation (Scholte et al., 2001).

In a longitudinal study of social networks, Levitt et al. (2005) conducted interviews with two groups of children, one of fourth grade students ages 9-11 and one of sixth grade students ages 10-13. Both groups were interviewed again two years later. The study assessed social support through a mapping procedure including questions about social support from family, extended family, and friends. These interviews also included assessments of adjustment, specifically self-concept, loneliness, and internalizing and externalizing behaviors. The researchers suggested that the increasing support from extended family members beginning in childhood assists in the establishment of more intimate and supportive peer relationships in adolescence. In

addition, this study showed that receiving a higher degree of support from both family members and friends was predictive of more positive adjustment during adolescence.

Levitt et al. describe the importance of multiple support networks during the transition to adolescence because extended family and friends can provide alternative support when parents and close family members are not available. Also, in addition to being sources of support, close family members can also be sources of conflict for adolescents. When family conflict compromises support provided by close family members, peer support becomes more important (Levitt et al., 2005).

While parental support continues to be important throughout adolescence, it has been clearly documented throughout the literature that the importance of peer relationships increases during this stage. Peer support has been shown to correlate with positive adjustment in a variety of academic and psychological domains. Because of the importance of social support during adolescence, it is important to consider the factors that influence adolescents' ability to form quality peer relationships.

#### **Parenting and Peer Relationships**

Relationships with parents have been shown to affect adolescents' ability to form supportive peer relationships. Helsen, Vollebergh, and Meeus (2000) describe research that supports a reinforcement model, in which adolescents who have good supportive relationships with their parents are better able to build supportive relationships with their friends. Similarly, adolescents without supportive parental relationships typically have difficulty forming supportive relationships with friends. This model contradicts theories by other researchers that have described a greater reliance on peers for support when parental responsiveness is lacking. Helsen et al. (2000) assessed the impact of adolescent

social support through the use of questionnaires addressing perceived familial and friend support and adolescent emotional problems. These data were taken from the first wave of a longitudinal study of adolescent development (Meeus & Hart, 1993). The results showed that while there were no gender differences in perceived parental support, girls indicated a higher degree of support from their friends than did boys. For both boys and girls, the results showed that parental support declined while support from friends increased. The support received from parents and friends was found to be positively correlated, demonstrating the connection between supportive relationships with parents and adolescents' ability to form supportive relationships with peers (Helsen et al., 2000).

In addition to the ability to form supportive friendships, parenting practices also influence the type of peers with whom adolescents affiliate. In a study of parenting and peer group affiliation, Brown, Mounts, Lamborn, and Steinberg (1993) focused on three specific parenting practices, including emphasizing academic achievement, monitoring, and engaging the child in joint decision making. In the study, adolescents were assessed by a self report questionnaire for academic behaviors as well as family relationships and parenting behaviors, peer relationships, and psychological well being. Peer group affiliation was determined by the Social Type Rating procedure, in which students were interviewed about different crowds in their school and asked to categorize other students according to peer group membership. The results of the study showed that parenting practices influenced peer group membership in a variety of ways. Parenting that emphasized academic achievement, monitoring, and joint decision making was positively correlated with involvement with peer crowds that were more likely to promote positive behavior. These parenting behaviors were negatively correlated with involvement in

more deviant peer groups. These results showed the influence of parenting practices on the types of peer groups that adolescents choose to affiliate with, which can influence adolescents' decisions by promoting positive or negative behavior (Brown et al., 1993).

While the influence of several aspects of parenting on adolescent social functioning has been studied, two have consistently been found to be important. Both parenting style and attachment style have been shown to influence adolescent social functioning, particularly adolescents' ability to from supportive friendships. This review includes research involving each of these constructs and their relationship to social support in adolescence and will also address the relationship between parenting style and attachment style. Finally, current gaps in the literature regarding the relationship between parenting style, attachment style, and adolescent social support is identified.

#### The Influence of Parenting Style on Adolescent Social Relationships

The quality of parent-child relationships are often determined by the style of parenting exhibited by the parent. Baumrind (1971) has defined three main parenting styles, authoritative, authoritarian, and permissive, based on the degree of parental warmth, control, and responsiveness. The authoritative parenting style is characterized by a focus on parental control as well as parental warmth and responsiveness to the child's needs. Authoritative parents typically display behaviors that indicate a balance of warmth and control, and include nurturance, involvement, sensitivity, reasoning, and encouragement of autonomy (Coolahan et al., 2002). This parenting style has been shown to be the most beneficial for positive adjustment in children and adolescents (Lamborn et al., 1991). The authoritarian parenting style is comprised of behaviors that involve a high degree of control and less of a focus on responsiveness and warmth.

Authoritarian parents emphasize compliance and control, and exhibit behaviors that are restrictive, punitive, rejecting, and power-assertive. In contrast, the permissive parenting style involves a high degree of warmth and acceptance with a low degree of control and involvement. Permissive parenting can be ambiguous, as parents are often responsive to emotional needs but are unresponsive to children's needs for structure and stability (Coolahan et al., 2002).

Research has shown authoritative parenting to be optimal for adolescent adjustment, as it is characterized by a high degree of warmth and responsiveness, along with non-punitive discipline and control and consistency in parenting (Maccoby & Martin, 1983 as cited in Milevsky et al., 2007). Milevsky, Schlechter, Netter, and Keehn (2007) found that authoritative parenting was predictive of classroom adjustment and achievement, secure attachments, and a greater sense of autonomy. In their study, adolescents were given self report questionnaires assessing their perception of their parents' parenting style in terms of acceptance/involvement, and strictness/supervision. In addition, they completed measures of life satisfaction, psychological adjustment, self esteem and depression. The researchers found that authoritative parenting, characterized by high acceptance and involvement as well as above average strictness and supervision, was predictive of greater life satisfaction and self esteem as well as lower depression for adolescents (Milevsky et al., 2007).

Research by Bednar and Fisher (2003) showed that all adolescents were likely to turn to their peers for social decision making, and whether adolescents turned to parents or peers for moral and informational decisions depended on parenting style. Adolescents raised by authoritative parents were likely to reference their parents for moral and

informational decisions, while adolescents with authoritarian and permissive parents indicated that they would seek advice from their peers for those decisions (Bednar & Fisher, 2003).

Darling, Steinberg, and Brown (1993) examined the influence of specific parenting styles on peer group affiliation. These researchers administered self report questionnaires to adolescents that addressed both parenting style and peer crowd orientation. The results showed that adolescents with authoritative parents were more often affiliated with well rounded crowds that oriented toward adult values and also involved more competent peer interactions and were less likely to be involved with crowds that do not support positive adult values. The authors explain the positive effects of authoritative parenting by describing how parents influence the development of adolescents' positive relationships with peers by modeling and practicing social interactions and encouraging involvement in activities that will provide opportunities for developing appropriate social relationships. The result also showed that adolescents with indulgent (permissive) and uninvolved parents oriented more towards deviant peer groups. Authoritarian parenting was not found to have a significant effect on peer group affiliation (Durbin et al., 1993). Fuligni and Eccles (1993) also found that the nature of parent-child relationships during adolescence was predictive of how much adolescents oriented towards their peers. These findings were particularly noteworthy with regards to parents who did not provide opportunities for the adolescent to participate in joint decision making and did not relax power and restrictiveness, as this type of parenting was correlated with a stronger orientation toward peers for advice and support. These studies highlight the importance of parent-child relationships that allow the adolescent to

individuate from his or her parents and work toward establishing an independent identity while providing the necessary support and security during this difficult transition.

Adolescents with authoritative parents have been shown in a variety of studies to experience better psychosocial functioning and higher competence than adolescents with authoritarian, permissive, and neglectful parents. Adolescents with permissive parents have been shown to orient more towards deviant peer groups (Lamborn, Mounts, Steinberg, and Dornbusch, 1991). These findings demonstrate the important effect that parenting practices have on adolescents' ability to form quality supportive friendships. Parenting styles have been shown throughout the literature to influence adolescent adjustment in a variety of areas, particularly the ability to form supportive friendships, which are important relationships for adolescents as they transition into adulthood.

#### The Influence of Attachment on Adolescent Social Relationships

Another important influence on adolescents' ability to form supportive peer relationships is attachment security. Ainsworth (1989) defines attachment as an "affectional bond" that first occurs between an infant and his or her primary caregivers. Attachments also occur in adulthood between individuals and romantic partners. Bowlby (1973) has proposed that people create internal working models of attachment as children that predict the quality of attachments that they will have in adulthood. This concept demonstrates the stability of attachment styles from infancy into adulthood, as early attachment experiences often determine the security of later attachments (Bartholomew & Horowitz, 1991). Early attachment experiences also impact the child's internal working model of the self, which determines how the individual views his or herself in terms of

value and competence, particularly in his or her relationships to others (Bretherton, 1992).

The attachment styles characterized by Ainsworth that have been consistently documented in the literature are secure, anxious/ambivalent, and avoidant. Secure attachments are created by primary caregivers who display consistent sensitivity and responsiveness towards the infant. Securely attached children seek closeness with their caregivers and are comforted upon their return after a separation. Anxious/ambivalent attachments result from caregivers who are slow or inconsistent in responding to their child's needs and regularly interfere with the infant's desired activities, sometimes forcing affection at inappropriate times. Children with anxious/ambivalent attachments show ambivalent behavior towards their caregivers and are often unable to be comforted after a separation. These infants display a variety of protest behaviors including frequent crying, reduced exploration, anxiety, and a mix of attachment behaviors and overt anger. Avoidant attachments result from caregivers who are consistently rejecting, particularly when the infant attempts to establish physical contact. Children with avoidant attachment avoid contact with their caregivers after a separation and display a variety of detachment behaviors such as disregarding and avoiding their caregivers (Hazan & Shaver, 1987).

In a 15 year longitudinal study, Aikens, Howes, and Hamilton (2009) found that security of attachment was stable throughout childhood and adolescence and into adulthood. In particular, the authors found that individuals who were insecurely attached as children had unresolved attachment representations in adolescence, which they attributed to a lack of parental responsiveness to demands for autonomy and relatedness. This attachment disorganization was shown to be predicted by negative life events,

particularly changes in caregiver accessibility and responsiveness during salient developmental transitions. These researchers also found that peer relationships promoted skill development in adolescents and led to fewer unresolved attachment representations, demonstrating the corrective influence of supportive friendships on disorganized attachment (Aikens et al., 2009).

In a study of attachment style and perceived social support, Kobak and Sceery (1988) administered assessments of attachment styles and social behavior, including the Perceived Social Support of Friends and Family questionnaire, the Social Behavior Inventory, the UCLA Loneliness Scale, and the Dating and Assertion Questionnaire, as well as a psychopathology symptom checklist. The results of this study showed that individuals who were classified as having dismissing attachments reported their relationships with others as less supportive than securely attached individuals, and also reported experiencing more loneliness. In addition, individuals classified as having preoccupied attachments experienced significantly more psychopathology symptoms and perceived themselves as less socially competent than securely attached individuals (Kobak & Sceery, 1988). These results show the negative effects of insecure attachment on social competence and demonstrate the influence of secure attachment on a variety of positive social and emotional outcomes.

In another study of adolescent attachment security and psychosocial functioning, Allen, Moore, Kuperminc, and Bell (1998) assessed attachment security through the use of the Adult Attachment interview and Q-set classification system which determined the adolescents' attachment style. The adolescents completed self report questionnaires that assessed internalizing and externalizing behaviors. Psychosocial functioning was

assessed through peer reports of social acceptance. The results showed that adolescents who were more securely attached were more likely to be socially accepted by their peers and also experienced fewer internalizing and externalizing behaviors (Allen et al., 1998). These results demonstrate the effects of attachment security on adolescent social competence and peer acceptance, highlighting the importance of secure attachments with caregivers for the adolescent's later social functioning.

#### **Parenting Style and Attachment**

While both parenting style and attachment are likely to affect adolescents' ability to form supportive peer relationships, it must be acknowledged that these are not completely independent characteristics of parenting. A great deal of research has established a link between these two variables. Karavasilis, Doyle, and Markiewicz (2003) found that authoritative parenting that encourages autonomy while providing warmth and security as well as appropriate monitoring is most predictive of secure attachments in childhood and adolescence. The authors explain that this style of parenting helps children establish a secure base from which they can individuate from their parents and establish their own adult identities. Karavasilis et al. explain that the failure to provide both security and appropriate limit setting for children makes them vulnerable to developing an insecure working model of attachment in adolescence. Parental responsiveness has been consistently shown to relate to secure attachments, and low responsiveness has been correlated with avoidant and anxious attachment. Research has shown that adolescents with authoritative parents who provide warm and responsive involvement, appropriate discipline, limit setting, and monitoring as well as opportunities for autonomy and individuation experience a variety of positive outcomes including

healthy psychosocial, academic, and behavioral adjustment, which is also indicative of a secure attachment style (Karavasilis et al., 2003). De Wolff and van Ijzendoorn (1997) performed a meta-analysis of studies regarding parental antecedents of secure attachments and found that degree of maternal sensitivity, which primarily involves responsiveness, was positively correlated with the degree of attachment security. In addition to maternal sensitivity, parenting that involved a greater degree of emotional support was also positively correlated with attachment security (De Wolff & van Ijzendoorn, 1997).

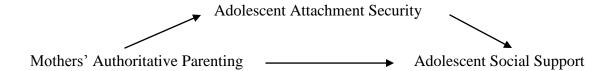
In a study of parenting behaviors and attachment in children, Roeloffs, Meesters, ter Huurne, Bamelis, and Muris (2006) administered assessments of perceived parenting, attachment security, and internalizing and externalizing behaviors. Attachment style in this study was operationalized using Bartholomew and Horowitz's (1991) classification of attachment styles based on anxiety and avoidance including secure, fearful, preoccupied, and dismissing. Because the majority of the children in the sample reported secure attachments, the researchers compared secure and insecure attachments in their analyses instead of distinguishing between all four styles. These researchers found that children who perceived themselves as having insecure attachments were more likely to indicate experiences of parental rejection and overprotection, as well as lower parental warmth. In addition, children with insecure attachments were more likely to experience internalizing and externalizing behaviors, specifically anxiety, depression, and aggression. The researchers found that parental rearing practices accounted for the majority of the variance in these symptoms (Roeloffs et al., 2006). The results

demonstrate the impact of parenting style on attachment security both in childhood and in adolescence.

#### Gaps in the Literature

Adolescence is a developmental transition involving a transformation of peer relationships, and thus it is important to examine the factors which influence adolescents' ability to form quality supportive peer relationships that promote positive adjustment during this stage. Previous research has documented the relationships between both parenting style and attachment style and adolescents' ability to develop supportive relationships, as well as the link between parenting style and the type of attachment style adolescents develop. However, there are no studies that examine all three constructs together. In the current study the relationship among these three variables is examined, specifically the extent to which attachment style was the specific mechanism through which parenting style influences adolescents' ability to establish supportive peer relationships (see Figure 1). Because authoritative parenting has been consistently shown throughout the literature to be associated with adolescents' positive adjustment in a variety of areas, this study focuses on the degree to which mothers exhibit an authoritative parenting style and how that style is related to adolescent attachment security and social support. Further, these variables have not been examined in a clinical population of adolescents who may be experiencing higher levels of familial and social stress, which suggests an even greater importance of determining the influence of parenting style and attachment on the ability to form supportive relationships for this population.

Figure 1. Proposed Mediation



#### **Hypotheses**

The hypotheses tested in this study are:

- 1. The degree to which mothers demonstrate authoritative parenting behaviors will be positively associated with the security of the adolescent's attachment.
- 2. The degree to which mothers demonstrate authoritative parenting behaviors will be positively associated with the degree of adolescents' perceived social support.
- 3. Adolescent attachment security will be positively associated with the degree of adolescents' perceived social support.
- 4. Adolescent attachment security will mediate the relationship between the degree of mothers' authoritative parenting and adolescent perceived social support.

#### **Chapter III: Methodology**

#### Sample

The sample for this study is a clinical sample of families who initiated therapy at the Center for Healthy Families at the University of Maryland. The Center for Healthy Families is a therapy training clinic that serves a diverse population of families, couples, and individuals in Maryland and the surrounding Washington, D.C. areas. The Center for Healthy Families provides low cost therapy based on a sliding fee scale. Clients who begin therapy at the Center for Healthy Families complete a packet of assessment forms, including the Parenting Practices Questionnaire, Relationship Questionnaire, and Social Support instruments being used in this study. The clinical sample used for this study includes 118 families who have sought treatment between 2001 and 2008 and each family includes a mother and at least one adolescent aged 12-18. Because the sample includes both single parent and two parent families, the current study only considered mothers' parenting styles. Mothers were chosen because most of the single parent families that attend therapy at the Center for Healthy Families are mother headed. For families with more than one adolescent in therapy, one of the adolescents was chosen through random selection for inclusion in the study. Adolescents who sought individual therapy without their parents present were not included in the sample.

The age range for the mothers included in this study is 28 to 55 years old ( $\overline{x}$ =41). The age of the adolescents ranges from 12-18 years old ( $\overline{x}$ =15). The largest percentage of the sample is 16 year olds (22%) and 13 year olds (21.2%) followed by 14 and 15 year olds (each 19.5%), 17 year olds (11.9%), 18 year olds (4.2%), and 12 year olds (1.7%). The adolescent sample includes more females (55.9%) than males (42.4%). The race

reported by the participants in the sample is a majority African American (53.4% for mothers and 55.1% for adolescents) followed by white (22% for mothers and 18.6% for adolescents), other or multiracial (11% for mothers and 15.3% for adolescents), Hispanic (9.3% for mothers and 7.6% for adolescents), Asian/Pacific Islander (2.5% for mothers and 1.7% for adolescents), and Native American (1.7% for mothers and .8% for adolescents). The majority of the mothers in the sample report being married (28%) followed by separated (16.9%), divorced (11.9%), living together and not married (11.9%), and single (5.1%). The average family income for the sample is \$33,295, with incomes ranging from 0 to \$160,000. The majority of the mothers in the sample (74.6%) are employed full time, followed by those who were homemakers not employed outside of the home (7.6%), those employed part time (6.8%), and those who were unemployed (5.9%). The majority of the mothers completed some college (33.1%), followed by those who received a high school diploma (14.4%), completed a bachelor's degree (12.7%), completed an associate's degree (9.3%), completed trade school (7.6%), completed some high school (6.8%), completed some graduate education (5.9%), and those who completed a master's or doctoral degree (both 5.1%).

#### **Procedure**

The Determination of Human Subjects form for this project was approved by the Institutional Review Board at the University of Maryland. A secondary analysis of the data collected by the routine assessment procedure of the Center for Healthy Families was performed. Clients who contact the Center for Healthy Families requesting therapy complete an intake interview over the phone in which they answer questions about themselves and their reasons for initiating therapy. The cases are then assigned to

therapists, who schedule the first appointment with the client. At this assessment session, the therapists review a consent form that outlines confidentiality as well as a fee schedule and payment agreement with the clients. The therapists then administer a standard packet of assessment forms that assess a variety of areas of individual and relational functioning including depression, family cohesion, social support, drug and alcohol use, trauma symptoms, attachment style, parenting behaviors, family issues, and relationship conflict. All individuals over the age of 13 are required by clinic policy to complete a full packet of forms. These forms are then coded to protect client confidentiality and the data are entered into the Center for Healthy Families database. Because the information in the database is organized by a confidential coding system, the participants were not identifiable by the researcher performing the secondary analysis.

#### Measures

## **Independent Variable: Authoritative Parenting**

In order to measure the construct of parenting style, data were gathered from administration of the Parenting Practices Questionnaire (PPQ; Robinson et al., 1995). The data for this measure were taken from the mother's responses from each family selected for the study. This assessment is a 62-item self-report questionnaire that assesses various dimensions of authoritarian, authoritative, and permissive parenting styles (see Appendix A). The measure provides separate scores for each parenting style but does not categorize individuals into a particular style. The authoritative style is measured by 27 items that assess four dimensions, including warmth and involvement, reasoning/induction, democratic participation, and good natured/easy going temperament. The authoritarian style is measured by 20 items that address verbal hostility, corporal

punishment, non-reasoning punitive strategies, and directiveness. Finally, the permissive style consists of 15 questions that include lack of follow through, ignoring of misbehavior, and lack of parenting self-confidence (Robinson, Mandleco, & Olsen, 1995). The authoritative, authoritarian, and permissive items were found to be internally consistent with Cronbach's alphas of .91, .86, and .75 respectively. The Parenting Practices Questionnaire was found to be an appropriate measure for use with mothers and fathers who are parents of preschool and/or school-aged children and can also be modified for use in intergenerational research (Robinson et al., 1995). For this questionnaire, parents indicate on a Likert-type scale the degree to which they demonstrate each type of behavior. Responses are provided on a scale of one (never) to five (always). Based on their responses to all of the items, the degree to which they demonstrate each style of parenting can be determined by calculating a total score for authoritative, authoritarian, and permissive parenting behaviors. The measure produces a separate score for each of the three parenting dimensions, with higher scores indicating increased use of practices associated with each particular parenting style (Robinson et al., 1995). For the current study, only the authoritative score is used. The possible range of scores for authoritative parenting is 27 to 135 which is obtained by adding together the numerical values for each of the 27 items that measure authoritative parenting (Robinson et al., 1995).

## **Dependent Variable: Social Support from Friends**

To measure adolescents' supportive friend relationships, data were gathered from the Social Support of Family and Friends (SS) questionnaire (Procidano & Heller, 1983), specifically the ratings on perceived support from friends (PSS-Fr) (see Appendix B).

Data for this measure were taken from one adolescent chosen randomly from each family selected for the study. On this measure, respondents provide a rating on a scale of one (yes) to five (no) of the degree to which they agree with each statement regarding support with friends. This measure consists of 20 questions with scores ranging from 20 to 100. Higher scores indicate greater perceived social support from friends. This measure also includes 6 items that are worded negatively and therefore reverse scored (2, 6, 7, 15, 18, 20). The SS-Fr questions address not only the degree to which the adolescent feels supported by their friends, but also the degree to which adolescents provide support for their friends. Because both of these aspects are important contributions to the construct of social support, all of the items on the SS-Fr are included in this study. The SS-Fr has been found to be an internally consistent measure, with a Cronbach's alpha of .88 (Procidano & Heller, 1983), which demonstrates the utility in using the scores from all of the items on the measure to calculate a total score representing the degree to which adolescents feel supported by friends.

## **Mediating Variable: Attachment Security**

For the mediating variable of adolescent attachment style, data were gathered using the adolescent's self report on the Relationship Questionnaire (RQ; Hazan & Shaver, 1987) (see Appendix C). This instrument measures attachment styles in two different ways. The first part of the measure is categorical and asks respondents to read four short paragraphs describing different attachment styles including secure, dismissing, preoccupied, and fearful, and to choose which best describes them. The second part is a continuous measure in which participants rate each of the descriptions from the first section on a seven point scale ranging from "Not at all like me", indicated by a score of 1,

to "Very much like me", indicated by a score of 7, based on how much they think each paragraph describes their preferences for closeness with others. Based on their ratings, the degree to which the respondents have secure, dismissing, preoccupied, and fearful attachment styles is determined. This measure provides a score for each of the four attachment styles. Individuals can be classified as having a particular attachment style based on the style that they rate the highest, or most like them (Bartholomew & Horowitz, 1991). The RQ has been shown indirectly to be a valid measure of the four attachment styles. Griffin and Bartholomew (1994) tested the related two-dimension attachment model, which includes the self and other models. This model was compared with self reports, friend reports, romantic partner reports, and judges' ratings of peer and family attachment. For each attachment style, the RQ was found to be correlated with all of the methods, which indicates both convergent and discriminant validity (Griffin & Bartholomew, 1994). The current study uses the seven point scale for the secure attachment style, which determines the degree of security of attachment for each subject. The continuous part of the RQ is used because it allows for a greater variation of responses than the categorical measure.

## **Chapter IV: Results**

This study was designed to determine the relationship between parenting style, adolescent attachment, and adolescent social support. Adolescent attachment security is tested as a mediating variable between mothers' authoritative parenting and adolescent social support. The following hypotheses are tested:

- 1. The degree to which mothers demonstrate authoritative parenting behaviors will be positively associated with the security of the adolescent's attachment.
- 2. The degree to which mothers demonstrate authoritative parenting behaviors will be positively associated with the degree of adolescents' perceived social support.
- Attachment security will be positively associated with the degree of adolescents' perceived social support.
- 4. Attachment security will mediate the relationship between the degree of authoritative parenting and adolescent social support.

Prior to testing the hypotheses, the distribution of scores for all three variables is examined. The descriptive statistics for these variables can be found in Table 2 below.

Table 2
Descriptive Information of Variables

PPQ- Mothers' Authoritative Parenting Range of Scores Mean, SD	49-134 (n=110) 102.6, 15.14
RQ- Adolescent Attachment Security Range of Scores Mean, SD	1-7 (n=118) 4.3, 2.14
SS-FR- Adolescents' Perceived Social Support from Friends Range of Scores Mean, SD	33-100 (n=109) 73.7, 15.78

## **Primary Analysis**

To address the hypotheses for this study, a test of mediation is performed. According to Baron and Kenny (1986), several criteria must be met to establish mediation. These conditions are (1) the independent variable must affect the mediator in the first regression, (2) the independent variable must affect the dependent variable in the second regression, and (3) the mediation must affect the dependent variable in the last regression (see Table 3 below).

Table 3

Mediation Criteria

First condition: Independent variable must affect the mediating variable	Degree of mothers' authoritative parenting must affect the adolescent's attachment security
Second condition: Independent variable must affect the dependent variable	Degree of mothers' authoritative parenting must affect the degree of adolescent social support
Third condition: Mediator must affect the dependent variable	Adolescent attachment security must affect the degree of adolescent social support

To establish mediation in this study, it must first be shown that mothers' authoritative parenting affects adolescent attachment security. This initial regression of authoritative parenting and attachment security indicated no significant relationship (r=-.018, p= .856). Because the test for mediation is contingent on the independent variable affecting the mediating variable and no such relationship was found in this study, it was determined that attachment security did not act as a mediator between authoritative parenting and adolescent social support.

Additional analyses were performed to determine the relationship between the other variables in the study. A regression analysis of the independent variable (mothers' authoritative parenting) and the dependent variable (adolescent social support) was performed. This relationship was not significant (r= -.008, p= .934). An analysis of adolescent attachment security and adolescent social support was also performed. A significant positive relationship was found (r= .356, p= .000) such that adolescents who

had a more secure attachment style had higher levels of social support from friends than adolescents with a less secure attachment style.

## **Secondary Analysis**

While the hypothesized relationships were not found for the sample as a whole, the possibility that they exist for a subset of the sample was explored. The first step of the test of mediation was to regress attachment security on authoritative parenting. Separate regression analyses were performed for both male (n=50) and female (n=66) adolescents as well as younger (under age 15) (n=50) and older (over age 15) (n=45) adolescents. The relationship between mothers' authoritative parenting and adolescent attachment security was found to be non-significant for males (r=.110, p=.462) and females (r=-.124, p=.340). Additionally, this relationship was not significant for younger adolescents (r=.142, p=.347) or older adolescents (r=-.132, p=.403).

### **Chapter V: Discussion**

The purpose of this study was to determine the relationship between parenting style, attachment security, and adolescent social support. Because support from friends becomes more important in adolescence, it is important to determine the factors that influence adolescents' ability to form quality supportive friendships. In particular, this study examined the impact of parenting style and attachment. Previous research has demonstrated a relationship between each pair of these variables, but the mechanism through which parenting style affects adolescent social support has not been determined. The goal of this research study was to determine the role of adolescent attachment security as a potential mediator of the relationship between mothers' authoritative parenting and adolescent social support. Another goal was to determine the relationship between the three variables in a clinical population of families seeking therapy. It was hypothesized that mothers' authoritative parenting would be positively associated with adolescent attachment security, mothers' authoritative parenting would be positively associated with adolescent social support, and that adolescent attachment security would be positively associated with adolescent social support. Additionally, attachment security was predicted to be a mediating variable in the relationship between mothers' authoritative parenting and adolescent social support.

## **Summary of Results**

The results from this study indicate that there is no significant relationship between mothers' authoritative parenting and adolescent attachment security. Since this relationship was not significant, mediation could not be established in this study. In addition, there was also no significant relationship found between mothers' authoritative

parenting and adolescent social support. There was a significant positive association found between adolescent attachment security and adolescent social support.

## **Discussion of Findings**

These findings indicate that adolescent attachment security is not a mediator of the relationship between parenting style and adolescent social support in this sample. However, a significant positive relationship was found between adolescent attachment security and adolescent social support. This relationship is consistent with previous literature that demonstrated a positive relationship between attachment security and peer acceptance as well as greater social competence (Allen et al., 1998; Kobak & Sceery, 1988). Because a secure attachment style is indicative of being comfortable with close relationships and being able to depend on others for support, it makes sense that adolescents who identify themselves as being securely attached also report experiencing more social support. Having a secure attachment style is also consistent with adolescents providing support for their peers, which is another dimension of the social support measure in this study. The social support measure also includes items that address confiding in friends, seeking out peers for advice and problem solving, and openly sharing ideas. These items are all related to an adolescent's overall social competence with peers, which is a concept that has been documented in the literature to be positively associated with secure attachment. Because secure attachment often involves a provision of emotional support, it is consistent that adolescents with a secure attachment style are able to form similarly supportive relationships with their friends.

What is most striking about these results is the complete lack of significance of authoritative parenting. This is particularly surprising given the vast literature which has

consistently demonstrated the positive influence of authoritative parenting on domains such as secure attachment (Karavasilis et al., 2003; De Wolff & Van Ijzendoorn, 1997), adolescent social support (Colarossi & Eccles, 2000) and adolescent adjustment (Milevsky et al., 2007). Because these results were contradictory to previous research studies, a secondary analysis of this relationship was performed to determine if the relationship was true for subsets of the sample. These groups included both male and female adolescents as well as older (over age 15) and younger (under age 15) adolescents. For all of these groups, no significant relationship between parenting style and secure attachment was found. Because these findings are so inconsistent with previous literature, it is necessary to explore possible explanations for these results.

The first area to consider in an effort to make sense of this finding is the psychometric properties of the measures used in the study. Initially, one explanation of these results was that the scores on the Parenting Practices Questionnaire did not accurately represent a range of authoritative scores. If this finding were true, it could be explained by mothers filling out the measure in a socially desirable way that made them seem more authoritative, which is the parenting style that has been documented throughout the literature to be the most effective and beneficial for children. However, frequencies run on the data indicated that there was a fairly full range of authoritative scores from 49-134 (out of a possible range of 27 to 135) and a relatively even distribution of both high and low authoritative scores. The mean score was 102.6 with a standard deviation of 15.14. This variance in the sample indicates that the mothers included in the study showed a range of authoritative parenting scores. This finding demonstrates that the lack of relationship between parenting style and adolescent

attachment security cannot be explained by a lack of variance in authoritative parenting scores or a social desirability effect.

It is also possible that the items on the Parenting Practices Questionnaire are more appropriate for parenting younger children than adolescents. The instrument was originally designed for use with preschool and school-aged children (Robinson et al., 1995). For example, some of the questions that address discipline might be more relevant for younger children, such as "I spank when my children are disobedient", "I punish by putting my children off somewhere alone with little if any explanation", and "I use physical punishment as a way of disciplining my children." The items regarding physical punishment may be less applicable to adolescents, as it becomes more difficult for parents to spank children as they get older. Also, it is unlikely that parents would be able to put their adolescent child somewhere alone as a punishment. Thus, the lack of significant relationship found between the variables in this study could, in part, have been influenced by the greater appropriateness of this instrument for parents of younger children.

Another possible psychometric issue in this study is the use of a single question to measure attachment style. For this study, only the continuous measure of the RQ for secure attachment was used, which may not provide a comprehensive picture of adolescents' comfort with and reliance on close relationships with others. Because this study only included the adolescents' response to the question about identification with a secure attachment style, it is possible that they could have rated other attachment styles similarly. Additionally, this single question assessing the security of attachment does not provide a detailed picture of childhood experiences and current relationships with others.

Because these possible psychometric explanations could not account for the surprising lack of influence of mothers' authoritative parenting, other characteristics of the sample were considered.

Beyond psychometric explanations, the lack of significance may have also been influenced by characteristics of the sample. One characteristic of the sample that could have contributed to the insignificant findings is the exclusive use of mothers. Because the original dataset included both single and two parent families, mothers were selected so that data from both of these family structures would be included. Fathers were not selected for the study because there were not enough to create a reasonable sample. Nearly one third of the mothers in the sample (28%) reported being married and living with their spouse and 11.9% of the mothers reported being unmarried, but living with their partner. Taking these groups together, about 40% of the sample could be considered two parent families, compared with 37% of the sample being single mothers (including those who reported being separated, divorced, dating and not living together, single, and widowed). The remaining 23% of the sample did not report their relationship status. It is possible that the insignificant results of the study could have been affected by differences between single parent and two parent families. In two parent families, it is likely that the parenting style of both the mother and father influence an adolescent's development. However, it is difficult to identify concrete differences in single and two parent families because adolescents from divorced families may still be influenced by the parenting styles of both parents. Additionally, in some families, the parenting style of the mother and father differ. Because only mothers were included in the study, it is possible that a significant relationship was not found between authoritative parenting and adolescent

attachment security because the parenting a child receives, which can affect their attachment, is based on more than just what the mother does. For the full impact of parenting to be assessed, father's parenting style might need to be in the study, particularly for those in two-parent families.

Despite these factors that may have influenced the lack of significant findings in this study, it is possible that the results suggest that the relationship between parenting style and adolescent attachment is not as clear as previous research has indicated, particularly for a clinical population. Because very few studies have examined clinical populations of mothers and adolescents, it is possible that for these families, the relationship between parenting style and attachment is not as straightforward as for nonclinical populations. This clinical sample could be different from a non-clinical population in a variety of ways. First, it is a given that these families are experiencing some type of distress. Thus, it is possible that the adolescent's reported attachment style may differ from how they would describe their attachment security during a nondistressed time. In addition, parents struggling with their adolescent's behavior may be using different parenting practices than they would in other circumstances, which would affect their authoritative parenting scores on the Parenting Practices Questionnaire. Because all of the families in the sample were experiencing some type of distress, it is important to recognize that their responses to these measures might be different from individuals in a non-clinical population, changing the relationship of these variables for this clinical population. It is difficult to determine exactly how these variables might be different in a clinical sample because families who seek therapy do so for a variety of

reasons and experience many different types of distress. It is likely that the unique circumstances of each family influence the relationship of parenting style and attachment.

Another factor to consider is the problem of social desirability in the subjects' responses to the assessment questionnaires. In a research study with a non-clinical population, participants know that their responses are confidential and that their identities are protected. However, in a clinical sample, participants know that their therapists will be seeing their response which may increase the likelihood of responding in a socially desirable manner. Further research in this area should be conducted to determine how the relationship between these variables may be different for clinically distressed families, particularly to determine what factors are most influential in creating more secure attachments and social support for adolescents who are in therapy.

#### Limitations

The limitations of this study involve the secondary analysis of a preexisting dataset. The research was confined to the use of the measures included in the dataset, which might have restricted the possibility for finding significant relationships between the variables. For example, the dataset did not include data for younger children, which might have showed different results than adolescents. While the sample of 118 mother-child pairs was a sufficient size to test the hypotheses and potentially establish a significant result, having a larger sample would have introduced greater variability of responses into the sample and could have made it more likely to find a significant relationship between the variables.

In addition, this study was limited by the measures that were available for analysis. Having only a single measure for both parenting style and attachment security

could have limited the results of the study. Had the data for this study been collected by the researcher, more measures related to adolescent attachment could have been included to provide a more comprehensive picture of how adolescents function in relationships. For example, the Adult Attachment Interview (AAI; George, Kaplan, & Main, 1985) and the modified Child Attachment Interview involve asking the individual about his or her relationships with others. This technique is a semi-structured interview that involves discussion of childhood experiences as well as the individual's current relationship with his or her parents. With an interview format, participants would be able to describe their attachment experiences in greater detail which would address the complexity of attachment security better than a single item questionnaire. In addition, a measure of adolescents' perception of their mothers' parenting style could have been included to compare with mothers' reports of their parenting style. The addition of these measures could have provided a more accurate picture of the relationship between authoritative parenting and adolescent social support.

#### **Future Research**

Further studies regarding the influence of parenting style on adolescent attachment and social support should be conducted with both clinical and non-clinical populations. These studies would be important to determine the factors that affect adolescents' ability to form secure attachments and quality supportive friendships.

Because most of the previous literature addressing the relationship between parenting style, adolescent attachment security, and adolescent social support has studied these variables in a non-clinical population, it is important for futures studies to examine the role of these variables in clinical populations. The relationship between these variables

could also be beneficial for clinicians working with mothers and adolescents to increase social support and provide education about the most effective parenting techniques.

It is also important for future studies to examine the robustness of the measures used in this study. First, the psychometric properties of the Parenting Practices Questionnaire need to be studied further to determine its appropriateness for use with both adolescents and for clinical populations. It is important to examine the relationship of parenting style and adolescent attachment security for parents who score high on each of the different parenting styles, including authoritative, authoritarian, and permissive. Because the Parenting Practices Questionnaire does not categorize parents into one style, it is possible that parents can score high on multiple dimensions, which makes the relationship of these styles and adolescent attachment security unclear. It is also likely that the relationship between parenting style and adolescent attachment could be different for parents with high authoritarian or permissive scores. Future research may want to consider using a greater variety of measures to provide a more comprehensive picture of parenting style. For example, the Ideas about Parenting (IAP) scale (Heming, Cowan, & Cowan, 1990) is a 70 item measure that assesses parenting beliefs using a nine-point scale. The items on this measure reflect a variety of dimensions of authoritative, authoritarian, and permissive parenting styles. Another parental self report measure that could be used is the Parenting Dimensions Inventory (PDI; Slater & Power, 1987). This measure has 47 items that assess eight dimensions of parenting that are used to create scores on warmth and strictness. One measure of parenting style that has been shown to be appropriate for measuring perceptions of parenting behavior of children and adolescents is the Authoritative Parenting Index (Jackson et al., 1998). This 20 item

questionnaire categorizes parents as authoritative, authoritarian, or permissive based on children's reports of their parents' behavior. The use of these measures of parenting style could help to provide a more accurate picture of parenting practices and their relationship to adolescent outcomes such as attachment security and social support.

It is also important for future studies to address the role of race in the relationship between parenting style and adolescent attachment security and social support, as parenting styles are often regarded differently by various racial groups. While the relationship between authoritative parenting and positive adolescent outcomes has been well established in the literature for European Americans, the relationship between parenting style and adolescent outcomes for other racial groups is not as straightforward. Some research has shown that authoritarian parenting produces less negative outcomes for African American children and adolescents, while other studies show authoritative parenting as the most beneficial for all racial groups (Pittman and Chase-Lansdale, 2001). Future studies should address the relationship between parenting style and adolescent attachment security and social support for racially diverse populations to determine whether these relationships are consistent between different racial groups.

Also, because the relationship between these variables may be different for clinically distressed families, it is necessary to expand the research in this area to include clinical populations in order to determine the factors that affect adolescents' ability to form secure attachments and quality supportive friendships. Because these families are experiencing various forms of stress, it is even more important to determine the factors that influence adolescents' ability to form supportive relationships with their friends who may help them manage those difficulties. It is also important to examine the role of

parenting style in clinical populations because improving parenting practices can be the target of clinical interventions for families in therapy. Determining the role of parenting style in adolescent attachment and social support is necessary in order to increase positive adolescent outcomes in this population.

#### Conclusion

In conclusion, while adolescent attachment security was found to be positively related to adolescent social support, attachment security was not found to be a mediator of the relationship between mothers' authoritative parenting and adolescent social support. There are several aspects of the dataset that could have influenced the results of the study, particularly psychometric properties and characteristics of the sample. Overall, the findings question the well established link between parenting style and attachment security. These findings specifically question the relationship between mothers' authoritative parenting with both adolescent attachment security and social support. Further studies addressing the relationship between these variables should be conducted to discover the ways in which parenting style influences adolescent attachment and social support, particularly for clinical populations.

# **Appendix A: Parenting Practices Questionnaire**

**PPQ** 

Gender:		Therapist Code:	
	<del>-</del>	s about your parenting pract	
•	-	ng of your child or children	-
	•	ally do the following things:	(If you have one child,
respond as	you usually do to that	child in general.)	
1. Never	2. Once in a while	3. About half of the time 4	l. Very often 5. Always
1.	I encourage my child	ren to talk about their trouble	es.
2.	I guide my children b	y punishment more than by	reason.
	I know the names of a	my children's friends.	
4.	I find it difficult to di	scipline my children.	
	I give praise when my	y children are good.	
6.	I spank when my chil	dren are disobedient.	
7.	I joke and play with n	ny children.	
	I don't scold or critici	ize even when my children a	ct against my wishes.
9.	I show sympathy whe	en my children are hurt or fru	ıstrated.
10.	I punish by taking pri	vileges away from my child	ren with little if any
exp	planation.		
11.	I spoil my children.		
12.	I give comfort and un	derstanding when my childr	en are upset.
13.	I yell or shout when n	ny children misbehave.	
14.	I am easy going and r	elaxed with my children.	
15.	I allow my children to	annoy someone else.	
16.	I tell my children my	expectations regarding beha	vior before they engage in
an	activity.		
17.	I scold and criticize to	o make my children improve	
18.	I show patience with	my children.	
19.	I grab my children wh	nen they are disobedient.	
20.	I state punishments to	my children, but I do not ac	ctually do them.
21.	I am responsive to my	y children's feelings or needs	5.
22.	I allow my children to	help make family rules.	
23.	I argue with my child	ren.	
24.	I appear confident about	out my parenting abilities.	
25.	I give my children reaso	ons why rules should be obeyed	l.
26.	I appear to be more co	oncerned with my own feeling	ngs than with my children's
	feelings.		
27.	I tell my children that	we appreciate what they try	to accomplish.

28.	I punish by putting m	ny children off somewhere a	alone with little i	f any
exp	lanation.			
29.	I help my children to ur	nderstand the effects of behavi	ior by encouraging	them to talk
abo	ut the consequences of	their own actions.		
30.	I am afraid that discipli	ining my children for misbeha	vior will cause the	m not to like
me.				
31.	I take my children's des	sires into account before askin	g them to do some	ething.
32.	I explode in anger towa	ards my children.		
33.	I am aware of problems	s or concerns about my childre	en in school.	
	OVER PLEASE-			
1. Never	2. Once in a while	3. About half of the time	4. Very often	5. Always
24	I throatan my shildra	n with punishment more of	ton than Lactually	y givo it
		y hugging, kissing, and hold		
	I ignore my children'		ing my chharen.	
	2	ment as a way of disciplining	a a marr abilduan	
	1 7	• •	~ .	
· · · · · · · · · · · · · · · · · · ·	•	after my children misbehav		
		ildren when making a mista	ke in parenting.	
	I tell my children wh		ation about som	athin a
	•	en when they cause a comm		euning.
42.		son with my children when t	mey misbenave.	
	I slap my children wh	•		
	I disagree with my ch			
	I allow my children t	*	1 11 1	
		mate times together with my		1
47.		re fighting, I discipline the	children first and	ask
•	estions later.		•	
	_ ,	lren to freely express thems		
		with rewards to get them to		
		hen my children's behavior	doesn't meet my	•
	ectations.			
	-	y children's opinions by end	couraging them to	o express
the				
		lished rules for my children		
		ren how I feel about their go		avior.
		hment with little or no justi		
		y children's preferences in		•
		sk why they have to conform	n, I state: "Becau	ise I said so"
	"I am your parent and	•		
	* *	t how to solve my children'		
		iences of my children's beh	avior.	
59.	I demand that my chi	ildren do things.		
60.	<u>-</u>	nisbehave, I channel their be	havior into a mo	re acceptable
	activity.			
61.	I shove my children	when they are disobedient.		
62.	I emphasize the reason	ons for rules.		

# **Appendix B: Social Support Questionnaire**

							SS (ASSESSMENT)
Gen	der: _		Date o	of Birth:		Therapist Code: _	Family Code:
to n thin are	nost p king a five p	eople about ossibl	at one frience le ans	e time o ls, plea	s which or anoth se do n throug	ner in their relation ot include family n	lings and experiences which occur ships with <b>FRIENDS</b> . When nembers. For each statement there "Yes" to "No." Please check the
Yes	3			<u>No</u>			
1	2	3	4	5			
					1.	My friends give	me the moral support I need.
					2.	Most other peop	ole are closer to their friends than I
						am.	
					3.	My friends enjo	y hearing about what I think.
_					4.	Certain friends	come to me when they have
						problems or nee	d advice.
					5.	I rely on my frie	ends for emotional support.
					6.	If I felt that one	or more of my friends were upset
						with me, I'd jus	t keep it to myself.
					7.	I feel that I'm or	n the fringe in my circle of friends.
					8.	There is a friend	I I could go to if I were just feeling
						down, without f	eeling funny about it later.
					9.	My friends and	I are very open about what we think
						about things.	
					10.	My friends are s	sensitive to my personal needs.

11.

12.

13.

friends.

My friends come to me for emotional support.

My friends are good at helping me solve problems.

I have a deep sharing relationship with a number of

					14.	My friends get good ideas about how to do things or
						make things from me.
					15.	When I confide in friends, it makes me feel
						uncomfortable.
_	_	_	_	_	16.	My friends seek me out for companionship.
_			_		17.	I think that my friends feel that I'm good at helping
						them solve problems.
	_				18.	I don't have a relationship with a friend that is as
						intimate as other people's relationships with friends.
					19.	I've recently gotten a good idea about how to do
						something from a friend.
					20.	I wish my friends were much different.
						OVER PLEASE
	_			-		at include friends. For each statement there are five
pos	sible a	answe	rs (1 t	through		ging from "Yes" to "No". Please check the answer
pos you	sible a	answe	rs (1 t	through item.		
pos you Yes	sible a choo	answe se for	rs (1 t	through item. <u>No</u>		
pos you Yes	sible a choo	answe se for	rs (1 t	through item. <u>No</u>	n 5) rang	ging from "Yes" to "No". Please check the answer
pos you Yes	sible a choo	answe se for	rs (1 t	through item. <u>No</u>	1.	ging from "Yes" to "No". Please check the answer  My family gives me the moral support I need.
pos you Yes	sible a choo	answe se for	rs (1 t	through item. <u>No</u>	1.	My family gives me the moral support I need.  I get good ideas about how to do things or make
pos you Yes	sible a choo	answe se for	rs (1 t	through item. <u>No</u>	1. 2.	My family gives me the moral support I need.  I get good ideas about how to do things or make things from my family.
pos you Yes	sible a choo	answe se for	rs (1 t	through item. <u>No</u>	1. 2.	My family gives me the moral support I need.  I get good ideas about how to do things or make things from my family.  When I confide in the members of my family who
pos you Yes	sible a choo	answe se for	rs (1 t	through item. <u>No</u>	1. 2.	My family gives me the moral support I need.  I get good ideas about how to do things or make things from my family.  When I confide in the members of my family who are closest to me, I get the idea that it makes them
pos you Yes	sible a choo	answe se for	rs (1 t	through item. <u>No</u>	1. 2. 3.	My family gives me the moral support I need.  I get good ideas about how to do things or make things from my family.  When I confide in the members of my family who are closest to me, I get the idea that it makes them uncomfortable.
pos you Yes	sible a choo	answe se for	rs (1 t	through item. <u>No</u>	1. 2. 3.	My family gives me the moral support I need.  I get good ideas about how to do things or make things from my family.  When I confide in the members of my family who are closest to me, I get the idea that it makes them uncomfortable.  Most other people are closer to their families than I
pos you Yes	sible a choo	answe se for	rs (1 t	through item. <u>No</u>	1. 2. 3.	My family gives me the moral support I need.  I get good ideas about how to do things or make things from my family.  When I confide in the members of my family who are closest to me, I get the idea that it makes them uncomfortable.  Most other people are closer to their families than I am.
pos you Yes	sible a choo	answe se for	rs (1 t	through item. <u>No</u>	1. 2. 3. 4. 5.	My family gives me the moral support I need.  I get good ideas about how to do things or make things from my family.  When I confide in the members of my family who are closest to me, I get the idea that it makes them uncomfortable.  Most other people are closer to their families than I am.  My family enjoys hearing about what I think.

 _	 	 8.	I rely on my family for emotional support.
 	 	 9.	There is a member of my family I could go to if I
			were just feeling down, without feeling funny about
			it later.
 	 	 10.	My family and I are very open about what we think
			about things.
 	 	 11.	My family is sensitive to my personal needs.
 	 	 12.	Members of my family come to me for emotional
			support.
 	 	 13.	Members of my family are good at helping me
			solve problems.
 	 	 14.	I have a deep sharing relationship with a number of
			members of my family.
 	 	 15.	Members of my family get good ideas about how to
			do things or make things from me.
 	 	 16.	When I confide in members of my family, it makes
			me uncomfortable.
 	 	 17.	Members of my family seek me out for
			companionship.
 	 	 18.	I think that my family feels that I'm good at helping
			them solve problems.
 	 	 19.	I don't have a relationship with a member of my
			family that is as close as other people's
			relationships with family members.
 	 	 20.	I wish my family were much different.

## **Appendix C: Relationship Questionnaire**

RQ (	(ASSESSMENT)	)
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Gender:	Date of Birth:	Therapist Code:	Family Code:
	Bute of Birtin.	Therapist code.	1 anni

- 1. The following are descriptions of four general relationship styles that people often report. Please circle the letter corresponding to the style that best describes you or is closest to the way you are in your relationships with **PEOPLE IN GENERAL.** 
  - A. It is relatively easy for me to be emotionally close to others. I am comfortable depending on others and having others depend on me. I don't worry about being alone or having others not accept me.
  - B. I am somewhat uncomfortable getting close to others. I want emotionally close relationships, but I find it difficult to trust others completely, or to depend on them. I sometimes worry that I will be hurt if I allow myself to become too close to others.
  - C. I want to be completely emotionally intimate with others, but I often find that others are reluctant to get as close as I would like. I am uncomfortable being without close relationships, and I sometimes worry that others don't value me as I value them.
  - D. I am comfortable without close relationships. It is very important to me to feel independent and self-sufficient, and I prefer not to depend on others or have others depend on me.
- 2. Now please rate each of the relationship styles above according to the extent to which you think each description corresponds to your general relationship styles.

Not at all like me			Somewhat like me			Very much like me	
Style A.	1	2	3	4	5	6	7
Style B.	1	2	3	4	5	6	7
Style C.	1	2	3	4	5	6	7
Style D.	1	2	3	4	5	6	7

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