

Research Paper

Attachment Styles in Female Adolescents: A Comparative Analysis of Girls in Alternative Care Settings and Traditional Homes

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ABSTRACT

Attachment theory proposed by Bowlby and Ainsworth suggests that early relationships and bonds formed with primary guardians/parents/caregivers are the foundation and baseline for future relationships of children, and emotional well-being during their adulthood. The possibility that children living in alternative care settings have different experiences than those living in commonly seen home settings may develop attachment styles differently and possibly is a phenomenon that needs to be explored, as it is critical to understand how attachment styles in these environments impact psychological well-being. This study investigates the nature of the relationship between attachment styles and psychological well-being among teenagers in alternative care settings compared to those in traditional family settings. A sample of 40 females aged 13-18 was surveyed using the Attachment Style Questionnaire by (Oudenhoven, Hofstra and Bakker (2003)), with participants 20 participants from the Maher Vatsalyadham Orphanage in Pune, divided into a control group (living with parents) and an experimental group (residents of an orphanage). Significant differences were observed in some subscales of attachment styles between the two groups, suggesting that the care setting impacts attachment styles and, subsequently, psychological well-being. Understanding these differences can inspire the publishing of more well-being and positive reinforcement interventions aimed at improving emotional support in alternative care settings.

Keywords: *Attachment theory, Attachment styles, Psychological well-being, Alternative care settings, Orphanage, Adolescents, Emotional support, Caregivers, Family settings*

Attachment is the relationship and bond formed between an infant and their primary caregiver, be it a parent or a guardian; anyone initially present in the infant's life as a significant figure (Bowlby, 1969). This bond is vital in the emotional and social development of a child and is a foundation for all future relationships. The first form of attachment, for infants, manifests based upon their relationship and bond with their parents or primary caregiver as that is the most initial and accessible interaction they have at the time (Cherry, 2023). This bond and relationship with their parents may differ from one infant to another and the nature of the bond plays a role in determining the attachment styles that may manifest during the adulthood of the infant's life (Ainsworth, 1978).

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The concept of attachment styles is based on the work done in 1960's and 1970's by John Bowlby and Mary Ainsworth. Their research includes specifications of how this theory works, which are labeled as attachment styles. Attachment styles are used as an indication or cue to predict and understand attachment patterns in romantic relationships (Levine,2022) platonic relationships/friendships and relationships and reactions to authority figures. For instance, Levine (2010), in his book “the new science of adult attachment and how it can help you find—and keep—love” puts forth the idea that the early emotional bonds formed with a caretaker have the ability and power to influence one's future romantic relationship that include relationship conflicts and general expectations of romantic intimacy. There are 4 main attachment styles recognised:

- 1. Secure Attachment:** Divecha (2017) suggested that a secure attachment style develops as a result of the child's constant responsiveness, which fosters trust and confidence that their needs will be addressed and that they will have the support that they desire and require. People who are securely attached typically have high self-esteem and confidence and a generally good opinion of people around them, and they are at ease with both intimacy and independence in relationships. They have most often grown up in secure households or around secure relationships which has provided a sense of stability and self-confidence (Lein, 2024).
- 2. Disorganized-disoriented Attachment:** If the individual's primary caregiver grapples with unresolved trauma, it can result in the intense fear characteristic of a disorganized-disoriented attachment style. Research done by Beeney, Wright, Stepp et al., (2016) used an assessment approach that focused on a hierarchy of attachment organization, presenting that the parent assumed roles of both fear and comfort for the infant,eliciting the confusion and disorientation experienced about relationships presently. Alternatively, the parental figure may have disregarded or failed to address the infant's needs, or their unpredictable and chaotic conduct could have been distressing or traumatic for the individual.
- 3. Anxious Attachment:** An anxious attachment style stems from the needs of a child not always being satisfied by their primary caregivers. Mikulincer, M., Shaver, P.R. and Gelles (2016) have conducted research that suggests that sometimes the guardian may be unavailable and dismissive but might, at times, be warm and responsive. This means that the child might crave for warmth and hence may become clingy, constantly seeking validation in the fear of being abandoned as a result of worrying about whether their needs will be met. In adults, this may manifest into abandonment issues, trust issues, lack of self-esteem and a lack of confidence. Sometimes caring but not always, carers can lead to anxious attachment. It's probable that the individual's parent or primary caregiver exhibited inconsistency in their parenting style, alternating between periods of engagement and responsiveness to the infant's needs and moments of unavailability or distraction. This lack of consistency may have instilled feelings of anxiety and uncertainty within the individual regarding whether their needs would be met in this foundational relationship.
- 4. Avoidant Attachment:** According to Dan Brennan, MD (2023) a pediatrician who worked closely with children and derived, from observations and interviews, that parents who fail to acknowledge their child's emotions or permit their expression can contribute to the development of an avoidant attachment style in their children. Similarly, parents who emphasize independence and autonomy can also foster this attachment style. In cases of avoidant attachment, children learn that their best course of action involves suppressing their emotions and relying on self-sufficiency. Individuals with avoidant attachments are characterized by a tendency to avoid

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intimacy in relationships (Rose Gould, 2024). They exhibit high levels of avoidance but low levels of anxiety. The idea of forming close relationships may induce feelings of suffocation in them. They prioritize independence and freedom and typically do not concern themselves with their partner's availability. (Garcia Quiroga and Hamilton-Giachritsis, 2015)

Attachment in Alternative Care Settings

A study conducted by researchers Thakkar, Mepukori, Henschel and Tran in (2015) used to investigate the attachment styles and patterns of children who were living in alternative care (Children's Homes, Orphanages and Foster Care), were analyzed and explained. The findings of the study helped conclude that children growing up in these uniform and group foster care settings were more likely to form stronger attachments with their peers rather than with their mentors or caregivers, both individually and collectively. Specifically, children who identify mentors as mothers and their primary guardians show stronger attachment to them compared to those who identify caregivers in that role. The communal structure of these institutions, where caretakers have limited time for individual attention, may contribute to this dynamic. Consequently, children may develop deeper and more meaningful bonds with their peers, whom they spend more time with and feel more personally and inwardly connected to. Now the primary question remains, if this preference for peer attachment over adult attachment has negative consequences in the long term and adulthood lives. Some research suggests that early trauma, such as abandonment or abuse, may hinder individuals' ability to form strong attachment bonds with adults later in life, potentially perpetuating the imbalance between peer and adult attachments.

Based on this theory, a more specific look at the attachment styles manifesting in orphans/children living in institutional care settings shows that their manner of attachment differs from that of the remaining population as they do not rely on their parents as their primary guardians or point of comfort (Tu Zahra,). Usually, according to the study, attachments are formed amongst any of the most constant individuals in the child's life which happens to be their peers and friends.

The first signs of attachment are seen when they form strong bonds amongst themselves rather than with their guardians, caregivers and mentors. This, according to the structure of foster care, suggests why children may show higher attachment amongst their peers rather than the appointed guardians and mentors. As they spend the majority of their time interacting with and surrounded by their peers, they are able to form closer and more intimate friendships and bonds amongst each other and not with their guardian as each child does not receive the individual and focused priority that is required in order to form those kinds of attachments.

This theory provides a structure and a framework to further understand the formation of interpersonal relationships and emotional bonds of all types. It highlights the impact that early experiences with caregivers/guardians further influence later relationships formed and one's emotional well-being. By understanding what attachment styles are and all the types, gaining insights on self-behavior and emotional well-being of an individual and others as well. This is an extremely relevant and important theory to understand and comprehend as it directly impacts our lives and the formation of our relationships. Overall, Attachment Theory can be used to understand and analyze a multitude of elements; such as why an individual may or may not display certain attachment patterns in their platonic relationships

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or it can be used to trace the impact that our childhood experiences have on our emotional and mental well-being; as attachment theory provides valuable insights into behavior and interaction amongst others.

Another research study (Sagone et al., 2023) aims to analyze and derive conclusions from the interrelations of attachment styles manifested in adults, with psychological well-being, all in relevance to the age groups (young adults vs adults) and relationship status (singleness vs close relationships). The main findings of the study showed that individuals in the study with close and stable relationships in the sample, detailed higher scores in psychological well-being than singles or people without stable/close relationships.

Therefore, research done by Thakkar, Mepukori, Henschel and Tran in 2020 & by Sagone et al. (2023), in this field helps fill any possible gaps in the understanding of attachment styles, specifically in varying contexts such as foster or alternative care settings. By investigating how each specific attachment style manifests and develops in different environments, researchers and psychologists can work on psychological treatments and strategies to support and nurture healthy attachment dynamics in children who may have undergone and experienced trauma and/or childhood adversity.

METHODOLOGY

Research Aim:

The aim of the research conducted was to investigate the relationship between the attachment styles and the psychological well-being amongst teenagers in alternative care settings in comparison to the remaining population.

Null Hypothesis: There will be no significant correlational relationship between the attachment styles of teenagers and their psychological well-being to their care setting (alternative care/normal population).

Alternative Hypothesis: There will be a significant and guaranteed correlational relationship between the attachment styles of teenagers and their psychological well-being to their care setting (alternative care/normal population).

The variables being investigated in this research are: independent variable is the care setting and relationship with a caregiver and its effect on the measure dependent variable which is their attachment style and psychological well-being.

Ethical considerations:

All participants were provided with consent forms that included complete details about the nature and purpose of the study, their rights and how the data collected from them would be used. They were given the opportunity to provide voluntary consent to participate, via a consent form. In addition to providing fully informed consent, it was assured that participant confidentiality would be strictly enforced and all data would be anonymized to respect and protect their privacy. Before the surveys were passed out, all participants were provided with information about what the study was and were all offered extra support or any resources if they required it. Lastly, with the help of voluntary participation, measures were taken to minimize and reduce any possible harm or discomfort that could be caused to the participants during the data collection and analysis part of the experiment.

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Tools Used

The tools used to collect and analyze data was the Likert scale used with the Attachment Style questionnaire. Under the **Attachment Style Questionnaire (ASQ)** the 3 subscales that are used to measure attachment are Availability, Anger-Distress and Goal corrected partnership. The questionnaire utilized the Likert scale which is a 5-point scale used to measure attachment in an individual, which was provided to volunteers in Hindi (their language of preference).

The lowest value of the scale is equivalent to complete disagreement with a question in comparison to the highest value that indicates agreement; and the middle values pose as a range of agreement. The Likert scale originated with psychologist Rensis Likert in 1932 as a method of measurements when measuring the attitudes by asking participants to indicate their level of agreement with a series of questions given to them, in this case in response to the statements in the ASQ. The scale usually consists of five points, with each point indicating a different level of agreement or disagreement.

For the 5-point Likert scale used with the questionnaire, the labels used were:

1. Strongly Disagree (1)
2. Disagree (2)
3. Neutral (3) or Neither Agree nor Disagree
4. Agree (4)
5. Strongly Agree (5)

In the context of the ASQ, this scale allows the volunteers to express their degree of attachment-related attitudes by selecting the option that best reflects their situations, with each response being scored individually and accordingly.

Under the **Attachment Style Questionnaire (ASQ)** the 3 subscales that are used to measure attachment are Availability, Anger-Distress and Goal corrected partnership. These subscales are the different aspects with which attachment styles are measured and counted. Each subscale accounts for a different dimension of attachment styles; firstly, the availability subscale measures the extent to which an individual perceives and reacts to how available their significant others or guardians are for them. A high score on this subscale indicates that they have strong beliefs that others around them are constantly available, supportive and responsive for them and their needs. Secondly, the anger-distress subscale measures the extent to which an individual feels angry, anxious or distressed in response/reaction to any threat made to their relationships/attachments/bonds. A higher score on this subscale presents a greater likelihood of a person feeling angry or distressed when their attachment needs are not catered to.

The goal-corrected partnership subscale observes and determines to what extent an individual can recognise and cater to the needs, goals, feelings and perceptions of others in the relationship. It measures the extent to which an individual is able to be a part of mature and balanced relationships where the needs and requirements of both people in the relationship are catered to.

Compositely, the overall attachment score is a measure of the general attachment style of the individual, as it combines the responses of each of the 3 subscales and finally presents a

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broad view of the individual's attachment patterns and feelings towards the process/act of forming strong bonds.

Sample

The sample consisted of 40 females all between the ages of 13-18 who all participated voluntarily in the study. The control group (n=20) consisted of children living with their parents and the experimental group (n=20) consisted of young adults from an orphanage- *Maher Vatsalyadham*. The young adults were all residents at the institution and studying at different schools in their area or Wagholi, Pune. Due to the nature of the experimental group, the available guardian was contacted, to collect participants for the to answer the questionnaire at *Maher Vatsalyadham, Pune*. The only criteria for the selection of the participants were that they be between the ages of 13-18 and be female.

Data Collection Procedure

The data was collected from 20 girls at the *Maher Vatsalyadham Orphanage, Maharashtra, India*; where all the volunteers were sat in a classroom together and given the questionnaire at the same time. The questionnaire was made up of 4 parts- background information on the volunteer, Availability partnerships, Anger-Distress partnerships and Goal corrected partnerships that all contained subspecific questions. It was provided on a paper in their preferred language of either English or Hindi; all of the participants opted for the questionnaire in marathi.

Data Analysis

The data was scored via *DataTab*, where each category of questions and the sum of its responses were scored against the group they were in. The sum of each question category was placed as the metric variable and the group stayed as the constant nominal variable. The data was scored in the form of descriptive statistics (mean, standard deviation and standard error mean) and the t-test (Cohen's d variable, t variable, df variable and the p value; against equal and unequal variances).

RESULTS AND DISCUSSION

This section presents the analysis and interpretation of the collected data from *Maher Vatsalyadham* which gives comprehensive results on the attachment styles among orphans, that is measured using the Attachment Styles Questionnaire (ASQ) and scored on a Likert scale. It highlights the primary and cardinal attachment styles within the experimental group and explains how these attachment patterns may vary across two different groups- the experimental group and the control group; hence, providing insights into the emotional development of the control group.

Table 1: Independent t-test analysis of Anger-distress among experimental and control group (N=40)

		n	Mean	SD	t	df	p
Anger Distress subscale	EG	20	3.2	1.77	1.87	38	0.06
	CG	20	1.9	2.55			

It can be inferred that there are significant differences found amongst the experimental group respondents (M=3.2, SD=1.77) and control group respondents (M=1.9, SD=2.55), $t(40)=1.87$ where $p=0.06$.

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Table 2: Independent t-test analysis of Availability among experimental and control group (N=40)

		n	Mean	SD	t	df	p
Availability	EG	20	9.1	1.45	-0.42	38	0.67
	CG	20	9.35	2.23			

It can be inferred that there were no significant differences found amongst the experimental group respondents (M=9.1, SD=1.45) and control group respondents (M=9.35, SD=2.23), $t(40)=-0.42$ where $p>0.05$.

Table 3: Independent t-test analysis of Goal corrected partnership among experimental and control group (N=40)

		n	Mean	Std. Deviation	t	df	p
Goal-corrected partnership	EG	20	9.85	1.09	-3.89	38	<.001
	CG	20	11.3	1.26			

It can be inferred that there were significant differences found amongst the experimental group respondents (M=9.85, SD=1.09) and control group respondents (M=11.3, SD=1.26), $t(40)=-3.89$ where $p<0.05$.

Table 4: Independent t-test analysis of Overall Attachment score among experimental and control group (N=40)

		n	Mean	Std. Deviation	t	df	p
Overall Attachment Score	EG	20	22.05	2.74	-0.93	38	0.35
	CG	20	23	3.63			

It can be inferred that there were no significant differences found amongst the experimental group respondents (M=22.05, SD=2.74) and control group respondents (M=23, SD=3.63), $t(40)=-0.93$ where $p>0.05$. Hence, the null hypothesis retained and the alternative hypothesis rejected.

Looking at the results of the subscales, the anger-distress subscale showed results that had non-significant differences between the control and experimental groups; hence, suggesting a slight yet inapplicable increase in the results of the two groups. This result has been seen before in a research conducted by Mikulincer & Shaver (2007) who found that an increase in attachment anxiety led to an increase in emotional reactivity that is equivalent to a slightly higher, still fairly insignificant, score on the anger-distress subscale in the experimental group. Having no significant differences between the data of control and experimental groups for this subscale, when compared to the research of Mikulincer & Shaver (2007), shows that both groups share similar tendencies to express and feel anger-distress in response to any threats to their attachment security. These results show that both groups are equally affected and the experimental conditions did not affect their emotional reactivity in anger-distress scenarios.

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Similarly, the results for the availability subscale showed no significant differences between the 2 groups which indicates a stable and secure perception of others' availability. These results are congruent with the findings of researchers Gillath, Shaver, and Mikulincer (2021) which draw attention to pre-existing mindset of availability perceptions in adult attachment. Results for this subscale again showed no significant differences between the data from the experimental and control group. This may be because the primary difference between the attachment patterns of the two groups is the subject of their attachment rather than the extent or method of attachment. No significant differences between the data of the two groups indicates that both groups find their attachments and relationships equally as available, where these relationships can be amongst peers (for the control group) or between a parent and their child (experimental group).

Results for the goal-corrected partnership subscales showed a significant difference between the responses of the two groups where the control group showed a higher ability to be a part of mature, two-way and stable relationships which suggests that the conditions/cases of the experimental group has altered their ability to exhibit the same attachment patterns. These results are supported by research done by Simpson and Overall (2020) experimented to investigate how secure attachment fosters better goal-corrected partnerships by encouraging independence and collaboration. Since this subscale relies on the nature of initial attachment- secure or insecure- it showed significant differences between the data of the two groups which means that the abilities of children in the experiment group to maintain stable and mutual two-way goal-oriented relationships may be disputed, which aligns with the findings of Simpson and Overall (2020).

Lastly, the overall attachment scores revealed no overall significant results while still presenting the resilience and stability of general attachment styles, in agreement to research done by Fraley and Roisman (2019) whose research showed the strength and resilience of attachment styles in the face of short-term changes after a longitudinal experiment that aimed to prove the stability of overall attachment styles across different situations (example: conditions of both the control and experimental group) and ages. The data that shows no significant differences in the results of both groups aligns with the findings of Fraley and Roisman (2019) to prove that the overall attachment of both groups is adaptable and resilient to any long-term changes taking place.

CONCLUSION

The research aim of this experiment was to investigate the relationship between attachment styles and psychological well-being among teenagers in alternative care settings compared to those living with their parents. The research posed two hypotheses: the experimental hypothesis that stated that there would be a significant correlation between these variables, but the results were mixed. In the results, the Anger-Distress and Goal Corrected Partnership subscales showed significant differences between the experimental and control groups, the Availability subscale and Overall Attachment Score did not. These results and findings from conducting this experiment suggest that while some certain aspects of attachment, such as regulating anxiety & anger and understanding relational goals, may have been impacted by the alternative care settings, whereas, the general understanding of caregiver availability and overall attachment may not differ as significantly.

The results of these findings are important as they may be valuable for psychologists, caregivers, and educators who are working with the children in alternative care settings and

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also help improve the attachment styles of young children before they may negatively impact the way they bond as adults. Understanding the specificities of how attachment styles manifest and develop in these environments can help form positive reinforcement interventions aimed at fostering healthier psychological and cognitive development and improving emotional well-being in these populations.

However, this study has limitations, primarily the small sample size and the focus on female participants from a single orphanage. These factors may lead to a limit to the generalizability of results. Additionally, the study relied on self-reported data with no confirmation by the guardians of the individuals reporting as volunteers, which could be subject to biases. Future research to avoid these limitations can consider a larger and more diverse sample and include longitudinal methods to explore how attachment styles grow and present themselves over time in different care settings. Despite these limitations, this study successfully provides important insights into the complex interrelation between attachment and well-being in alternative care contexts.

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Conflict of Interest

The author(s) declared no conflict of interest.

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