



Relationship between Attachment Styles and Social-Behavioral-Affective Problems among Primary School Children in Tehran

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Available online at: www.isca.in, www.isca.me

Received 25th December 2013, revised 22nd February 2014, accepted 6th April 2014

Abstract

Current work was done aiming at investigating relationship between attachment and behavioral, affective and social problems and predicating it based on level of attachment in primary school children (Region 6, Education Organization of Tehran) in 2013. To this end, male and female school-age children ($n = 120$) from Region 6 in Tehran (5 schools for girls and 5 schools for boys) were selected by cluster sampling method. Q-TEST attachment scale and child behavior checklist system (CBCL) tools were used for data collection and measuring behavioral, social, and affective problems. SPSS software was used for data analysis and Pearson correlation and multiple regression analysis was used for investigating relationship between variables. Results indicate there is significant correlation between attachment style and social and affective problems among children. In other words, the style of the attachment can predict the social-behavioral- affective problems among children. Overall mutual affective support of parents gives feeling of security to children and in fact parent needs mutual security for nurturing children.

Keywords: Attachment, social-behavioral- affective problems, primary school children.

Introduction

Sroufe, Egeland, Carlson, and Collins¹ defined attachment as follows: attachment means a resort of comfort and security for search and exploration and a source of reassurance to the child when he is distressed. Bowlby conceptualized attachment within a great theory. Attachment theory is not just child development theory; rather it is also theory of development in life. Weiss² argued knowing that someone cares for you and you are in his mind is a securing source for one at any age and conditions. According to Goodwin³ there are always attachment relationship and they are active throughout the life cycle so that attachment bonds are developed in adulthood life and they influence important activities of adulthood period⁴.

In a work by Khanjani⁵ it was shown children under 3 years who received non-parental care more than 35 hours per week are at risk of insecure attachment and behavioral-social problems (in the view of instructor and not the mother). Also, no significant relationship was found between depression and maternal non-adoptability with attachment style and children behavioral children⁶. Self-esteem was positively related with secure attachment style and it is negatively correlated with avoidant attachment style⁷.

Some other factors including attachment to the mother (in unfamiliar situations) and its quality (relationship with non-parental caregivers), features of care experience (duration and type of care), socio – economic conditions of the family, etc. are also correlated with children behavioral problems⁸. A meta-

analysis study indicated Subsequent support by acquaintances reduces effect of insecure attachment. So it can be said that the type of insecure attachment likely leads to psychological harm in adulthood⁹. Type of attachment to father is predictor of behavioral problems in school¹⁰. Findings indicated attachment in insecure - ambivalent children and insecure – controlled children was higher than score of secure children based on combined scale of Externalizing Problems¹¹.

According to a meta-analysis, children's affective and emotional relationship with the parent and their attachment is associated to adolescent relationships, romantic relationships, mental processes and interpersonal functioning, emotional regulation, coping with stress and mental health in adulthood, and it can predict mental pathology¹².

Main questions in the current research include: Is there relationship between affective, behavioral and social problems of children and attachment? Is it possible to predict affective, behavioral and social problems of children based on attachment?

Methodology

Research design is of correlation type. Statistical society is composed of all male and female primary school children studying in primary schools in Region 6 in Tehran. Sampling method was Multi-stage cluster random sampling. Data were selected randomly. 5 schools for girls and 5 schools were selected from 24 public primary schools in Region 6 of

Education Organization in Tehran. 60 female students and 60 male students were selected randomly from 5 grades in each school and the questionnaire was completed by their parents within 20-25 min. considering type of research and regression method, sample size for each predictive variable was calculated at least 40 using Cochran formula. The sample was increased to 120 by overestimation¹³.

Q-TEST attachment scale and child behavior checklist system (CBCL) tools were used for data collection.

Q-set scale: Q-set questionnaire was used for measuring attachment. It is an observational tool which is used for measuring secure and insecure attachment. It is consisted of 90 items. Observer (mother) observes child behavior and rates any option which describes a special characteristic in the child in a Likert-scale. Van Ijzendoorn, Vereiken, Bakermans, Kranenburg and Riksen, Walraven examined validity of this tool in a meta-analysis. Concurrent validity of the tool with unfamiliar situation tool was reported as 0.39.

Child Behavior Checklist (CBCL): The questionnaire is consisted of three parallel forms. These forms include the Child Behavior Checklist (CBCL), self-evaluation questionnaire and parent or teacher self-reporting form which was adopted and normalized by Minaee¹⁴ for primary and secondary and high school students in Tehran. It measures affective and behavioral problems as well as educational and social capabilities and abilities in 6-18 years old children in the view of parents. In order to normalize child affective behavioral problem questionnaire, school-age forms of the measurement system based on ACHENBACH experience were prepared and run on a sample size 1,437 (784 boys and 689 girls) in Tehran aged 6-18 years. The test includes 103 items and measures affective, behavioral problems, physical complaints, social problems and aggressive behavior. Following disorders or problems are measured for scoring based on DSM system: Emotional problems, anxiety problems, behavioral problems. Internal consistency coefficients of problems scale and competency scale in the respected forms were investigated in terms of gender and age groups using Cronbach's alpha. Range of coefficients varied between 0.62 and 95.0. Test-retest method was used for examining temporal consistency of the forms. Content validity, criterion validity and construct validity of the forms were examined using appropriate.

Results and Discussion

Findings: Descriptive findings obtained from 120 children (60% female, 40% male) are given in table-1. As mentioned earlier, aim of the current work is determining affective, behavioral, and social problems in 6-12 years old children based on attachment. To this end, correlation of the variables was calculated, then multiple regression analysis was run for predicting scores.

Table-1

Summary of statistical indices for scores of subjects

Variables	SD	Mean
Affective problems	7.68	25.39
Social problems	4.32	14.24
Law-breaking behavior	8.58	26.11
Aggressive behavior	6.96	22.61
Attachment	0.22	0.051

According to table-1 regarding distribution of scores of subjects in affective, social problems rule-breaking behavior, and aggressive behavior as criterion variables and attachment as predictive variable, descriptive indices of mean, SD are shown.

As it is observed in above table, R^2 for behavioral problems indicate 34 percent of behavioral problems variable variance, 23 percent of affective problems variable variance, and 35 percent of social problems variable variance are described by attachment. Observed R for behavioral problems (0.57), Affective problems (0.48), and social problems (0.59) suggests that available linear regression models can be used for prediction. In addition, calculated F for behavioral problems (5.870), Affective problems (3.826), and social problems (7.75) are significant at confidence level in social problem 99 percent. By referring to t-statistics and sig levels it can be judged there is significant negative correlation only between attachment and behavioral and social problems. Obtained Beta coefficients' signs indicate there is significant negative correlation between attachment and affective and social problems.

Discussion: There is consistent between findings in the current work and findings in domestic works by Khanjani⁵, Dadsetan⁶, Sayadpour⁷, Williams et al.¹⁰, Moss et al.¹¹ denoting that attachment style can predict children behavioral, social and affective problems.

Table-2

Regression analysis of behavioral problems, Affective problems and social problems based on the relationship between mother - child

Dependent variables	Predictors	Standardized coefficients	T	Sig	R	2 R	F	Sig
behavioral problems	Attachment	-0.14	-0.957	0.342	0/57	0/34	**5/870	**0/01
Affective problems	Attachment	-0.313	-2.495*	0.015	0.48	0.23	3.826**	0.01**
social problems	Attachment	-0.354	-3.127**	0.002	0.059	0.35**	7.75**	0.01**

Possible explanation for this finding is that separation of the child at early ages leads to insecure attachment. Sensitivity of the age under three years in the formation of attachment, lack of permanent and sustainable presence, and lack of appropriate ongoing response of the mother well to the signs of the child at the age when he is not able to express his needs clearly, lack of presence of a unique alternative in absence of the mother are correlated with development of sustainable characteristic attributes and behavioral and nurturing styles and describe them. Different findings indicated children under 3 years who received non-parental care more than 35 hours per week are at risk of insecure attachment and behavioral-social problems (in the view of instructor and not the mother).

Child and adolescent with insecure attachment feel permanent restlessness and sometimes feel severe isolation. He seeks for someone who creates security feeling for him and he is emotionally attached upon receiving the least positive messages regardless of characteristic attributes. He thinks of dropout upon dealing with academic problems and sometimes he suffers from behavioral problems. Even he may tend to peer groups with moral or behavioral abnormalities for overcoming his affective needs, and he may get addicted by peer encouragement. On the other hand, adolescent suffers from such problems as skepticism and character disorders in most cases which result from his childhood.

It can be stated cases which affect the child compatibility and his mental development is not limited to just parent relationship, rather quality of the parent relationship with the child is also important. Two points should be made in relation with quality of parent and child relationship: 1. Extent of affective relationship: the closer and more intimate is affective relationship of the parents with the children, children would become more compatible and adoptable socially. 2. Way of child nurturing: excessive controlling leads to limitation of child development and excessive freedom lead to disturbance of child mental and emotional development. Control should be applied on child behaviors in such a way that it doesn't disturb him and such trust feeling leads to effective and efficient social relationship growth.

Conclusion

Parents play the most important role in developing attachment and progress and creation of any problem and disorder in emotional, social and behavioral development of the children. Interaction and optimal relationship with the child by parents and acquaintances are also important factors in enhancing child's affective, social and behavioral development.

One of the main limitations of the current work was limiting statistical society to primacy school students in one region of Tehran, lack of controlling effective variables such as social, economic and cultural status of the family and rare studies on parental relationship, attachment and its consequences. Thus, it

is recommended more longitudinal studies with larger sample sizes should be conducted and more accurate criteria should be used for identifying attachment styles.

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