Relationship Between Social Interest and Attachment Theory in Childhood and Adolescent Behaviors

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Abstract

The effects of externalizing behaviors (e.g., acting out, delinquency) and internalizing behaviors (e.g., depression, anxiety) in youth can be devastating for all those involved, including the youth themselves, families, schools, and society. Through the reliance of getting to the root of the problem – most often by literally using evolutionary perspectives – it has been found through research that externalizing and internalizing behaviors in children and adolescents are heavily influenced by their attachments to primary caregivers and their sense of social interest. Evolutionary perspectives and Adlerian theory are key concepts in helping us to understand the reason for specific behaviors, and possible suggestions and solutions to successfully work therapeutically with this destructive epidemic. Initiatives to produce more education for parents and schools regarding social interest and attachment theory are crucial, and fostering social responsibilities to children and adolescents are discussed.
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Relationship Between Social Interest and Attachment Theory in Childhood and Adolescent Behaviors

**Introduction**

The pursuit of happiness is an ordinary aspiration reflected by humankind, en masse; shown in the multitude of customary strivings and overcoming struggles that most people display every day. If a primary goal in life is to be happy, then a logical, albeit lofty, goal is to make a world where our children are happy. This seemingly simple realization has morphed into a colossal failure. According to the Centers for Disease Control and Prevention (2013), every year 13-20% of U.S. children struggle with a mental disorder, which inevitably can have dire outcomes. In fact, in 2010 suicide was the second leading cause of death for children aged 12 to 17 years. Boys are more likely to die from suicide than girls, and boys are more likely to have disorders such as: Attention Deficit Disorder, behavioral problems or conduct disorders, Tourette Syndrome, and anxiety. Girls, however, are more likely to struggle with depression and alcohol use disorder. It is important to note that mental disorders do not discriminate - every demographic group is affected by mental disorders in childhood. (para. 1)

The epidemic of high rates of externalizing problems, commonly expressed by aggression, delinquency, and conflicts with the external world, and high rates of internalizing problems, expressed by internal distress, depression, anxiety, and social withdrawal (Weiss, Jackson, & Susser, 1997) is shocking. This jeopardous truth is all too often camouflaged within our hectic, individualistic society. Rudolf Dreikurs (1964), an associate of Alfred Adler, explained the importance of understanding children when he said,

The more parents learn to really understand their children, the more they can help them in reorientating themselves, in developing a more accurate picture of life, and in accepting
social values that are necessary for harmonious co-operation – as well as for a satisfactory fulfillment of their lives. (p. 67)

Understanding the implications that internalizing and externalizing factors of children, adolescents, and ultimately adults, have on our collective view of the world and our daily lives need to be addressed. At the heart of every individual lies a child that wants to be loved, encouraged, and has a sense of belonging. Ideally, everyone needs to have a healthy level of social interest, and a secure attachment. Knowing this, it is our duty to understand and foster the instinctive and fundamental truths of social interest and attachments for the betterment of our society, our children, and the future. In order to fully understand this information, I will first introduce Alfred Adler and Individual Psychology. Next I will review social interest and attachment in relation to internalizing and externalizing behaviors. I will conclude with suggestions found in the literature that can assist parents and society in working with these behaviors through the lens of Individual Psychology and Alfred Adler’s key concepts.

**Alfred Adler: Individual Psychology**

Alfred Adler (1870-1937), the founder of Individual Psychology, was a pivotal figure in psychology and one of the pioneers of the psychoanalytic movement in Austria. Adler believed in the concept of holism; viewing the individual as a whole, as part of his or her environment, and placed great emphasis on the importance of an individual among society. Because of Adler’s holistic view on psychology, and his background as a physician he was an early activist of social equality, which influenced some of his key concepts. The following is an introduction to his key concepts that are important to this paper. They will be further explained and applied within this literature review.
One of Adler’s core ideas was “Lifestyle” or “Style of Life”, which is the term that describes what guides every individual’s life. People’s lifestyles are generally formed around five or seven years of age and are comprised of an individual’s convictions, acting, thinking, and perceiving. Within an individual’s lifestyle lies unique private logic, which is made up of mistaken beliefs that are formed when the lifestyle is formed. Mistaken beliefs and private logic from observing and interpreting the world at a young, such as “the world is unfair”, or “people are not trustworthy”, can heavily guide an individual’s lifestyle throughout a person’s life (Adler, 1964). Lifestyle, mistaken beliefs, and private logic instigate people’s “teleological movement”, which is the term Adler used to describe the way in which people adapt and move through life to achieve their unique goals (Mosak & Maniacci, 1999).

Individuals’ lifestyles and private logic determine how problems in life are faced, which Adler coined as the “tasks of life”. Adler stated that “For a long time now I have been convinced that all the questions of life can be subordinated to the three major problems: communal life, work, and love” (1964, p. 39). Avoiding a task of life (communal life, work, or love) can be accomplished by “safeguarding”, which is the term Adler coined to describe an individual’s tendencies to protect oneself against physical, social, and self-esteem threats (Mosak & Maniacci, 1999). Adler thought that one of the biggest problems with safeguarding tendencies was that it wasn’t socially useful, and that it illustrated low social interest.

Social Interest

The concept of Gemeinschaftsgefühl, or social interest, was perhaps the most influential idea that was theorized, studied, and cherished by Alfred Adler. Simply put, “Social interest is a feeling of belonging and striving for perfection through cooperation and social movement guided by community ideals” (Dixon, Willingham, Chandler, & McDougal, 1986, p. 421). According to
Adler, social interest is comprised of five major components; innate potentiality, empathy, other-directedness, universality, and the broader-sense (Ansbacher & Ansbacher, 1956). Adler (1964) was persistent in expressing the pertinence of social interest in regards to the welfare of civilization:

Our idea of social interest as the final form of humanity – an imagined state in which all the problems of life are solved and all our relations to the external world rightly adjusted – is a regulative ideal, a goal that gives us our direction. This goal of perfection must bear within it the goal of an ideal community, because all we value in life, all that endures and continues to endure, is eternally the product of this social interest. (p. 201)

Paradoxically, while the construct of social interest is inherent to all species and provides movement toward the survival of all living things, the collective degree to which humankind displays this inborn potential is lacking. This can easily be found by the correlations between society’s low levels of social interest and high levels of anti-social behaviors, such as aggression and hostility, which inevitably correlate and contribute to further societal problems. Next are examples of the effects of increased social interest, specifically on behavior.

**Belonging and Social Interest**

The feeling of belonging is such a pervasive part of human existence that it is fundamental to our survival, and specifically how we cope with situations. Since feelings of belonging begin within the framework of family systems, it is no surprise having an adequate sense of belonging within one’s family is important. “Because lifestyle is initially developed in childhood, a person’s perception of his or her fitting in as a child provides information that shows the degree to which the need to belong was met” (Curlette & Kern, 2010, p. 31). The security that individuals feel in their families of origin can be examined using the Being Cautious
(BC) Scale from the BASIS-A Inventory. When an individual scores higher on the BC scale, it typically indicates that the individual has an unstable family of origin, which can lead to being overly sensitive and overly cautious in his or her worldview (Kern, Gfroerer, Summers, Curlette, & Matheny, 1996). Using the BASIS-A Inventory and the Coping Resources Inventory for Stress (CRIS), it was concluded that those who scored lower on BC had higher belonging/social interest on the Belonging/Social Interest (BSI) Scale, and those who scored higher on the BSI scale had significantly higher levels of parental support, coping skills, social support, and less depression and anxiety. These correlations are relevant to the nature of our human existence in that when our family of origin helps us to perceive the world as secure, the likelihood of higher social interest is met, which then aids in us to have better coping skills in life through different avenues such as self-sufficiency and social support.

The Sullivan Scale of Social Interest (SSSI; developed in 1973) has been widely used to assess individuals’ levels of social interest, and has been utilized in numerous studies aiming at investigating correlations between social interest and adaptive or maladaptive behaviors. In one such study, it was found that SSSI scores were negatively correlated with The Massachusetts Youth Assessment Instrument-2nd Version (MAYSI-2), which assesses the prevalence of maladaptiveness in youth. High social interest scores were directly negatively correlated to all seven scales of the MAYSI-2; Alcohol/Drug Use, Angry-Irritable, Depressed/Anxious, Somatic Complaints, Suicide Ideation, Thought Disturbance, and Traumatic Experience. The strongest associations were found in the Angry-Irritable scale with an intercorrelation coefficient of -.584, and in the Depressed/Anxious scale with an intercorrelation coefficient of -.512 (Newbauer & Stone, 2010) indicating a reliable association between high social interest and low negative manifestations.
Happiness and Humor

General happiness and a greater sense of humor can be attributed to a healthy level of social interest as well. In a study by Dixon, Willingham, Chandler, and McDougal (1986) using the Social Interest Index, it was confirmed that those with higher levels of social interest had higher levels of general happiness and a greater sense of humor. Dixon et al. (1986) specifically indicated that, “Humor is a universally accepted indicator of positive mental health, with a sine qua non of emotional adjustment being the ability to laugh at oneself” (p. 421).

In the same study, dogmatism was also found to be negatively correlated with happiness and sense of humor. This finding is indicative of the root of social interest, and of Individual Psychology’s viewpoint on the teleological movement of an individual to either “sink” or “swim”. Dogmatism means, “positiveness in assertion of opinion especially when unwarranted or arrogant viewpoint and/or a system of ideas based on insufficiently examined premises” (Dogmatism, n.d). It is not surprising, therefore, that those displaying high levels of dogmatism would have higher levels of rigid thinking, which leads to narrowing the possibilities of coping with the main tasks of life; work, love, and communal life. On the other hand, those with a less dogmatic point of view see the world with more possibilities, thus become more adapt at managing life, which makes for a happier person with a better sense of humor, and a higher level of social interest.

Social Interest and Connectedness

Since a principle of social interest involves the development of connectedness through a collective viewpoint, the importance of individual’s sense of community is crucial in well-being. In a 32-year longitudinal study (Olsson, McGee, Nada-Raja, & Williams, 2013), positive correlations were found between social connectedness (prosocial behaviors, participation in
groups, life satisfaction), and adult well-being (sense of coherence, positive coping styles, social participation, and prosocial behavior). Childhood social connectedness correlated to adolescent social connectedness (.38), and adolescent social connectedness correlated (.62) to assessed adult well-being at 32 years of age.

In a study conducted by Langille, Asbridge, Cragg, and Rasic (2015), social connectedness was found to prevent adolescent depression, and the all-too-often consequential outcomes of suicidal ideation and suicide attempts. Adolescents, who have more social connectedness, particularly to school, have significantly lower levels of symptoms of depression, suicidal ideations and suicide attempts. For example, Langille et al. (2015) found that “in females, school connectedness was significantly protective for both suicidal ideation (0.69) and suicide attempt (0.72)” [and] “in males, social connectedness was similarly protective for suicidal ideation (0.73) and suicide attempts (.80)” (p. 262).

Having a wider perspective of perceived problems in life is also associated with making proper adjustments to the tasks of life. Adler has described an individual’s adequate adjustment to the tasks of life as living on the “useful side of life”, and crucial in the attainment of social interest (Ansbacher & Ansbacher, 1956). Having the “courage” to face life’s stressors appropriately is crucial to individuals’ well-being, is associated with living a less stressful life, and is correlated to moderating psychological symptoms of stress. Specifically, Crandall (1984) found that low social interest was positively correlated to anxiety, depression, and hostility, while high social interest was negatively correlated to anxiety, depression, and hostility. Crandall confidently asserted that those with higher social interest were “relatively immune to the effects of stress” (p. 172).
Summary

By having an adequate communal environment to where belonging is promoted, the risk of adolescent depression and the resulting fates of suicidal thoughts, attempts, and actualizations may be lessened. Analysis of these results, in addition to the previous associations of social interest to levels of overall happiness, stress, internalizing and externalizing behaviors, it can be argued that Adler’s *Gemeinschaftsgefühl*, or social interest, can be a quasi-medicine to thwart adolescent (as well as adult) mental health issues. Next, I will discuss the effects a lower level of social interest on internalizing and externalizing behaviors.

Low Social Interest

Conversely – and, more haunting -- is the relationship between individuals who display low levels of social interest. It has been found that low levels of social interest are correlated to pathological tendencies and externalizing disorders, such as Conduct Disorder, which is a repetitive and persistent pattern of behavior in which the basic rights of others or major age-appropriate societal norms or rules are violated (American Psychological Association, 2013). This is especially prevalent in boys. For example, Moffitt, Caspi, Rutter, and Silva (2001) conducted a longitudinal study with a population of 1,000 males and females from age three to 21, and found the pervasiveness of conduct disorder among the male subject group. Throughout the 18-year study, prevalence rates of Diagnostic Statistical Manual (4th edition) diagnoses of Conduct Disorder indicated that males had roughly two times higher the rates meeting Conduct Disorder Criteria than of females.

Assessing adolescent boys, Sweitzer (2005) found significant correlations between low levels of social interest and adolescents with conduct disorder. Using the Sullivan Scale of Social Interest (SSSI), adolescents diagnosed with conduct disorder scored lower on all 24
measurements of the SSSI compared to the comparison group of individuals not diagnosed with conduct disorder. The comparison group tended to endorse measurements that were deemed to be socially and community oriented, whereas the Conduct Disorder Group endorsed measurements that were indicative of individualistic-related values.

The correlation between low social interest and externalizing behaviors in youth is not just a passing phase or the antiquated expression of “boys will be boys”. To iterate the point of the phenomena for the lasting effects of low social interest, Fish and Mozdzierz (1988) studied populations from three different mental health agencies in the Chicago area using the SSSI in comparison to individuals’ scores assessing depression, anxiety, hostility, personality disorders, and expectancy of success. The age range was from age 18 to 71, with an average age of 45.24 years. They found that those with lower scores of social interest had significantly higher scores of depression using the Beck Depression Inventory and the Depression Scale of the Multiple Affect Adjective Check List, higher scores of anxiety using the Anxiety Scale of the Multiple Affect Adjective Check List, a higher incidence of personality disorders using the Ability Testing Sixteen Personality Factor Questionnaire, and scored higher levels on the hostility scale using the Hostility Scale of the Multiple Affect Adjective Checklist. Furthermore, it was found that those who scored low on the SSSI had low scores in the area of expectancy of success using the Generalized Expectancy for Success Scale.

**Internalizing Behaviors**

Although there is a clear indication that low levels of social interest can lead to externalizing behaviors, such as conduct disorder, the more quiet (and possibly more dangerous) expression of low social interest can be found in the occurrence of internalizing behaviors, such as depression, anxiety, and suicide. The correlations between low social interest and high levels
of depression, anxiety, and suicide are striking. Using a trajectory model in a longitudinal study, Nantel-Vivier, Pihl, Cote, & Tremblay (2014) found that throughout the nine years of the study, individuals who showed low levels of social interest had higher levels of depression and anxiety in comparison to individuals with higher social interest. Furthermore, the joint trajectories of social interest with anxiety and depression were relatively constant throughout the nine-year time period. Interestingly (and sadly) the trajectories that increased the most throughout time, were those with the highest levels of depression and the highest levels of anxiety.

Higher rates of depression and anxiety are connected to higher rates of further depressive indicators with positive correlations of .497 for somatic complaints, .601 for thought disturbances, and .577 for suicidal ideation (Newbauer & Stone, 2010). Furthermore, while depression and anxiety are linked to somatic complaints, thought disturbances, and suicide – all three of these demonstrations of depression are associated with low social interest. The relatively high negative correlation of social interest and anxiety with suicidal ideations at -.322 is perhaps the most discouraging since it can stand in a swarm of a multitude of other problems, such as the internalizing factors previously described, and alcohol/drug abuse, and trauma.

**Feelings of Inferiority**

Depression is a symptom of low social interest, and can be linked to feelings of inferiority that may manifest into an inferiority complex (Adler, 1964). As explained by Adler, “The inferiority [symptom] complex is the presentation of the person to himself and others that he is not strong enough to solve a given problem in a socially useful way” (Ansbacher & Ansbacher, 1956, p. 258). This should not be confused with feelings of inferiority, which is inherent in humankind. Feelings of inferiority can actually move us toward the goal to maintain life and to be evolutionarily motivated, whereas inferiority complexes are consequently
debilitating to individuals (Ansbacher & Ansbacher, 1956). The constant perceived threat of external factors to one’s self-esteem can lead to the tangible withdrawal from life events and situations (Slavik & Croake, 2006). Consequently, according to Individual Psychology, the inevitable goal of depression, anxiety, and suicide is a safeguarding technique for individuals to escape life, which proves to be naturally socially disinterested. Just as the level of an individual’s social interest can explain a lot about his or her inner world, an individual’s attachment type can do the same. Attachment Theory, an innate formation like Social Interest, will be explained next.

**Attachment Theory**

Attachment Theory’s basic foundation was formulated first by John Bowlby, who explained his thoughts in terms of separation, deprivation, and bereavement in regards to the mother-child bond. Mary Ainsworth extended Bowlby’s theory by using empirical testing methods to formulate the idea of the importance of the mother-child bond. Specifically, Ainsworth developed the specific infant-maternal attachment patterns (Bretherton, 1992). Collaboratively, but independently, Bowlby and Ainsworth changed the way in which we view the pertinence of the worldview of infants, especially toward their caregivers. Ainsworth (1979) identified that although attachments were originally studied in terms of mother-infant interactions, these attachments can also be made from other caregivers, such as fathers, grandparents, aunts, and day-care providers. Furthermore, and significantly, the basic principle of attachment that starts at the onset of all our lives extends throughout adolescence, and into adulthood forming a relationship record that carries us through life.

Through Ainsworth’s empirical studies with infants, three basic attachment styles were found; avoidant, secure, and anxious/ambivalent. Avoidant attachment style refers to infants
who are indifferent to their caregivers, securely attached infants seek comfort from caregivers, and infants with anxious and ambivalent attachments desire contact with caregivers, but resist comfort when consoled (Ronnlund & Karlsson, 2006). These attachments are essentially formed by an infants’ interpretations or actual representation of their caregivers being rejecting or accepting, unloving or loving, and unavailable or available (Murris, Meesters, & van den Berg, 2003).

Ainsworth found that babies that exhibited avoidant behaviors had mothers who were averse to various forms of comforting, which then makes the infant build up a defensive tactic of avoiding any situation that would increase anger and conflict. And, anxious/ambivalent infants display high levels of anxiety at the onset of separation of the caregiver figure, but ambivalent upon reunion. This generally makes the caregiver in the situation confused and/or frustrated, which perpetuates the anxiousness on both sides (Ainsworth, 1979). These two attachment behaviors have been hypothesized by Ainsworth as subtleties in caregiving, such as a caregiver not picking up on the infant’s cues (e.g., crying, fussing) fast enough or appropriately.

According to Weber (2003), “The disruption/loss, unresponsiveness, or unpredictability of an attachment figure may produce anger, depression, anxiety, and sadness. Defensive exclusion occurs when accessing stored experiences results in extreme anxiety” (p. 248).

In contrast to avoidant and anxious/ambivalent attachments, a securely attached infant is generally better adjusted and able to cope with life easier. Weber (2003) explains this as, “A secure child carries an internal assurance that he or she is worthy of caring and love. Secure internal working models produce a balance of self-reliance and help-seeking capabilities” (p. 248). Ainsworth found that babies who had secure attachments with the mother depended on the mother as a “security base” and were generally less angry and more cooperative than the infants
with avoidant or anxious/ambivalent attachments (Ainsworth, 1979). Since infants that have a secure attachment with their caregivers have a better foundational working model of the world around them, they naturally are more autonomous, confident, and easygoing.

**Attachment Theory and Social Interest**

The connections between Individual Psychology, specifically to Social Interest and Attachment Theory are prominent. Weber (2003) stated:

> Attachment motive parallels Adler’s ideas of social interest and Attachment Theory and Individual Psychology both emphasize innate, developed interactions with caregivers, Furthermore, the degree to which children are able to meet their needs affects future relationships with other humans, and in essence, their level of social interest and ability to complete life’s tasks. (p. 247)

Without explaining the importance and salience of Attachment Theory as it relates to Social Interest, and the effects that it has on externalizing and internalizing behaviors, would be an injustice in trying to search for the truth, or (literally) the root of, how to help so many people that are need of help.

Attachment Theory and Social Interest are both comprised from universal elements, especially from an evolutionary and ecological standpoint. Humans are predisposed to have lasting relationships that benefit the insurance of our species. From an Attachment Theory perspective, this is evidenced in infants throughout cultures who display proximity-seeking behaviors, which increases the chance of survival. From an Individual Psychology perspective, the importance of social interactions and social bonds that are formed, especially in childhood, are critical in the maintenance of our species because we must all work together to survive
(Weber, 2003). Without these built-in mechanisms of social interest and attachment, the survival of our species, or any species for that matter, would be impossible.

**Lifestyle**

These foundational schemas that naturally occur in humans occur at a very young age. At age three or four children have already formed a solid working-model of his or her attachment style according to Attachment Theorists, and by age four or five children have developed a “style of life”, or “lifestyle”, according to his or her “private logic” according to Individual Psychology Theorists (Weber, 2003). Knowing the very young age that these systems take effect are crucial in understanding an individual as he or she relates to others – on a personal level and from a psychological viewpoint.

**Inferiority**

In regards to feelings of inferiority, Adler noted that “The degree of the feeling of insecurity and inferiority depends primarily on the interpretation of the child” (Ansbacher & Ansbacher, 1956, p. 116). These feelings then manifest themselves into a whole working system of self-appraisal and self-worth. Adler noted that a key consideration in connection to feelings of inferiority is an unfavorable environment, and the importance of goal-directedness. Specifically, when a child feels unusually inferior, he or she feels as if the world is working against him or her due to any kind of unfavorable environment, such as a mother with depression or anxiety. This too, ties in with Attachment Theory in that a child who perceives his or her mother as less than attentive may develop anxious/ambivalent or avoidant attachment styles. When the goals of an infant are not met fully via standards of the child’s perception, feelings of inferiority manifest, attachments become hindered, thus crumbling the foundational blocks of social interest.
Safeguarding

Safeguarding techniques, found both in Adlerian Theory and Attachment Theory, are evidenced throughout an individual’s life, but are especially apparent in childhood. In Adlerian Theory, “safeguards protect the self-esteem from threats by outside demands and problems of life” (Ansbacher & Ansbacher, 1956, p. 265). In essence, avoidant attachments and anxious/ambivalent attachments are merely innate safeguarding techniques for infants in order to save their self-esteem. Problematic behaviors arise, though, when these safeguarding techniques develop into rigid schemas about the world, and inherently involve self-serving properties – thus failing at social interest.

Adjustment

The concept of an individual’s self-worth and self-esteem can be tied to an individual’s level of adjustment. A well-adjusted individual displays an aptitude for cooperation, empathy, and coping-skills, according to Adler (Ansbacher & Ansbacher, 1956. Similarly, an individual with secure attachment is well adjusted because he or she is able to navigate the world in a safe and confident manner (Weber, 2003). Furthermore, self-worth has been found to have a profound effect on negative social interactions in youth, such as bullying. Simsek (2013) found that individuals with secure attachments tended to have higher levels of personal self-esteem and self-worth over those with insecure attachments. In contrast, those with insecure attachments rated more importance in collective self-esteem (honoring the importance of their self-worth via the contributions of others’ praise or accolades) over personal self-esteem. These findings indicate that those with a higher reliance on personal self-esteem, rather than collective self-esteem have a better ability to cope with environmental forces and an intrinsic sense of motivation, which all lead to a better level of life satisfaction.
Attachments and Empathy

The definition of empathy is “the feeling that you understand and share another person's experiences and emotions: the ability to share someone else's feelings” (Empathy, n.d.). But from an Adlerian perspective, empathy is parallel to living and breathing – a critical element of life. From the beginning of all our lives, the manifestation of empathy is necessary for proper development. According to Adlerian Theory, “empathy encourages the child’s self-concept to develop in a healthy, prosocial manner, but the awareness of consequences and responsibility encourages a resilient and cooperative self-concept that takes into account others’ needs and perspectives (Mosak & Maniaci, 1999, p. 51).

Panfile and Laible (2012) studied the significance of attachment in correlation to empathy in preschool aged children. They concluded that attachment does indeed have moderate significant correlations (with 1 or -1 being an exact correlation) to empathy (.41), and emotion regulation (.53). The findings of Panfile and Laible are interesting in that they found an elaborate intercorrelation relationship between attachment, emotion regulation, negative emotionality, empathy, and prosocial behavior. Ideally, this is how it works: strong attachments correlate to emotion regulation (.53), which then correlates to empathy (.74), which then correlates to prosocial behavior. Conversely, positive attachments are negatively correlated to negative emotionality (-.58). And, when prosocial tendencies are lower, antisocial behaviors increase.

So, why is this all so important? Emotion regulation, prosocial behavior, and empathy are all linked to life-satisfaction. In a study done by Caprara and Steca (2005) it was determined that prosocial behavior correlated to life-satisfaction in all four age groups; young adults (.19), adults (.17), middle aged adults (.18), and elderly adults (.28). Although these are weak
correlations, they still indicate a positive relationship. Thus, these prosocial behaviors are directly linked to self-efficacy, which is “the foundation of human motivation, well-being, and personal accomplishments” (Bandura, Capara, Barbaranelli, Pastorelli, & Regalia, 2001, p. 125). When an individual feels he or she can successfully handle positive or negative emotions, then more effective interpersonal relationships ensue, which results in a more satisfying life. “Because depression, loneliness, and shyness are all negatively correlated with life satisfaction, it is reasonable to suppose that perceived efficacy to manage negative effect, as a robust deterrent to despondency, is a particularly influential determinant of well-being” (Capara & Steca, 2005, p.209).

The similarities between Attachment Theory and Adlerian Theory are so profound that Peluso, Peluso, Buckner, Kern and Curlette (2009) found a distinct correlation between the two systems. By using the BASIS-A Inventory to measure levels of the Adlerian concept of Lifestyle and the Experiences in Close Relationships Inventory (ECR) to measure attachment styles, it was determined that when ECR scores were low in anxiety and low in avoidance, BASIS-A Inventory scores were high in social interest. Conversely, those who scored high anxiety and high avoidance had low social interest. Furthermore, it was revealed that 7 of the 10 scales (Belonging-Social Interest, Going Along, Taking Charge, Wanting Recognition, Being Cautious, Harshness, and Striving for Perfection) in the BASIS-A Inventory could generally anticipate Anxiety and Avoidance Attachment styles indicating that the Adlerian concept of Lifestyle and Attachment Theory have strong connections.

Overall, the similarities and correlations between Adlerian Theory – specifically, social interest – and Attachment Theory are unique and are a motivating facet of psychological understanding. Since both theories and concepts have firm cores that begin in childhood, it is an
impetus for us to establish and consider the notion that perhaps true psychological well-being starts in the very early stages of life. Perhaps if there are enough education and preventative measures created in society regarding the importance of every child’s fragile ecosystem, our children and adolescents would not display the levels of externalizing and internalizing behaviors that wound our youth.

**Effects of Secure and Insecure Attachments**

Ideally, it would be nice if children and adolescents – and all people, for that matter – can live life with secure attachments, but knowing the critical timeframe and the highly precarious elements that are involved in attachments, the occurrence of insecure attachments are inevitable. Furthermore, Higgins, Jennings, Mahoney (2010) stated,

> On one hand, individuals high on attachment are likely to see themselves as having a high self-worth that is deserving of love, and they are likely to see the world as being dependable, predictable, or trustworthy. On the other hand, individuals low on attachment are likely to see themselves as not having a self-worth and the world as not being very dependable, predictable, or trustworthy. (p. 658)

These unassuming and often silent traits exist in all of us, and provide the momentum that guide our behaviors, push us through life, and ultimately construct our uniqueness – for the good or bad. There are a handful of human behaviors that have been studied in regards to attachment types, especially internalizing and externalizing behaviors. Especially since attachment type presentations are so clearly evident in childhood and adolescence due to the generally simpler life issues that accompany that age, the studies of correlations on childhood and adolescent internalizing and externalizing behaviors to attachment types are plentiful.
Attachment in Children and Adolescents

Predictions on attachments are even evident from age 21 months to five years of age; among the infants in a group of 3,000 who showed insecure attachments to their mothers predicted internalizing and externalizing behaviors at age five. Specifically, the five-year-olds with secure attachments scored lower in every subscale than those with insecure attachments on all The Child Behavior Checklist (CBCL) scales; externalizing, internalizing, immaturity, and somatoform. This indicates that the children who were securely attached presented less problems on the CBCL. For example, secure children scored .41 on the externalizing scale, whereas the insecure children scored .54, and secure children scored .32 on the internalizing scale while insecure children scored .44 (Pierrehumbert, Miljkovitch, Plancherel, Halfron, & Ansermet, 2000).

The connection between attachment styles with externalizing and internalizing behaviors is also evident in the adolescent population. In a study of 742 adolescents, aged 12 to 17 years, those who reported secure attachments scored considerably lower on the internalizing, anxious-depressed, somatic complaints, externalizing, aggressive behavior, and delinquent behavior scales on the Youth Self Report (YSR). Interestingly, the largest discrepancies among the attachment types and the YSR were in the internalizing and anxious-depressed scales with the highest score being 15.55 and the lowest score being 4.39. In regards to exhibiting internalizing behaviors, youth with secure attachments had scores of 7.4, 15.55 for youth with avoidant attachments, and 15.31 for youth with anxious/ambivalent attachments. Correspondingly, youth with secure attachments had scores of only 4.39 in the anxious-depressed scale, whereas youth with avoidant and ambivalent/anxious attachments had scores of 10.85 and 10.65, respectively (Murris, Meesters, & van den Berg, 2003).
Depression

In a 30-year longitudinal study examining the effects of attachment strength to major depression and anxiety in children and youth, it was concluded that the stronger the attachments children and youth had with their caregivers, the lower the rates of major depression and anxiety disorders were reported (Jakobsen, Horwood Fergusson, 2012). Specifically, when testing a population of 15-year-olds, it was found that low levels of parent-child attachments (in the 1-10 percentile range) had a correlation to major depression of 39.0% and to anxiety of 26.5%. On the other end, when parent-child attachments were high (in the 71-100 percentile), Major Depression went down significantly to 18.2%, and Anxiety Disorders went down to 12.3%.

Major Depression is a major factor in adolescent mental health for many reasons; it is a time of great change in a person’s life with increasingly more complicated relationship building, school transitioning, physical changes, and abilities to self-reflect. Accordingly, “Perhaps for the first time they are able to hold alternative and opposing models of themselves and their parents, because they have increased capacity for abstract thought” (Shaw & Dallos, 2005, p. 411). It can further be hypothesized that adolescents’ brain capacity begins to start developing a greater moral compass, which can more readily grasp “global problems”, which can lead to more negative or depressive thinking.

Suicide

The worst end result of depression is suicide. On a positive note, there are fortunately numerous correlations that can help us to investigate this epidemic further. Naturally, there are correlations between adolescent suicide attempts and psychiatric characteristics. In studying the correlations between adolescent psychiatric characteristics versus adolescent suicide attempts/no suicide attempts found that the biggest correlation was found in Major Depressive Disorder.
Adolescents who attempted suicide had a rate of 47% for Major Depressive Disorder, whereas the no attempt group had a rate of 25% (Sheftall, Mathias, Furr, & Dougherty, 2013). Even though the rates are much lower in the no attempt group, it is still an alarmingly high rate.

In the same study, attachments were also investigated to find out how suicide attempts relate to the relationships that adolescents foster. Coinciding with logic, adolescent attachments made a big difference in suicide attempts. Maternal attachments, paternal attachments, and peer attachments were all stronger in the no attempt group than in the attempt group (Sheftall et al., 2013). This gives another good piece of evidence that can help us understand how important fostering strong attachments are in our youth. In the face of the discouraging subject of depression, it is clear that having well-built attachments and relationships can help to guard against the daunting effects of depression, and the unfortunate consequence of suicide.

Confidence

To complicate matters for an already complicated period of life for an insecurely attached adolescent; there are many facets to an insecurely attached adolescent according to a study by Ronnlund and Karlsson (2006). They used the Attachment Style Questionnaire (ASQ) to study qualities that include confidence, discomfort with closeness, relationships with others, need for approval, and preoccupation with relationships encompass the makings of a securely or insecurely attached individual. This is especially apparent in insecurely attached individuals who display internalizing behaviors. Confidence is negatively correlated with internalizing symptoms (-.32), and positively with discomfort with closeness (.44), need for approval (.32), and preoccupation with relationships (.51) These correlations shed some light into the inner workings of an insecurely attached individual’s mind, and show the intricacy of potential pitfalls that may occur.
Commitment Strength

Yet another discovery of the importance of secure and insecure attachments among adolescents coupled with internalizing behaviors, such as depression and anxiety, is that of commitment strength. Simply explained, commitment strength functions as a process for self-regulatory systems, coping skills, and autonomy (Pace & Zapulla, 2011). Commitment levels and qualities can be measured by the Ego Identity Process Questionnaire (EIPQ, Balistreri et al. 1995) using domains such as “I have evaluated many ways in which I fit into my family structure”, “I am very confident about what kinds of friends are best for me”, and “I have definitely decided on the occupation I want to pursue” (p. 857). Using this scale, Pace and Zapulla (2011) found that commitment strength was correlated to internalizing behaviors among adolescents aged 16 to 18 years. Of particular interest is that commitment strength did not correlate with externalizing behaviors among these adolescents. This is rational, however, since commitment strength is an internal mechanism that holds a great deal of power over one’s own ideas of self-worth. The data shows that commitment strength negatively correlated to avoidant attachment styles (.21), anxious attachment styles (.23), and internalizing behaviors (.28). This indicates that high levels of commitment can serve as a safety net for insecure attachment repercussions, and internalizing behaviors.

These results may influence the importance of individuals’ power of thinking; if an individual believes that there are choices, he or she can feel confident about the world and are adept in living in a system of individual values, then one will likely have a better outlook on relationships with others, and with oneself. “Identity development could be considered as strictly linked to strength and quality of commitment: the more it is strong and resulting from a
self-chosen strategy, the more adolescents will be likely to develop a well-adapted identity” (Pace & Zappulla, 2011, p. 860).

**Delinquency**

Attachment, among commitment, involvement, and belief, are the elements that comprise the framework of Hirschi’s Social Control Theory, which states that what thwarts deviant behavior are the bonds that we have with others and our own belief systems (Pace & Zappulla, 2011). This is of particular interest in regards to Attachment Theory and Delinquency. In a study by Gault-Sherman (2012), it was found that the outlying factor among all other factors tested for predicting juvenile deviance was attachment. Parental attachment was shown to have a negative correlation to overall delinquency (-0.145), destruction of property (-0.142), and violent delinquency (-0.206). Interestingly, the other factors, parental involvement and parental monitoring, used to predict delinquency had little effect on the outcome of juvenile delinquency with no correlation effects. This coincides with other evidence that points to strong parental attachments’ lowering deviance in children and youth. Similarly, attachment was found to be the best predictor of adolescent antisocial behavior independently, and above the other measures of parental positivity, monitoring, and parental cognitions (Scott, Briskman, Woolgar, Humayun, O’Connor, 2011).

The correlations between physical aggression, binge drinking, tobacco use, marijuana use, depression, and self-harm are important to note. Since all six categories are positively correlated, it is critical in understanding the roots of these correlations. Herrenkohl, Catalano, Hemphill, and Toumbouro (2009) examined this correlation between adolescent externalizing and internalizing behaviors with attachment, and found that family attachment was negatively correlated to all six of these categories. The correlations between the six categories were
striking; binge drinking (-.15), tobacco use (-.17), marijuana use (-.16), depression (-.48), and self-harm (-.30). Interesting to note is that age, gender, and race had no such correlations with these negative behaviors. While attachments are negatively correlated to these behaviors, so are school commitment and academic achievement, which makes it clear that all these facets are multifariously connected – the one common denominator in all of this is relational attachments.

These findings can all be explained in the assumption that “adolescents with secure representations may be more vested in social structures and attentive to and appreciate the rights of others; their attachments to primary caregivers may foster their attachment to cultural norms rejecting antisocial behavior. Alternatively, adolescents with secure attachments may have learned, through a history of security-promoting interactions with caregivers, the emotional regulation strategies that may protect against angry, dysregulated interactions that underlie poor adjustment” (Scott, et al., 2011, p. 1061).

**Summary**

The details of all these systems working together may seem complex by nature, but in reality – the common thread throughout all these is actually relatively simple -- relationships matter. The relationships that are conceived from the time an individual is born to the time an individual reaches adolescence are so incredibly important to one’s self-worth, decision-making, coping-skills, and adaptability. Streamlining all these concepts into one statement makes thing simple; externalizing behaviors, such as deviance, occur when family bonds are not ideal, and internalizing behaviors occur when coping skills are not adequate due to negative parental affectivity (Pace & Zappulla, 2011). In a nutshell, and aligned with Alfred Adler’s theory of Individual Psychology, the quality of the relationships that people have determines the quality of life one has.
Lasting Results of Attachment Types

Just as attachments have profound effects for children and adolescence, attachments have serious effects during adulthood as well. The frequent amount of insecure attachments can be attributed to numerous externalizing and internalizing behaviors, and the consequent lifelong difficulties. The prevailing trend of attachments “sticking” throughout life can be found in the fact that adults’ attachment scores are similar to children’s attachment scores. In a research study done by Mickelson, Kessler, and Shaver (1997) it was found that the adult population surveyed displayed similar results to children’s attachment statistics; 59% secure, 25.2% avoidant, and 11.3% anxious. Attachments were also directly correlated to psychiatric disorders in adulthood. Secure attachments were negatively correlated to mood disorders, anxiety disorders, and substance use, whereas avoidant and anxious attachments were positively correlated to all of these adult psychopathologies. For example, major depressive episodes were negatively associated with secure attachments (-.23), and positively associated with avoidant (.42), and anxious attachments (.34), generalized anxiety disorder correlated similarly with secure attachments (-.28), avoidant (.60), and anxious (.44). In addition, alcohol dependence correlated with secure attachments (-.13), avoidant (.28), and anxious (.25).

Simple, but significant characteristics of adults have been found to be closely tied to attachment styles, such as self esteem, internal locus of control, and openness to experience. All three of these vital dimensions of personality are expressions of an individual’s colorful, inner world, and are strongly associated to childhood experiences. These personality traits were also a reflection on an individual’s tendency to have internalizing or externalizing disorders, as previously mentioned (Higgins et al., 2010). Doing research on adult attachments, Mickelson, Kessler, and Shaver (1997) found that secure attachments were positively correlated to self-
esteem (.17), internal locus of control (.11), and openness to experience (.15) while avoidant attachments were negatively correlated to self-esteem (-.32), internal locus of control (-.10), and openness to experiences (-.12). Finally, anxious attachments were also negatively correlated to self-esteem (-.37), internal locus of control (-.18), and openness to experience (-.10). These traits have a clear and direct impact on an individual’s management of his or her daily life.

The repercussions of having negative self-esteem, the inability to view one’s own decisions as controllable, and the hindrances of not exploring the world coupled with mood disorders, anxiety disorders, and substance use is profound. Through an Adlerian lens, these all can be found hidden in the simple, yet complex world of what we innately all strive for – belonging, safety, and significance – which can be examined in the detailed meshing of our social relationships, especially romantic love.

Hazan and Shaver (1987) found that securely attached adults rate their satisfaction of romantic partnerships as long-term, happy, friendly, and trusting. They also found that insecurely attached adults have a higher probability to characterize relationships by fear of intimacy, emotional highs and lows, jealousy, obsession, and desire. Consequently, these characteristics of relationships were found to be linked to relationship longevity. On average, the securely attached adults had an average of 10.2 years in a committed relationship, adults with avoidant attachments had an average of 5.97 years, and anxiously attached adults had an average of 4.86 years in a relationship. Moreover, 6% of the secure group had divorced, while 10% of the anxious group and 12% of the avoidant group divorced.

The somewhat silent, but salient aftermath of having insecure childhood attachments is immense, and clearly has effects that linger into adulthood, such as low self-esteem, faulty life choices, broken relationships, and psychopathological behavior. It is also clear that these
expressions are formed at an early age, and perhaps even in infancy. Furthermore, the tendency for children to display internalizing and externalizing behaviors, such as anxiety, depression, conduct disorders, and delinquency are generally carried throughout life – a different version, perhaps– forming a vicious cycle of struggles that individuals of securely attached relationship history do not generally encounter.

**Parenting Styles and Attachment Types**

It is clear that attachment types have a high degree of salience in regards to one’s life and the evidence of its lifelong effects gives rise to many questions. One such question is “how do people become securely or insecurely attached?” While there is a multitude of various hypotheses, studies, and research that attempt to answer this question – one thing is for sure – parenting plays a predominant role in every kind of attachment in question. Naturally, since attachments are formed at a young age, and by way of caregivers, it is not surprising that different styles of parenting make a marked difference in attachment types.

**Negative Parenting**

The effects of the negative parenting on children’s empathy, moral reasoning, and overall antisocial behavior is explained by Van IJzendoorn (1997).

Parents who model aggression hamper the regulation of negative emotions such as feelings of anger and frustration. Insecure children have only partially fulfilled the basic need for trust and confidence. They are inclined to monitor the attachment figure carefully, and to be absorbed by the unfulfilling attachment relationship. As a consequence, they are not able to develop genuine trust and empathic concern for others. Less confidence in self and others, combined with less optimal regulation of negative
emotions, may lead to lower levels of moral reasoning and to mild forms of aggressive and antisocial behaviors. (p. 721)

Even in infancy, the hallmarks of attachment types are configured through the manners and traits that the caregivers display. In a recent research study, Edwards and Hans (2015) found that at the young age of 2½ infants have a higher likelihood to develop internalizing, externalizing, and co-occurring internalizing/externalizing problems when there is a display of hostile parenting, family conflict, and maternal anxious/depressive symptoms (Edwards & Hans, 2015). Specifically, they found that the correlation of hostile parenting, family conflict, and maternal anxious/depressive symptoms with internalizing behaviors to be 37.07%, externalizing behaviors was 24.14%, and co-occurring to be 31.11%. These findings suggest that infants who are consistently criticized can begin to internalize their own self-worth as negative based on what they are learning from their parents’ affectations.

Since internalizing and externalizing behaviors are so highly intertwined with parental rearing, it has been evidenced that these trends prevail throughout time. Roelofs, Meesters, ter Huurne, Bamelis, and Muris (2006) found that emotional warmth, rejection, overprotection, and anxious rearing of both the father and the mother were all correlated to anxiety, depression, and aggression in adolescents aged 9 through 12. Strikingly, the biggest factor for adolescent anxiety, depression, and anxiety was parental rejection. The numbers are plainly relevant to the discussion of parental influence on children’s interpretations of love and acceptance. In regards to rejection by the mother, the correlations were moderately high with rates of .44 to anxiety, .405 to depression, and .48 to aggression. Similarly, rejection by the father was correlated .415 to anxiety, .415 to depression, and .44 to aggression.
The antithesis to these dismal numbers is the display of emotional warmth by parental figures. Roelofs, et al. (2006) found that emotional warmth by mother and father was negatively correlated to anxiety, depression, and aggression; mothers’ displays of emotional warmth was negatively correlated to anxiety (.13), depression (.175), and aggression (.26), whereas fathers’ emotional warmth was negatively correlated to anxiety (.215), depression (.235), and aggression (.195).

In a similar study of children aged 12-18 by Murris, Meesters, & van den Berg (2003), the effects of emotional warmth, rejection, and overprotection were found to be correlated to the Youth Self Report (YSR) variables; internalizing, anxious-depressed, somatic complaints, externalizing, aggressive behavior, and delinquent behavior. Once again, emotional warmth of both father and mother were negatively correlated to all of the variables in the YSR, whereas rejection and overprotection of the mother and father were positively correlated to all the variables in the YSR. Huge discrepancies fall in the areas of internalizing behaviors; mothers’ emotional warmth (.19), mothers’ rejection (.36), overprotection (.34), fathers’ emotional warmth (.29), rejection (.42), and overprotection (.28). In addition, externalizing behaviors were correlated to mothers’ emotional warmth (.26), rejection (.46), overprotection (.31), fathers’ emotional warmth (.30), rejection (.48), and overprotection (.26).

In a longitudinal study done by Edwards and Hans (2015) of externalizing and internalizing behaviors, groups were tested at 2½ years-old, and then re-tested at age 5. It was found that one of the highest predictors of co-occurring internalizing and externalizing behaviors of the children were in maternal symptoms of anxiety and depression. At age 2½, co occurring behaviors were correlated to maternal anxiety/depression by 13.82, and 13.86 at age 5. To put this number into perspective, familial SES (socioeconomic status) was negatively correlated to
co-occurring behaviors at age 2 ½ (-.27) and again at age 5 (-.28). Another significant correlation that was found was the effects family conflict has on co-occurring behaviors of these children. At age 2 ½ family conflict was correlated to co-occurring behaviors by 3.86, and at age five the correlation rose to 4.26.

In the same study, an interesting correlation was also found between hostile parenting and all four categories studied; internalizing behaviors, externalizing behaviors, co-occurring behaviors, and no behaviors. Edwards and Hans (2015) found that respondents who reported the most indices of hostile parenting also reported the most internalizing behaviors of their children at age 2 ½ and at age five (37.04% and 30.30%, respectively). In comparison, respondents who reported no internalizing or externalizing behaviors of their children had relatively low levels of hostile parenting reports; at age 2 ½ (17.54%) and at age five (20.59%).

Mother’s Attachment

Studying mothers, in particular, in relation to children has been popularly used to demonstrate parenting characteristics and attachment styles. Stevenson-Hinde, Chicot, Shouldice, and Hinde (2013) found that maternal sensitivity was a huge determinant of anxiety and attachment. The study implemented numerous experiments to demonstrate levels of maternal anxiety, child behavioral inhibition, maternal interactions, and attachment security ratings. Positive maternal style at home, comprised of ratings of mothers’ sensitive responsiveness, meshing, enjoyment of child, and gentleness, was positively correlated to secure attachments of the infants (.24), negatively correlated to avoidant attachment (-.61), and negatively correlated to ambivalent attachment (-.05).

Furthermore, overall sensitivity scores, which included maternal style at home, sensitive framework, limit setting, allowance of autonomy, criticizing, and tension making were all found
to be correlated to attachment styles. Overall sensitivity of the mother was correlated to the three attachment styles; secure (.31), to avoidant (-.16), and to ambivalent (-.34). These results indicate that mothers who foster a sensitive, encouraging, and responsive relationship approach with their children have children with healthier and secure attachments (Stevenson-Hinde et al., 2013). Similar results were found in another study by Pederson, Bailey, Tarabulsy, Bento, and Moran, (2014), who tried to replicate Mary Ainsworth’s Strange Situation Experiment; mothers who had securely attached infants had a mean sensitivity score of .57, whereas mothers who had insecurely attached infants had a mean sensitivity score of -.12.

Interestingly, Stevenson-Hinde, et al. (2013) found that overall sensitivity scores also correlated to the ratings of the mothers’ anxiety levels. Mothers that had low ratings of anxiety correlated with maternal style at home (.55), sensitive framework (.38), limit setting (.43), allowance of autonomy (.36), criticizing (-.35), and tension making (-.36). On the flip side, mothers’ high anxiety ratings correlated with maternal style at home (-.51), sensitive framework (-.31), limit setting (-.26), allowance of autonomy (-.23), to criticizing (.13), and to tension making (.40). Clearly, these results show that mothers who display higher levels of anxiety are less apt to provide the sensitive nurturing that children need to obtain secure attachments.

Maternal depression, like maternal anxiety, has negative impacts on children’s attachments as well. In a longitudinal study with a population of depressed and non-depressed mothers, maternal depression was found to have negative consequences for the children’s assessments at age 20 months, at age 36 months, and at age 48 months (Toth, Rogosch, Sturge-Apple, & Cicchetti, 2009). Maternal depression was positively correlated to child attachment insecurity at 20 months (.38), which correlated to child attachment insecurity at 36 months (.23). The child attachment insecurity at age 36 months also positively correlated to child negative
representations of self at age 48 months (.25). Furthermore, in the three-step longitudinal study, mothers’ ratings of depression symptoms remained relatively constant with correlations of .77 from age 20 months to age 36 months, and .72 from age 36 months to age 48 months.

In a similar study of clinically depressed mothers, non-depressed mothers, and their children ranging in age of three to six years, the effects of maternal depression were found to have profound effects on children’s capacities to successfully thrive. Jones, Field, and Davalos, (2000) found that the children of the mothers who had depressive symptoms showed less empathy and less prosocial behaviors than the non-depressed group of infants. Also, the depressed group and non-depressed group had significant differences in maternal ratings of their children; the depressed group rated their children as having higher externalizing behaviors, internalizing behaviors, anxiety, conduct disorder, hyperactivity, and impulsivity than the mothers with no depressive symptoms. These findings were explained by Jones et al. (2000) in that “children of depressed mothers respond differentially to social and cognitive material. These differences may originate from either a genetic and/or prenatal disposition or from early learning within their environment” (p. 202).

Suffice to say, most studies and literature regarding attachments involve maternal attachments since mothers are literally the lifeline for babies. The effects that paternal attachments have on children should not be ignored either. In a study by Brown, Mangelsdorf, and Neff (2012) it was found that father-child attachment security was relatively constant with a correlation of .25 from 13 months to 3 years of age. More importantly though, is that father-child sensitivity was the best predictor of secure father-child attachments with correlations of .31 at age 13 months and correlations of .53 at 3 years of age. Interestingly, father involvement was
less important for secure attachments than father sensitivity, concluding that the quality of father-child interactions is more important than the quantity of time.

**Future Remedies: Increasing Secure Attachments**

It is fair to say parents do not want their children to be anti-social, depressed, anxious, hostile, or fair poorly in life. These outcomes, however, are all too common in our society. Knowing that secure attachments can thwart undesired results in infants, children, youth, and adults, it is only logical that we must strive to provide secure attachments straight from the beginning. But, how can we do this?

There are attachment parenting practices that can help to enhance secure attachments in infants, such as co-sleeping, breastfeeding on demand, holding, and responding quickly to crying (Miller & Commons, 2010). These practices have at times been controversial by some because of the presumptuous association between these parenting practices and that of a pampered child, which is most often viewed negatively. Even Adler (1964) described the pampered child worse off than a neglected child, and as “ill equipped for solving life’s problems in later years” (p. 42).

Although attachment parenting practices are ideated by some to be over-protective, they have a behavioral and evolutionary background that hold substantial weight in regards to being a viable option to increase secure attachments, and actually have the opposite effect of a pampered child. All of the attachment parenting practices have a physiological benefit for both parent and child, but have psychological benefits as well. Most notably, the benefits of proper regulation that leads to a secure attachment and vise versa can be a result of these attachment parenting practices.

For example, Miller and Commons (2010) pointed out that, co-sleeping helped infants regulate their breathing more effectively by being able to discern and copy the breathing patterns
of the parent(s) or caregiver(s) that are in the same room. This made the infants more physically self-regulated, and thus less likely to die from SIDS. Breastfeeding on demand is also of viable importance for infancy since it decreases the chances of SIDS, and increases the chances of maintaining a healthy baby weight. The impact of holding and touching was correlated to a decrease in infant crying, which helped reduce stress for both infants and parents. Finally, the effects that responding quickly to infant crying had multiple positives, such as increasing the communication system between parent and child, decreasing the amount of time crying, thus reducing the chances of maltreatment or abuse.

It is noteworthy to provide an important fact about the previously discussed work of Stevenson-Hinde, et al. (2013); of the original community of 763 mothers that were sampled, almost half (46%) of the mothers who responded had higher than average levels of anxiety. This statistic should by no means slouch in the shadows as it provided a large piece of the puzzle – if anxious mothers are more likely to produce insecure children, then why are we not doing more to help the anxious mothers? Or depressed mothers?

Of course there are many resources, books, and literature available to mothers, fathers, and caregivers to help them with parenting; however, there is no clear cut instruction book for parenting because we are all different: different personalities, temperaments, situations, environments, and relationships. In addition, there are no simple instruction books for mothers and caregivers as to how to deal with anxiety and depression. While childbirth is most often seen as a positive and joyous occasion, our society has invariably constructed a façade in camouflaging the often negative and stressful impacts that parenting can entail.

Mothers, fathers, and caregivers need support – lots of support. Dr. Amy Mullin, the Dean of Toronto University, wrote a controversial article in 2012 where she stressed the
importance of proper parenting. Idealistically but unrealistically, Dr. Mullin (2012) called for parenting licenses, but she more reasonably described the need and benefit for simply having more support for parents. Strategies for supporting parents include more public education about the needs of children and demands of parenting; increasing the social supports for parents by the community, and increasing the public awareness of problematic parenting behaviors that may affect children, such as financial or psychological stress.

Strong social support via significant others, mothers, and friends has been suggested by Leahy-Warren, McCarthy, and Corcoran (2011) to lessen depression in mothers. Particularly, the odds of new mothers becoming depressed were two times higher for mothers with medium support and four times higher for mothers with low support in comparison to mothers with high support. The direct correlations were impressively hopeful in that support measures were found to be negatively correlated to postnatal depression in all six categories; total functional social support (-.43), appraisal support (-.41), emotional support (-.40), instrumental support (-.33), informational support (-.29), and informal structural social support (-.20).

Another study by Leahy-Warren, McCarthy, and Corcoran (2011) examined the intertwining influences that maternal support, maternal self-efficacy, and postpartum depression have on one another. They found that strong support, especially spousal and familial support, increased maternal self-efficacy, which influenced healthy parenting practices. In turn, Leahy-Warren, et al. (2011) found that strong maternal self-efficacy (feeling empowered, confident, and capable of mothering) decreased the chances of developing postpartum depression. It is obvious that strong social support for new mothers can thwart the manifestation and persistence of maternal depression and anxiety, which then increases the chances that children have secure attachments.
Besides support, mothers need adequate time to be new mothers to help support secure attachments in their children. This means that new mothers need to be able to have substantial maternity leave, decent working shift hours, breastfeeding breaks, and available time off from work. According to Earle, Mokomane, and Heymann (2011), adequate working conditions that provide support for parents to take care of their children have a profound impact on both parents and children. From a physical health standpoint, paid parental leave was found to lower the rates of infant and child mortality, increase the chances the proper breastfeeding (which has numerous health benefits to both mother and child), and immunizations are more readily and adequately provided. Furthermore, the psychological effects of having proper parental leave has substantial benefits for both parents and the child, namely that the mother is allowed time to adapt to the major life change that occurred, thus lowering the risks of postpartum depression, or getting the proper care if postpartum depression develops. The parents are able to bond with the baby in a natural manner, which enhances the chances of a secure attachment. Finally, cognitive and social development increases in infants who are able to spend more adequate time with their parents.

**Future Remedy: Increasing Social Interest**

One of the first steps for parents to take in order to cultivate social interest is modeling socially interested behavior, such as perspective-taking and emulating empathy (Farrant, Devine, Mayberry, & Fletcher, 2012). Since a child’s first relationship is usually with his or her parents, it is crucial that parents demonstrate the effectiveness of social interest right from the beginning of a child’s life. According to Adler, this is especially important since the “style of life” is formed by age 5 (Ansberger & Ansberger, 1956). This is not to say that there is no chance for a child or an adult to show social interest at a later point, but rather that there seems to be a critical
window of time (at the age of brain development) that enhances the insurance of developing social interest traits.

Parents who model prosocial behaviors, such as caring, sharing, and helping, have a profound impact on the young, sponge-like minds that are observing. Based on social learning theory, it can be determined that when people observe a pattern of behaviors, the observed behaviors can be, and most likely will be, learned (Doescher & Sugawara, 1992). Behaviors that encompass prosocial skills, such as caring, sharing, and helping, can then be hypothetically and ideally learned through observation.

If children’s first “role-models” and natural direct human observations come from their parents, then it can be deduced that parents should be influential on their children’s learning processes. It can thus be deduced that if parents act in prosocial ways, their children will learn how to behave prosocially by default. On the other hand, if parents act in anti-social ways, such as being uncaring, unsharing, and unhelpful, children will ultimately learn those behaviors by observation as well (Farrant, et al, 2011).

It is not surprising that parenting styles have been linked to prosocial behaviors in children (Altay & Gure, 2012). The three parenting styles have been found to have a considerable effect on the raising of children: authoritarian, where parents display high levels of control and low levels of warmth; permissive, where parents show low levels in control and rate high in warmth; and authoritative, where parents demonstrate high levels of both control and warmth (Horton-Parker, 1998). It has been shown that children of authoritative parents benefit by being more friendly, confident, and displaying more prosocial behaviors because the children are a part of an effective rule system, but have a strongly responsive and loving relationship with the parents as well (Horton-Parker, 1998).
Altay and Gure (2012) specifically analyzed the degree to which authoritative parenting produced more prosocial behavior in their children than permissive parenting. It was concluded that the parents who showed an authoritative parenting style had the most prosocial children, whereas the permissive parents had significantly less prosocial children. Knafo and Plomin (2006) also tested the effects that parenting styles have on children by examining where or not positive parenting (consistent, responsive, and considerate) and negative parenting (inconsistent, unresponsive, and inconsiderate) attributes to the prosocialness of their children. It was found that there was a positive correlation with positive parenting and the children’s prosocial behaviors, and a negative correlation of negative parenting with the children’s prosocial behavior.

In a study that examined the effects of parental and school-based prosocial behavior intervention strategies, it was found that the intervention strategies had a significant impact on the children’s levels of prosocial skills (Doescher & Sugawara, 1992). Specifically, cooperation and encouragement were directly tested by observations of parents’ use of cooperative learning activities (completing an art project together), parents’ modeling desired behaviors, and parents’ encouraging statements (“I like the way we’re cooperating with the crayons!”) (p. 201). Similarly, the school-based interventions were based on cooperative and encouraging activities utilizing the relationships between teachers with students, and students with students.

Parental modeling of emotion regulation is effective in teaching children how to cope with the natural ebb and flow of stressful situations that occur in life. According to Miller and Commons (2010), this can be achieved by direct instruction of emotion regulation strategies, helping children to anticipate difficult situations and providing a warm and responsive environment that is conducive to coping with natural emotions. This allows children to become
more resilient, and ultimately have more autonomy. These character traits have a direct impact on being able to deal with life successfully, which has a direct impact on having a more satisfying life.

Besides proper parenting, school systems can also contribute to the development of social interest in young people. It was Adler’s establishment of child guidance clinics in Vienna that taught teachers how to foster social interest in children that led to the decrease of juvenile delinquency rates in the 1920’s (Guzick, Dorman, Groff, Altermatt, & Forsyth, 2004). Adler knew the importance of the early development of social interest in that he believed that “the failure to develop social interest in children and adolescents would result in lower social interest and greater psychological disturbance in adulthood (p. 364).

Because of Adler’s success nearly a century ago, the surplus of youth and adolescent problems, and the deterioration of basic social values, some psychologists are demanding change. The tired and hasty responses to punishment in schools are not working, and it is in fact making things worse. In order for our children to develop healthy social interest and responsibility, it is suggested that “interventions must focus on perspective taking and emotional empathy so that youth develop positive expectations for interpersonal experiences” (p. 362). These include teaching social interest, social awareness, self-regulation, reasoning, responsibility, and resilience.

One effective method to increase social interest, social awareness, and responsibility is using Aronson’s (2004) “jigsaw classrooms”. Simply put, “This model involves grouping students multiculturally and encouraging collaboration and interdependence instead of competition” (p. 360). More specifically, jigsaw classrooms are comprised of groups, and within each group is a set of students that teach each other. Each student in each group is
responsible for teaching their group an assigned topic, which essentially forces the group to be collaborative rather than competitive. This is much different than traditional classrooms, where lesson plans are heavily individualized upon each student’s abilities – which invariably creates competition and hierarchies.

The benefits to jigsaw classrooms over traditional classrooms are plentiful. It has been found that students in jigsaw classrooms have less prejudice and stereotypes, have increased liking of their peers, score better on standardized tests, have increased self-esteem, have an overall better view on school, and have better attendance than students in traditional classrooms. With the success and benefits of the jigsaw technique, it is surprising that more classrooms do not utilize this effective technique. The use of Aronson’s (2004) jigsaw classrooms is a great example of a somewhat simple way in which we can collaboratively increase social interest in our youth.

**Conclusion**

It is very evident from merely turning on the evening news, or reading the newspaper that our society is in trouble; our sense of community is in shambles, and the children of our communities are lost. We need help to make affective change. Just as we depend on one another through an evolutionary perspective lens, we depend on each other through an Adlerian Theory lens. As a community, we need to educate one another, and honor the intrinsic power of social interest and attachments.

Through research we learned the extent that children’s and adolescents’ externalizing and internalizing behaviors have on society. Children and adolescents are being diagnosed with psychological disorders at an alarming rate, turning away from school and families, and turning toward depression, anxiety, and juvenile delinquency. Not only is this harmful for the youth, it
takes a toll on parents, educators, and society as a whole. As a communal species, everyone is affected.

Since we know that increasing social interest in children decreases anxiety, depression, and the risk for suicide, it is only commonsense that we become advocates for change. On a small scale we have the power to model socially interested behaviors to our children, and to educate one another about the importance of social interest. On a larger scale, school reforms and education workshops would be beneficial. With more practice and more education, maybe we would see a happier, more connected, and comfortable society where we trust and depend on our fellow beings.

Likewise, parent education regarding attachments and parenting styles are necessary in order to thwart the persistence of insecure attachments. Even taking the small steps of educating mothers prenatally would be advantageous to attempt to kickstart the secure attachment process. Furthermore, we need to be candid about parenting and developing insecure attachments, which may lead to adolescent depression, suicide, lack of confidence, and aggression. It is our duty as parents and as members of society to educate one another, formally or informally, so that we have a better chance at seeing securely attached children and youth playing together.

Paradoxically, it is in the simple act of collaboration, cooperation, and community that we can begin to treat the overwhelming spectacle of low social interest and insecure attachments that run widespread in society. It is in our very nature, and at the very root of who we are, to be socially interested and have secure attachments to one another, so it seems almost silly to have to address the problem at all. Adler (1964) addressed this nearly a century ago, with a dose of optimistic encouragement;
The justified expectation persists that in a far-off age, if humanity is given enough time, the power of social interest will triumph over all that opposes it. Then it will be as natural as breathing. For the present, the only alternative is to understand and to teach that this will inevitably happen. (p. 207)
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