Perception of the relationship between parents, patterns of attachment and psychopathological symptoms in girls in late adolescence

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Summary

Aim. The paper presents a study concerning perception of relationship between parents, attachment patterns between adolescents and parents and their influence on intensity of psychopathology symptoms in nonclinical adolescent women.

Method. The study examined 75 nonclinical women in late adolescent (17–19 years old). Participants completed Parental Bonding Instrument, Youth Self Report Form and simple survey containing additional questions.

Results. The study revealed that the girls in late adolescence who perceived parents relationship as not good presented more psychopathology symptoms. The study also revealed that the adolescents who perceived their parents as less care and more controlled have more psychopathology symptoms. Maternal care was a predictor of lower levels of withdrawal, anxiety and depression. Paternal care was a predictor of lower levels of somatic complaints and thought disorders. Maternal control was a predictor of higher levels of attention disorders and aggressive behavior. Paternal control was a predictor of greater severity of social problems.

Conclusions The results are generally consistent with the data from literature. Perceived by adolescents family aspects such as parents quality relationship and attachment have significant influenced on the intensity of psychopathology symptoms: internalizing and externalizing symptoms, withdrawal, anxiety and depression, social problems, thought disorder, impaired concentration and aggressive behavior.

Key words: adolescence, relationship between parents, attachment

Introduction

Family environment is one of the most important factors for the development of disorders in children and adolescents [1]. Within the developed approaches, variety of dimensions of family functioning, such as family structure, parental attitudes, psychopathology, emotional processes, domestic violence or patterns of attachment draw
attention. In this paper I will focus on two aspects: parental conflict and patterns of attachment between parent and child.

**Parental conflict**

Conflicts between the parents or the quality of the relationship between the parents can have impact not only on the parents themselves but also on the child. In the literature, two basic types of conflicts between parents are mentioned: covert conflict - in which the mutual hostility is not shown directly and overt conflict consisting of screams, taunts, constant bickering, and even physical violence.

One aspect of the covert conflict is a triangulation of the child [2] that is apparently subtle inclusion of the child in their own affairs. Parents are trying to "drag" the child to their side, learn about the activities of each other or to transmit information to the partner with the use of the child. All of these activities can have a negative impact on the well-being and mental health of the child [3].

Easier to identify by an external observer are parental overt conflicts that may also strongly influence the child. Buehler et al. [4] conducted meta-analysis on this phenomenon finding a high degree of relationship between parental overt conflict and incorrect behaviors in children. In addition, some authors suggest that the perception of parental conflict and child’s interpretations on this topic may have serious consequences for its development, even bigger than the actual being a witness to such a conflict [e.g. 5]. Some of research show correlations between adolescent’s perception of parental conflict and maladjustment and internalizing symptoms (anxiety, depression, withdrawal) [5, 6]. Johnson, LaVoie and Mahoney [7] conducted a study of 124 members of the youth group in the period of late adolescence. The results of this study indicate a significant link between perceptions of the severity of parental conflict and a sense of loneliness and social anxiety in girls and boys and a sense of low family cohesion in group of girls. In some studies, however, so strong results in this topic has not been indicated, so that some authors postulate to keep in mind individual personality characteristics [6, 8].

**Patterns of attachment between parent and child**

Attachment theory formulated by J. Bowlby [9, 10, 11], and later developed by other researchers and theorists [12], is one of the concepts explaining the phenomenon of psychological development, and the emergence of widely understood mental disorders, including mental disorders in children and adolescents [13]. According to this theory, the early relationship with a primary caregiver - usually a parent- is one of the main human needs. Infant based on the early relationship with the caregiver creates “internal working models”, which are the basis for understanding and experiencing further interpersonal relationship throughout the lifetime. Research conducted by M. Ainsworth et al. [14] allowed to describe the three patterns of attachment between parent and child: 1) secure; 2) avoidant; 3) ambivalent; and later added by other researchers:
4) disorganized [15]. Correct pattern is secure, while all the other three can generate experiencing emotional difficulties and incorrect behaviors.

Later empirical studies show that the pattern of attachment is not linearly correlated with the development of mental disorders, but rather is one of the factors to be taken into account in interaction with other factors such as temperament, heredity, social development, emotions, traumatic experiences, etc. [16, 17]. Research on attachment and its participation in the generation of mental disorders are complex, the results are difficult to interpret and comparisons are complicated because some of them relate to the type proposed by Mr Ainsworth, while others are based on some of the selected dimensions relationship between caregiver and child. In addition, the study of attachment in the sense proposed by Bowlby is only possible in the first two years of the child’s life through direct observation of the infant’s interaction with the caregiver (e. g. “strange situation procedure” [14]), while the research conducted later in life (usually questionnaire) are rather subjective perception of relationships.

Speltz et al. [17] found that 80% of a group of children with oppositional – defiant disorder present one of the insecure attachment patterns, compared with 30% in the control group. Warren et al [18] reported that adolescence with ambivalent attachment pattern, frequently had anxiety disorders diagnosed. Of course, not all research are so clear. Daklyen and Greenberg [16] reviewing research on attachment indicated, for instance, that a large portion of children with oppositional – defiant disorder are characterized by secure attachment pattern and the same is true about other clinical diagnoses. These authors suggest that the pattern of attachment is not the only variable that leads to the formation of psychopathology and it is important to take into account other factors (individual characteristics of the child, parental styles, characteristics of the family system). On the other hand, the inconsistent results may be a consequence of the use of a variety of research tools and different participant selection.

Some researchers, as mentioned above, are focused on the study of selected dimensions of the relationship. For example, Parker and colleagues [19], identified two dimensions of parent - child attachment: care and overprotection. The dimension of care can range from emotional coldness and rejection, to the emotional warmth, while the overprotection can take the items from the psychological control to psychological autonomy. In this model it is assumed that the most optimal for child development is a relationship with caregiver in which the parent object has a high degree of care and low degree of overprotection. Based on this, Parental Bonding Instrument (PBI) questionnaire was created, which was widely used in the study on retrospective evaluation perception of relationship with parents. Study by Canetti et al [20], with PBI, revealed a strong correlation between low overprotection and high care and well-being of young people and fewer symptoms of emotional distress. In other studies using this research tool, Key [21] found a relationship between poor care by the mothers and the prevalence of depression in youth was discovered, and Pedersen [22] obtained a relationship between low care and high parents overprotection and depression, anxiety disorders and delinquent behavior of adolescents.

Polish studies among adolescents, with the PBI, were also conducted. Józefik et al. [23] who studied the patterns of attachment in girls with a diagnosis of eating disorders.
The results of these research revealed that girls with a diagnosis of anorexia nervosa and bulimia nervosa revealed incorrect bonds: parents in both groups were less emotionally involved in relationships with daughters than parents in the control group, and also had to have more control. Moreover, in both the clinical groups and the control group mothers care was correlated with higher self-esteem and coping with social relations. In other studies Iniewicz et al. studied the patterns of attachment and anxiety in adolescents [24] and patterns of attachment and adolescent aggressive behavior [25]. There has been a negative correlation between maternal care and anxiety intensity found. Furthermore, the received correlation between bond and passive-aggressive in adolescents with a diagnosis of behavioral and emotional problems: mother’s care and father’s overprotection was associated with less resentment, and overprotection of the mother and father was associated with a lower degree of irritability.

The purpose of the research, the results of which will be presented in this article, was the empirical of the relationship between perceived by adolescents aspects of the family environment, such as assessment of the relationship between parents and perception of relationships in dyadic a child - parent, and the intensity of psychopathological symptoms and problem behaviors of adolescents.

**Participants**

The study group consisted of 75 adolescent girls studying in the School No. 5 in Rybnik, as well as girls consulted in Psychological – Educational Counseling Center in Rybnik (Poradnia Psychologiczno – Pedagogiczna w Rybniku) All participants were between 17 and 19 years old, mean age 17.9.

**Method**

In this study the following methods were used:

1. Parental Bonding Instrument (PBI) by Parker [19] - already cited in this article, a tool designed to study aspects of the relationship on the dimensions of care and overprotection. The tool has been adapted to Polish conditions [26]. The dimension of care can range from emotional coldness and rejection, to the emotional warmth, while the overprotection can take the items from the psychological control to psychological autonomy. In this model it is assumed that the most optimal for child development is a relationship with caregiver in which the parent object has a high degree of care and low degree of overprotection.

2. A short questionnaire of own authorship, allowing to obtain about demographics data and information about structure of the family. In addition, there is a simple question about the adolescents perceptions relationship/marriage of his parents. Respondents could choose only one of two answers: „good” or „bad.”

3. Youth Self Report (YSR) is a tool from battery Child Behavior Checklist (CBCL) developed by Achenbach [27] in which youth themselves evaluate their own behavior. It consists of two parts, where the first relates to the assessment of competence, while
the second assesses emotional and behavior symptoms. The present study used the second part which consists of 112 items, where the person tested on three-point scale assesses whether the behavior/symptom are present. With YSR the following results can be obtained: total score of symptoms/problem behaviors, which can be divided into two sub-scales: externalizing problems and internalizing problems. We also can get results for individual subscales symptoms: withdrawal, somatic complaints, anxiety and depression, social problems, thought problems, attention problems, aggressive behavior, delinquent behavior. With this tool numerous studies were carried out around the world. It shows satisfactory psychometric properties also in the Polish version [27]. Adaptation to the conditions of Polish was made by T. Wolańczyk [28].

Results

Evaluation of the relationship/marriage parents and symptoms/behavior problems.

Table 1. Means, standard deviations and significance of differences in the results of YSR for groups of girls evaluating relationship of their parents as a successful and unsuccessful

<table>
<thead>
<tr>
<th></th>
<th>Successful relationship M (SD)</th>
<th>Unsuccessful relationship M (SD)</th>
<th>t</th>
<th>p</th>
</tr>
</thead>
<tbody>
<tr>
<td>Total problems</td>
<td>48.32 (25.54)</td>
<td>66.34 (27.60)</td>
<td>-2.84</td>
<td>&lt; 0.005</td>
</tr>
<tr>
<td>Internalizing problems</td>
<td>18.55 (9.64)</td>
<td>26.34 (12.99)</td>
<td>-2.88</td>
<td>&lt; 0.005</td>
</tr>
<tr>
<td>Externalizing problems</td>
<td>14.92 (7.81)</td>
<td>18.56 (7.46)</td>
<td>-1.98</td>
<td>&lt; 0.05</td>
</tr>
<tr>
<td>Withdrawn</td>
<td>5.97 (2.60)</td>
<td>7.59 (3.45)</td>
<td>-2.23</td>
<td>&lt; 0.05</td>
</tr>
<tr>
<td>Somatic complaints</td>
<td>4.97 (3.30)</td>
<td>6.97 (4.61)</td>
<td>-2.10</td>
<td>&lt; 0.05</td>
</tr>
<tr>
<td>Anxious and depressed</td>
<td>7.97 (5.91)</td>
<td>12.59 (7.82)</td>
<td>-2.81</td>
<td>&lt; 0.005</td>
</tr>
<tr>
<td>Social problems</td>
<td>2.61 (2.21)</td>
<td>3.37 (2.17)</td>
<td>-1.46</td>
<td>n.s</td>
</tr>
<tr>
<td>Thought problems</td>
<td>1.74 (2.37)</td>
<td>3.66 (3.03)</td>
<td>-2.97</td>
<td>&lt; 0.005</td>
</tr>
<tr>
<td>Attention problems</td>
<td>7.87 (3.59)</td>
<td>9.91 (2.80)</td>
<td>-2.61</td>
<td>&lt; 0.01</td>
</tr>
<tr>
<td>Delinquent behavior</td>
<td>4.71 (3.23)</td>
<td>6.59 (3.78)</td>
<td>-2.25</td>
<td>&lt; 0.05</td>
</tr>
<tr>
<td>Aggressive behavior</td>
<td>10.21 (5.27)</td>
<td>11.97 (4.92)</td>
<td>-1.43</td>
<td>n.s</td>
</tr>
</tbody>
</table>

n.s. – not significant

Tab. 1 shows that girls evaluating the relationship of their parents as successful obtained lower rates of psychopathological symptoms. Statistically significant differences were found in the result of total YSR, externalizing problems and internalizing problems, and six of the subscales: withdrawal, somatic complaints, thought problems, attention problems and delinquent behavior. No statistically significant difference was observed in the range of social problems and aggressive behavior.

The perception of the pattern of attachment in adolescent girls with their parents and symptoms/behavior problems.
To verify the influence the level of attachment patterns on the occurrence of symptoms, regression analysis was conducted and the results are shown in Tab. 2.

Table 2. Influence of attachment on the severity of psychopathological symptoms in the group of girls (n = 75)

<table>
<thead>
<tr>
<th></th>
<th>Standardized factors β</th>
<th>Mother care</th>
<th>Mother overprotection</th>
<th>Father care</th>
<th>Father overprotection</th>
<th>Adjusted. R²</th>
<th>F</th>
</tr>
</thead>
<tbody>
<tr>
<td>Total problems</td>
<td>-0.187</td>
<td>0.247*</td>
<td>-0.187</td>
<td>0.043</td>
<td>0.184</td>
<td>4.94**</td>
<td></td>
</tr>
<tr>
<td>Internalizing problems</td>
<td>-0.297*</td>
<td>0.096</td>
<td>-0.246*</td>
<td>-0.013</td>
<td>0.183</td>
<td>4.91**</td>
<td></td>
</tr>
<tr>
<td>Externalizing problems</td>
<td>-0.162</td>
<td>0.418**</td>
<td>0.011</td>
<td>0.059</td>
<td>0.230</td>
<td>6.21**</td>
<td></td>
</tr>
<tr>
<td>Withdrawn</td>
<td>-0.338*</td>
<td>0.001</td>
<td>-0.209</td>
<td>0.054</td>
<td>0.160</td>
<td>4.33*</td>
<td></td>
</tr>
<tr>
<td>Somatic complaints</td>
<td>-0.191</td>
<td>-0.073</td>
<td>-0.284*</td>
<td>0.004</td>
<td>0.072</td>
<td>2.36</td>
<td></td>
</tr>
<tr>
<td>Anxious and depressed</td>
<td>-0.258*</td>
<td>0.214</td>
<td>-0.198</td>
<td>-0.060</td>
<td>0.190</td>
<td>5.10**</td>
<td></td>
</tr>
<tr>
<td>Social problems</td>
<td>-0.181</td>
<td>0.141</td>
<td>0.020</td>
<td>0.308*</td>
<td>0.146</td>
<td>3.99*</td>
<td></td>
</tr>
<tr>
<td>Thought problems</td>
<td>0.043</td>
<td>-0.027</td>
<td>-0.408*</td>
<td>0.068</td>
<td>0.130</td>
<td>3.59*</td>
<td></td>
</tr>
<tr>
<td>Attention problems</td>
<td>-0.083</td>
<td>0.268*</td>
<td>-0.075</td>
<td>0.052</td>
<td>0.079</td>
<td>2.50*</td>
<td></td>
</tr>
<tr>
<td>Delinquent behavior</td>
<td>-0.158</td>
<td>0.399</td>
<td>0.008</td>
<td>0.152</td>
<td>0.250</td>
<td>6.77**</td>
<td></td>
</tr>
<tr>
<td>Aggressive behavior</td>
<td>-0.134</td>
<td>0.355*</td>
<td>0.011</td>
<td>-0.016</td>
<td>0.132</td>
<td>3.66</td>
<td></td>
</tr>
</tbody>
</table>

* p < 0.05; ** p < 0.01

The above Tab. 2 shows that the attachment examined by PBI is a statistically significant predictor of the total symptoms YSR, externalizing problems and internalizing problems, and six of eight subscales. The total combination of attachment dimensions, that is control and overprotection of mother and father, explains the following percentage of variance for each scale YSR: 18% for total symptoms, 18% of the internalizing problems, 23% of the scale externalizing problems, 16% of the withdrawal, 19% for anxiety and depression, 14% for the social problems, 13% for the thought problems, 7% for the attention problems, and 25% for the delinquent behavior. When we look at the individual predictors we see that usually one of the dimensions of attachment significantly explains YSR scales, except for the scale of internalizing problems where statistical significance was achieved in two dimensions. Mother’s care is negatively correlated with internalizing problems, withdrawal, anxiety and depression. Mother’s overprotection is positively correlated with the total symptoms YSR, externalizing problems, attention problems and aggressive behavior. Father’s care is negatively correlated with the internalizing problems, somatic complaints, and thought problems. Father’s overprotection is correlated positively with only one subscale YSR: social problems. It should also be noted that in the subscales: somatic complains and aggressive behavior, although they are not explained by the attachment dimensions compilation, that individual predictors influencing the clarification of these variables.
Results obtained in the research confirm that adolescent’s perception of the family environment is a factor significantly associated with the severity of psychopathological symptoms or problem behaviors. In this paper two aspects of perception of the family were investigated: the relationship between parents and attachment in the dyadic adolescent - parent.

Participants: adolescent girls, who evaluate the relationship between their parents as a successful, present significantly fewer symptoms of psychopathology (total symptoms YSR), compared with adolescent girls that assess the relationship between their parents as a failure. Similarity in subscales: internalizing and externalizing problems – girls positively assessing the relationship between their parents received lower psychopathological symptoms. A higher level of withdrawal, anxiety and depression presented girls who evaluated relationship between parents as bad, which is consistent with literature [5, 6]. It should be noted that in this group there were also higher scores in the somatic complaints – this is consistent with Minuchin’s concept [29], who assumed that symptoms usually occurs when the intensity of stress in the family is higher than the family ability to cope with stress, and a symptom in child may also play a regulatory role - for example, distract parents from their conflict towards child. Unfortunately, because of their construction, the results of this study cannot confirm further observations of these researchers that psychosomatic disorders are present in a dysfunctional family, characterized by rigidity, enmeshment, over-involvement.

Interesting is the fact that there were no differences in subscales of social problems and aggressive behavior.

Limitations of this study should also be taken into account - particularly the method - not using a tool with specific psychometric properties, and only asking the respondents to tick one of two possible answers (relationship successful vs. unsuccessful). However, the study even in this form can to some extent illustrate the subject.

The aim of the next stage of the analysis was to test the impact of attachment between parents and girls on the level of psychopathological symptoms or problem behaviors. The total combination results of PBI explained 18% of the variance internalizing problems and 23% of the variance of externalizing problems. For the internalizing problems decreasing factor is mother’s care and father’s care, for the externalizing problems increasing factor is mother’s overprotection. The simultaneous effect of all four dimensions of attachment (mother - care, mother - overprotection, father - care, father - overprotection) was obtained for six groups of symptoms: withdrawal, anxiety and depression, social problems, thought problems, attention problems and delinquent behavior. Overall, the results confirm theoretical assumptions adopted in the relationship model of Parker [19] as well as previous research [e.g., 20, 21]: parental care has a positive effect on emotional development and is associated with lower levels of psychopathology, while overprotection has negative effects on development and correlated with higher levels of symptoms.

Analysis of the individual impact of each attachment dimensions showed that when mother’s care is higher then the level of withdrawal and anxiety and depression
lower are, and when father’s care is higher then level of somatic complaints and thought problems in girls are lower. As expected, parental overprotection was positively correlated with the level of psychopathological symptoms: mother’s control imposed higher level of attention problems and aggressive behavior and the father’s control influenced on higher level of social problems. It is interesting that different syndromes are associated with the care and overprotection of the mother and the other with father’s attachment dimensions. Perhaps important factor is participant’s sex (in these studies only girls were involved), and perhaps some other individual and family factors, which this study did not include. Cianetti et al. [20] reported differences between male and female adolescents indicating that girls more often than boys pointed to the optimal dose control and maternal care, which is likely - as these authors suppose - due to the fact that it is easier for mothers to express feelings for children of the same sex. Even these results indicate that the compilation of child sex – parent sex can make a big difference in their mutual relations. In addition, developmental psychology indicates the different needs of girls and boys in the relationship with the parent of the same or opposite sex in various stages of development [30].

Iniewicz et al. [24, 25] showed that a higher level of anxiety and higher level of father’s care are related and there was no correlation between the attachment and the different types of aggression in the control group. There has been a small amount of correlation between the dimensions of attachment and aggression in adolescents with a diagnosis of conduct disorder, which could mean small impact of attachment on aggressive behavior or the existence of hidden intermediary variables. The study presented in the paper shows different results. First of all, there was no individual impact of father’s overprotection on anxiety and depression. In addition, the obtained results show the impact of attachment on externalizing symptoms, social problems, delinquent behavior and aggressive behavior. However, it should be taken into consideration that a variety of research tools was used in the studies as well as different conceptualization of anxiety and aggressive disorders, and studies were carried out in different age groups.

Conclusions

1. The results confirm the impact of perceptions of family environment on adolescent’s girls mental health
2. Girls who perceive the relationship of their parents as a successful present less psychopathological symptoms compared to peers negatively evaluating the relationship of their parents
3. Total compilations of patterns of attachment between mother/father and girls has a significant impact on the severity of syndromes such as internalizing and externalizing problems, withdrawal, anxiety and depression, social problems, thought problems, attention problems and delinquent behavior.
4. Parental care has an impact on lower level of psychopathological symptoms. Maternal care is a predictor of lower levels of withdrawal, anxiety and depression.
Paternal care is a predictor of lower levels of somatic complaints and thought problems.

5. Parental overprotection influences on higher level of psychopathological symptoms. Maternal overprotection is a predictor of a higher level of attention problems and aggressive behavior. Paternal overprotection is a predictor of social problems.

6. The study has its limitations: the participants were girls aged 17-19 years; assessment of the perception of parents’ relationship was made without the use of a research tool with specific psychometric properties, and only on the basis of one question.

7. Further studies of the family environment and its relationship with impaired children and adolescents are needed. In the context of this research the question about impact of correlation between sex of adolescent – and sex of a parent on the perception of patterns of attachment and behavioral and emotional disorders is interesting.

**Wahrnehmung der Relationen zwischen den Eltern, Bindungsmuster und Intensität der psychopathologischen Symptome bei Mädchen in später Adoleszenz**

**Zusammenfassung**

**Ziel.** Der Artikel bespricht die Studien an der Wahrnehmung der Beziehungen zwischen den Eltern, Studien an den Bindungsmustern zwischen den Adoleszenten und ihren Eltern und den Einfluss dieser Faktoren auf die Intensität der psychopathologischen Faktoren bei den Adoleszentinnen.
**Methode.** An die Studie wurden 75 Mädchen im Alter zwischen 17 bis 19 Jahren eingeschlossen, die folgende Instrumente ausgefüllt hatten: Parental Bonding Instrument (PBI), Youth Self Report Form (YSR) und eine einfache Umfrage mit zusätzlichen Fragen.


**Schlussfolgerungen.** Man kann feststellen, dass die erzielten Ergebnisse mit den bisherigen Meldungen aus der Literatur in diesem Bereich übereinstimmen. Die Perzeption der Dimensionen der Funktionsweise einer Familie, solcher wie die Beziehungen zwischen den Eltern oder die Bindungsmuster zwischen den Adoleszenten und ihren Eltern, hat einen großen Einfluss auf die Intensität der psychopathologischen Symptome, solcher wie Störungen der Internalisierung und Externalisierung, Rückzug, Angst und Depression, soziale Probleme, Denkstörungen, Aufmerksamkeitsstörungen und aggressives Verhalten.

**Schlüsselwörter:** Adoleszenz, Beziehungen zwischen den Eltern, Bindung

**La perception des relations entre les parents, les modèles de l’attachement et l’intensité des symptômes psychopathologiques chez les filles à la période de l’adolescence tardive**

**Résumé**

**Objectif.** Cet article essaie de présenter les recherches concernant la perception des relations entre les parents ainsi que les modèles de l’attachement entre les parents et les adolescents et encore l’influence de ces facteurs sur l’intensité des symptômes psychopathologiques chez les filles adolescentes.

**Méthode.** On examine 75 filles de l’âge 17-19 ans avec : Parental Bonding Instrument (PBI), Youth Self Repport Form (YSR) et questionnaire simple de l’auteur contenant les questions supplémentaires.

**Résultats.** Les filles percevant les relations entre leurs parents comme bonnes manifestent moins des symptômes psychopathologiques et elles ont moins de problèmes que ces filles qui perçoivent ces relations comme pas bonnes. La garde maternelle est un prédicteur du niveau peu élevé de refoulement, d’anxiété et de dépression. La garde paternelle est un prédicteur du niveau peu élevé des complaintes somatiques et des troubles de penser. Le contrôle maternel est un prédicteur du niveau plus élevé des troubles de l’attention et des conduites agressives, le contrôle paternal est un prédicteur du niveau plus élevé de l’intensité des problèmes sociaux.

**Conclusions.** Ces résultats s’accordent avec la littérature en question. La perception des relations en famille, les modèles de l’attachement entre les adolescents et leurs parents influent d’une manière importante sur l’intensité des symptômes psychopathologiques tels que : troubles d’internalisation et d’externalisation, refoulement, anxiété, dépression, problèmes sociaux, troubles de penser, conduites agressives.

**Mots clés :** adolescence, relations entre les parents, attachement

**References**


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