Attribution Styles In Adolescents: Family Structure Differences And Psychological Implications

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ABSTRACT

It is seen that Single Parenthood affects children on a variety of dimension for example, their psychosocial development, their self-esteem, stress, maladjustment in peer-relations etc. This study aims to measure the differences in children who come from broken homes as opposed to intact households on "*attribution styles*". A comparative cross-sectional design was used with 40 adolescents (20 from single-parent families and 20 from intact families), assessed using the Attribution Style Assessment Test and analyzed using matched-pairs t-tests. The results indicated negative attribution style on all 4 dimensions of globality, locus, control, stability.

Keywords: Attribution style, single-parent children

INTRODUCTION

Indian Council of Medical Research (ICMR) released a Monograph on "Mental Health Research in India, 2005)", which observed the factors precipitating for mental illness in children and adolescents are abnormal psychosocial situations in family and immediate social environment of children to which they are exposed. The psychosocial factors were: a) familial over indulgence, mental disturbance in any family members, discordant intrafamilial relationship, inadequate/inconsistent parental control, stress in school environment. (Shah, et al ; 2005). A study by Guion et al, (2012) explained the role of parent's attributional style on their adolescent children and found that optimistic attributions were associated with fewer adolescent internalizing and externalizing problems. The influence of family member on Attribution style seems to be important factor with regards to child and adolescent mental health. Explanatory style has been extensively studied as a correlate of helplessness-related outcomes such as depression, illness, and failure. Originally proposed in the context of the attributional reformulation of learned helplessness theory (Alloy et al, 1984), explanatory style reflects the way that people usually explain disparate bad or good events. People who usually explain bad events by causes that are stable in time ("it's going to last forever"), global in effect ("it's going to undercut everything that I do"), and

internal ("it's me") and who explain good events with unstable, specific, and 'external causes. (Martin et al, 2003)

More specifically the scientific world is replete with studies which explore the psychological effect of divorce and separation on children (Cherlin, 1999; Amato, 2001; Wallerstein, 2008).   A large number of studies have documented that children in divorced and remarried families evidence a host of negative problem behaviors in comparison to children from "intact" families. For example, children from divorced, single-parent and remarried families may be more susceptible to externalizing and internalizing problems, low-self-esteem, poor-academic performance, relational difficulties, delinquent behavior and substance abuse (*Amato, 2001; Amato and Keith, 2001).* Attribution style seems to be a reliable source to bracket at risk population for depression, which is one of the major mental health problem in India. To complicate the issue, attribution style seems to have cultural influences and gender differences. In this vein, studies done in the western world which focus on attribution style in children, reflect independence and in Asian countries reflect interdependence (dispositional, situational) (ZoRong et al, 2009). As far as gender studies on attribution style and depressogenic features is concerned studies have demonstrated that the increasing responsibility post-divorce has a positive correlation for girls in maternal custody and negative for boys. Boys have also been reported to have more behavioural and adjustment problems and girls may be less adjusted in father custody families. In adolescence girls may experience more adjustment problems than boys (Summers, 1998). It is clear from above literature that Attribution style in India needs to be extensively studied because in the Indian setting children until late adolescent depend upon their family for support and establishment of identity.

The present study aims to investigate the difference in attribution style in girls belonging to a boarding institute who come from intact and broken families. We hypothesized Attribution Style differ in perceiving the situation in the background of personal experiences. It reflects the family bonding and attachment style of their parents. Therefore studying the differences in attribution style patterns among these children can have far reaching implications in understanding its relationship to various conditions like depression, anxiety etc., and exploring associated therapeutic options.

METHODOLOGY

The present study was conducted on 20 children from broken families and 20 children coming from intact families, in the age group of 15-17 years. The sample was collected from a boarding an institution, which caters to the needs of children from low socio-economic strata.

The data collected was computed and analysed by taking their means, standard deviations and calculating the t-value for each of the 4 dimensions individually.

The questionnaire used in the study has been derived from Attribution Style Assessment Test.

Attribution Style assessment Test-The ASAT has 4 basic classification categories- "interpersonal failure, interpersonal success, noninterpersonal failure, and noninterpersonal success". The dimensions used in the scale are locus, globality, stability, controllability. It requires the subject to imagine oneself in each situation and rate themselves accordingly on each of these measures. The scale has both the positive and negative connotations of the same aspect, thereby checking their attribution styles in various situations.

RESULTS

A matched pairs t-test was used to compare the mean of both the groups for the 4 dimensions of Attributions Style Assessment Test.A t-test is appropriate when we want to check whether the means of two sets of scores are significantly different or not. A matched pairs *t* test is used when there are two groups of subjects who are matched atleast one aspect or two groups of scores matched by having the same subject produce them. In this study the subjects were matched on the basis of sex, age and other variable.

Table 1: Comparison of Attribution Styles Of Children from Intact Vs Single Parent Families

Attribution Dimension	Family Type	Mean	SD
Globality	Intact	5.54	1.21
	Single Parent	4.60	1.26
Locus	Intact	6.12	0.89
	Single Parent	5.45	0.96
Stability	Intact	5.83	1.10
	Single Parent	5.05	0.75
Controllability	Intact	6.28	0.93
	Single Parent	5.61	1.21

Higher scores indicate more adaptive attributional patterns (internal, stable for positive events, controllable, and specific).

The Attribution Style Assessment Test (ASAT) is a self-report measure designed to assess individuals' habitual patterns of explaining positive and negative life events. The questionnaire consists of hypothetical situations representing both interpersonal and non-interpersonal contexts, with an equal number of success and failure events. For each situation, respondents are asked to imagine themselves in the given scenario and rate the most likely cause of the outcome.

Attributions are evaluated across four dimensions: locus of causality (internal vs. external), stability (stable vs. unstable over time), globality (specific vs. generalized across situations), and controllability (degree of personal control over the cause). Responses are recorded on a 9-point Likert-type scale for each dimension. Higher scores reflect more adaptive attributional patterns, characterized by greater internality, stability for positive events, perceived controllability, and specificity of causal explanations.

The ASAT has been widely used in research examining cognitive vulnerability, resilience, and emotional adjustment, particularly in studies related to depression and stress-related outcomes.

The data has been collected and analysed by performing a t test on each of the 4 dimensions, and the results have been found to be significant.

Attribution Dimension	Intact Family (M ± SD)	Single-Parent Family (M ± SD)	$t(19)$	p
Globality	5.54 ± 1.21	4.60 ± 1.26	2.67	< .01
Locus	6.12 ± 0.89	5.45 ± 0.96	2.55	< .01
Stability	5.83 ± 1.10	5.05 ± 0.75	2.69	< .01
Controllability	6.28 ± 0.93	5.61 ± 1.21	2.48	< .05

Differences between adolescents from intact and single-parent families were examined across the four dimensions of attribution style: globality, locus, stability, and controllability.

With respect to **globality**, a statistically significant difference was observed between the two groups, $t(19)$ = 2.67, $p < .01$. Adolescents from intact families demonstrated higher globality scores compared to those from single-parent families, indicating a greater tendency to perceive causes of events as specific rather than generalized across multiple situations.

Analysis of **locus of causality** revealed a significant group difference, $t(19)$ = 2.55, $p < .01$. Adolescents from intact families were more likely to attribute events to internal factors compared to adolescents from single-parent families, suggesting a stronger sense of personal agency in interpreting life events.

A significant difference was also found for **stability**, $t(19)$ = 2.69, $p < .01$. Adolescents from intact families exhibited more stable attributional patterns, indicating a greater likelihood of perceiving causes of events as consistent over time, whereas adolescents from single-parent families showed relatively less stable attributions.

Finally, group differences in **controllability** were statistically significant, $t(19)$ = 2.48, $p < .05$. Adolescents from intact families reported higher perceived controllability of life events than those from single-parent families, reflecting a stronger belief in their ability to influence outcomes.

DISCUSSION

From the findings it is evident that there is a significant difference between attribution style of children coming from broken and intact families. As hypothesized, the AS seems to be influenced by the personal life events and perception towards the external world. Object relation framework of attachment has been explored to answer the question of how they come to see the world as they see it. The "object" of an instinct is the agent through which the instinctual aim is achieved, and the agent is usually conceived as being another person. "Attachment" refers to an affectional tie that one person (or animal) forms to another specific individual. Attachment is thus discriminating and specific. Like "object relations," attachments occur at all ages and do not necessarily imply immaturity or helplessness. To be sure, the first tie is most likely to be formed to the mother, but this may soon be supplemented by attachments to a handful of other specific persons(Ainsworth_1969). Constant need-gratification from primary object (mother) relieves the infant from unpleasant situation and develops pleasure. This pleasure transforms attachment towards primary object as love-object. Eventually, the loss of love is considered to be a threat

and not the object. This awareness paves way to substitution of primary object with specific persons in life across the ages.

Therefore experiences with attachment forms the basis for the representational models created by the child of the self and significant others in his or her world. A child with an insecure attachment, gets trapped in a cycle of viewing the world with a selective perception, of being unpredictable, or threatening leading to less exploration, competence and thereby creating more helplessness and loss of control. This creates a self-fulfilling prophecy of increased probability of experiencing unpleasant events. Insecure attachment thus creates a pathway for creation of pessimistic and negative attribution styles (Armsden et al, 1990, Rekart, 2007). This state of hopelessness becomes chronic if cause of the events are considered to be stable in time or global in effect.

In continuance with attachment theory, attribution style of children can be inherited from the parental figures.This is supported by Seligman's study (1984), whose sample demonstrated that primary figure influences the child's interpretation of life events and leading to attribution style. In the same vein, Nolen-Hoeksema et al., conducted a 5-year longitudinal study on interrelation among children's experience of depressive symptoms, negative life events, explanatory style, and helplessness behaviors in social and achievement situations. The results revealed that early in childhood, negative events, but not explanatory style, predicted depressive symptoms; later in childhood, a pessimistic explanatory style emerged as a significant predictor of depressive symptoms, alone and in conjunction with negative events(Hoeksema Net al, 1992). Harmony between parent's and children's attribution style may emanate from the fact that the child learns his attribution style from one or both of the parents over time, which eventually becomes expressed in their own behaviours. For the purpose of clinical formulation, it is first influence of primary figure followed by perceiving life events to be consistently negative leading to pessimistic attribution style, which would be significant predictor of depression.

Therapeutically attempts have been made to change the cognitive/perceptual patterns in children from broken homes as researchers and mental health professionals have identified the need to establish therapeutic options for such children.

The Penn Resiliency Training project (PRP), has been explored as a useful option for altering negative explanatory styles in children (Cutill JJ, 2004; Morris, 2004; Revich et al, 2005, SankanarayananA, 2014). This intervention focuses mainly on identifying negative cognitions, beliefs, and secondly helps to build on social problem solving skills which includes goal setting, information-gathering, generating alternatives and decision making (Kaslow et al; 2004). Typical session of PRP include modeling, story-telling whilst highlighting pessimistic and optimistic thinking styles *(for e.g., "When Rahul was encouraged to participate in sports he mentioned several deficiencies in himself due to which he didn't want to participate at all, whereas Aashi portrayed an optimistic thinking style and stated that although it was difficult ,he had a chance)*, evaluating thoughts *(for e.g., maintaining a diary and identifying negative cognitions),* disputing the negative thoughts and assertiveness and negotiation.

Establishing the efficacy of such interventions on single parent children, was not under the scope of the present study, and therefore can be undertaken as further research. It would also be interesting to correlate the age of the child at the time of separation or death of the parent, and corroborating its effects on the attribution style factors. Nonetheless from the present research it can be concluded that attribution style appears to be sensitive to environmental factors such as stressors in the family, and managing attribution style could help improve mental health outcomes of these children. Therefore longitudinal researches are required where the effect of intervention on cognition could be observed.

REFERENCES:

1. Bela Shah, R. P. (2005). *Mental Health Reearch in India.* Delhi: Indian Council of Medical Research.

2. Kimberly Guion, S. M. (2012). The Role of Parental and Adolescent Attributions in Adjustment of Adolescent with Chronic Illness. *Journal of Clinical Psychology Med Settings* .

3. Alloy, P. A. (1984). Attribution Style and Generality of Learned Helplessness. *Journal of Personality and Social Psychology*, 681-687.

4. Charles Martin-Krumm, Philippe Sarrazin, Christopher Peterson, Jean-Pierre Famose. Ex-planatory Style and Resilience after Sports Failure. Personality and Individual Differences, Elsevier, 2003, 35 (7), pp.1685-1695.

5. Cherlin, A. J., Furstenberg, F. F., Chase-Lansdale, L., Kiernan, K. E., Robins, P. K., Morrison, D. R., &Teitler, J. O. (1991). Longitudinal studies of effects of divorce on children in Great Britain and the United States. *Science*, *252*(5011), 1386-1389.Paul R Amato, J. M. (2001). The Effect of Divorce and Marital Discord on Adult Children's Psychological Well-Being. *American Sociological Review*, 900-921.

6. Wallerstein, J. S., & Kelly, J. B. (2008). Surviving the breakup: How children and parents cope with divorce. Basic Books.

7. Amato, P. R. (2000). The Consequences of Divorce for Adults and Children. *Journal of Marriage and Family*, 1269-1287.

8. Amato, P. R. (2001). Children of Divorce in the 1990's: An Update of the Amato and Ketih Meta-Analysis. *Journal of Family Psychology*, 355-370.

9. Summers, P., Forehand, R., Armistead, L., & Tannenbaum, L. (1998). Parental divorce during early adolescence in Caucasian families: the role of family process variables in predicting the long-term consequences for early adult psychosocial adjustment. *Journal of Consulting and Clinical Psychology*, *66*(2), 327

10. Rong, A. Z. (2009). Attribution Bias in South Korea, Japan, Germany, USA: Intercultural and Intracultural Differeces. San Francisco.

11. Ainsworth, M. D. S. (1969). Object relations, dependency, and attachment: A theoretical review of the infant-mother relationship. *Child development*, 969-1025.

12. Armsden, G. C., McCauley, E., Greenberg, M. T., Burke, P. M., & Mitchell, J. R. (1990). Parent and peer attachment in early adolescent depression. *Journal of abnormal child psychology*, *18*(6), 683-697.

13. Rekart, K. N., Mineka, S., Zinbarg, R. E., & Griffith, J. W. (2007). Perceived family environment and symptoms of emotional disorders: The role of perceived control, attributional style, and attachment. *Cognitive Therapy and Research*, *31*(4), 419-436.

14. Nolen-Hoeksema, S., Girgus, J. S., & Seligman, M. E. (1992). Predictors and consequences of childhood depressive symptoms: a 5-year longitudinal study.*Journal of abnormal psychology*, *101*(3), 405.

15. Cutuli, J.J. (2004). Preventing externalizing symptoms and related features in adolescents. Unpublished thesis. University of Pennsylvania, Philadelphia

16. Morris, R. J., &Kratochwill, T. R. (Eds.). (2008). *the practice of child therapy*. Routledge.

17. Reivich, K., Gillham, J.E., Chaplin, T.M., & Seligman, M.E.P. (2005). From helplessness to optimism: The role of resilience in treating and preventing depression in youth. In S. Goldstein & R.B. Brooks (Eds.), Handbook of resilience in children (pp. 223-237). New York: Kluwer Academic/Plenum Publishers.

18. Sankaranarayanan, A., &Cycil, C. (2014). Resiliency training in Indian children: A pilot investigation of the Penn Resiliency Program. *International journal of environmental research and public health*, *11*(4), 4125-4139.

19. Morris, K. (2004). *The Practice of Child Therapy.*