

EMOTIONAL AND BEHAVIORAL PROBLEMS IN RESIDENTIAL-CARE ADOLESCENTS: LINKS WITH ATTACHMENT AND ALEXITHYMIA.



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RESULTS

OBJECTIVE

Adolescents in residential-care show high rates of emotional and behavioral problems (71-76%; Jozefiak et al., 2016), which have been empirically linked with lower security or disorganization in attachment representations (Allen, Moore, Kuperminc & Bell, 1998; Bakermans-Kranenburg et al., 2011; Muzi, Bizzi & Pace, 2018), as well as with the adolescent's levels of alexithymia, especially in terms of Difficulty to Identifying Feelings [DIF] and Difficulty to Describing Feelings [DDF] (Di Trani et al., 2013).

Compared with normative peers, teenagers in residential-care are more at risk to show:

- disorganized or insecure attachment classifications and less security in attachment (Quiroga, Hamilton-Giachritsis & Fanés, 2017);
- higher levels of alexithymia (Manninen et al., 2011; Muzi, 2018).

However, to our knowledge, no studies before investigated jointly attachment and alexithymia as possible risk factors for the levels of emotional and behavioral problems showed by institutionalized adolescents, as we aimed to do in this preliminary report.

AIMS:

- I. To investigate the *relations* among attachment, alexithymia and emotional-behavioral problems in residential-care adolescents.
- II. To assess the risk of emotional-behavioral problems, considering attachment and alexithymia as predictors.

METHODS

Participants were 26 adolescents aged 13 - 18 (M = 16.4, SD = 1.3; 69% males), placed in residential-care due to their adverse past experiences (76% difficulties in their family of origin, such abuse, neglect or parental mental disease; 24% delinquency), enrolled trough the social and health services in Northern Italy to participate in a larger multi-method research that included other high-risk groups, *i.e.* late-adopted and in foster-care.

Procedure. The adolescents were assessed in home-visiting in their residentialhouses, during two individual sessions lasting about one hour and a half. Before the data collection, all the participants and the legal care-taker signed an informant consent sheet to take part into the larger research, that has been approved by the Ethical Committee for Research (CER) of the University of Genoa.

Measures.

- Child Behavior Check List 6-18 (CBCL; Achenbach & Rescorla, 2001), a parentreport questionnaire, compiled by educators for this study, to measure the levels of emotional-behavioral problems;
- Friends and Family Interview (FFI; Steele, Steele & Kriss, 2009; Pace, 2014), a audio-taped semi-structured interview for age 10-17 years, that assess the attachment representations, in terms of classifications and on corresponding scales (Secure [S];Insecure-dismissing [Ds]; Insecure-Preoccupied [P]; Disorganized [D]).
- Toronto Alexithymia Scale (TAS-20; Bagby, Parker & Taylor, 1994), a self-report questionnaire to detect the levels of alexithymia, in a global score and in terms of factors DIF, DDF and Externally Oriented Thinking [EOT].

Relations

In line with other studies (Allen et al., 1998; Di Trani et al., 2013; Muzi et al., 2018), correlations on residential-care adolescents revealed that higher levels of emotional-behavioral problems were associated with:

- lower attachment security (rs =-.551, p = .012)
- higher levels of alexithymia, in terms of Difficulty to Identifying Feelings (DIF; rs =.428, p =.029) and **Difficulty to Describing Feelings** (DDF; rs =.522, p =.006).

II. Risk assessment

As shown in *Figure 1*, a multiple regression revealed that a model with predictors attachment security and alexithymia's factors DIF and DDF predicted 46% of the total level of emotional-behavioral problems (adjusted R^2 =.46, p =.027).

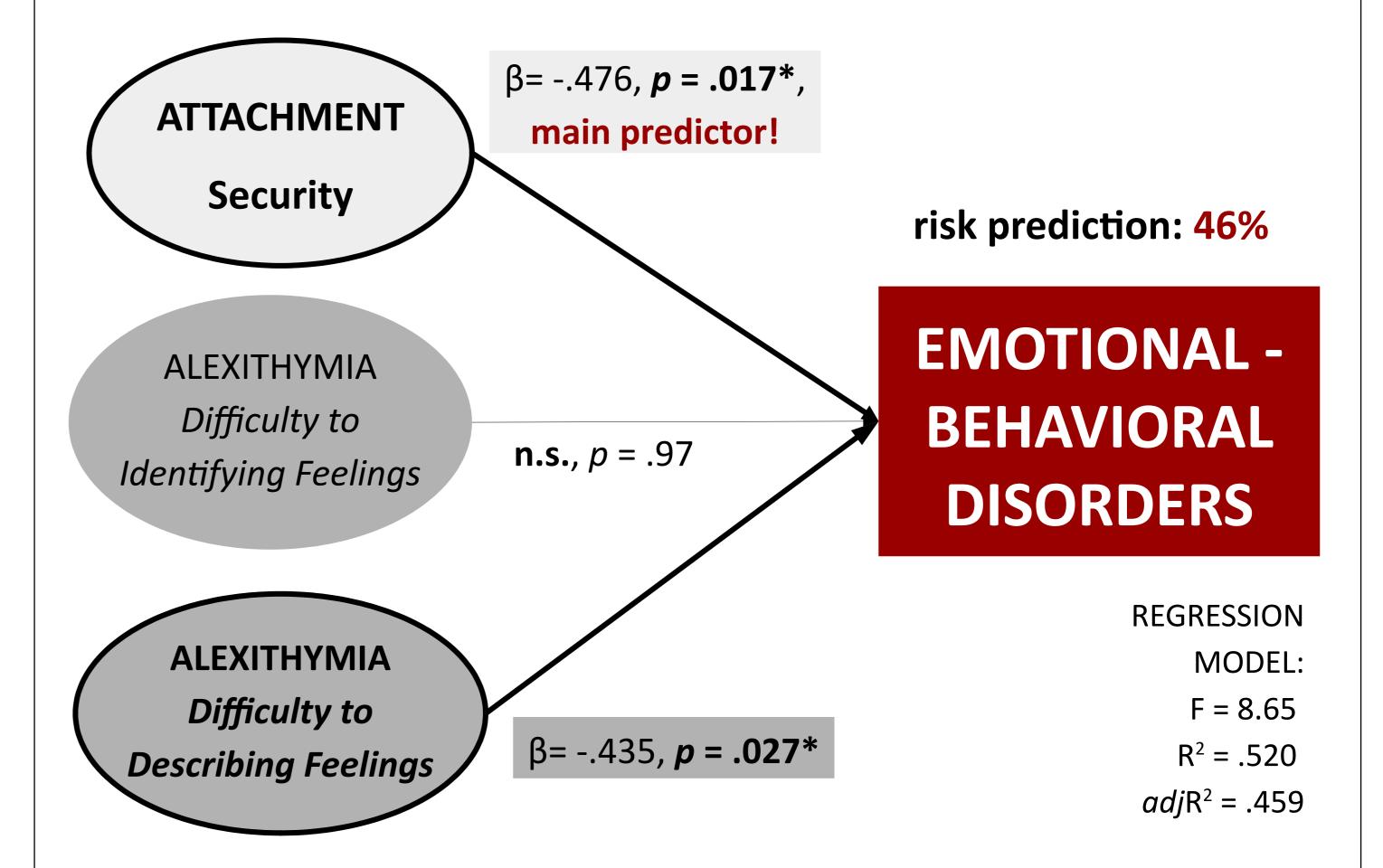


Figure 1. Predictors for emotional-behavioral problems in residential-care adolescents.

Analysis of β also highlighted that the only significant predictors were attachment security and the alexithymia's factor Difficulty to Describing Feelings.

CONCLUSIONS

The results aligned with the studies on normative adolescence (Allen et al., 1998; Di Trani et al., 2013) suggesting that, even for adolescents in residential-care, lower security in attachment and higher alexithymia - in terms of difficulties to identifying and to describing feelings - may be risk factors for the levels of emotional-behavioral problems.

We may suggest the potential preventive and clinical utility of assessing attachment representations and alexithymia in teenagers in residential-care, because they could be related to their rate of behavioral and emotional problems.

A multi-method assessment - e.g. using clinical interviews for alexithymia, as done in the larger study that includes this report - could be useful to direct the intervention. For example, as suggested by these results, adolescents could be supported in gaining trust in meaningful relationships – fostering their attachment security - and in their ability to describe their feelings to others, because it could be protective for their mental health.

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