**PARENT-CHILD ATTACHMENT STYLES AND PSYCHOLOGICAL WELLBEING OF SCHOOLING ADOLESCENTS (*14-19 years of age*)**

**IN KIGOMA DISTRICT, TANZANIA**

**SITTA HALILA SUSU**

**21/MSC/BU/G/1002**

A Research Proposal Submitted to School of Graduate Studies Bugema University, in Partial Fulfillment of Requirements for the Award of Master

Degree of Science in Counselling Psychology

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# **DECLARATION**

**I, SITTA HALILA SUSU** hereby declare that this thesis titled **“PARENT-CHILD ATTACHMENT STYLES AND PSYCHOLOGICAL WELLBEING OF SCHOOLING ADOLESCENTS IN KIGOMA DISTRICT, TANZANIA”** is my original work. No portion of this work has been submitted for any degree or another qualification in this university and all sources used have been acknowledged and adequately referenced

**Signature: ……………………………………………...**

**SITTA HALILA SUSU**

# **DEDICATION**

This thesis proposal on “**PARENT-CHILD ATTACHMENT STYLES AND PSYCHOLOGICAL WELLBEING OF SCHOOLING ADOLESCENTS IN KIGOMA DISTRICT, TANZANIA**” is dedicated to my beloved family especially my parents, sisters, brothers and friends for their moral and spiritual and financial support through my study session. God blesses them and protect them all the time.

# **ACKNOWLEDGEMENT**

First and foremost, none is perfect in this world except GOD and His beloved Son Jesus Christ, and I thank you and praise you load all the time. I praise you forever. In the most humble way, I thank and appreciate Bugema University for giving me the chance to further my studies. I also thank my supervisors for all their inputs, directions and support they gave me for this research to be a success and my fellow students as well as my friends for supporting me in their various capacity.

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**CHAPTER ONE**

**INTRODUCTION**

**Background of the Study**

World-over, more is known about links between parent-child attachment (relationship) and the psychological wellbeing. For instance, Seligman (2012) advances that psychological well-being entails positive emotions about one’s past for example gratitude and one’s future like hope, optimism, in addition to contentment with one’s present such as a positive effect. Keyes (2019) operationalizes positive mental health as including indicators of social well-being (positive interpersonal relationships, social contribution, community integration) and psychological well-being for example personal growth, purpose in life, self-acceptance, in addition to emotional well-being like akin to the positive affect and life satisfaction components of subjective well-being. This model yields mental health categories that range from languishing (equivalent to mental unhealth) to ﬂourishing high hedonic/emotional well-being in addition to positive functioning in more than half of the social and psychological domains.

Historically, the concept or the theory of attachment was proposed by Bowlby (1980) more than three decades ago to describe the fundamental bond between parent and infant in terms of secure, and insecure attachment styles that is essential to survival and development and how it associated with psychological wellbeing of the child. Attachment is based on ethology, and Bowlby conceptualized attachment as a biologically based repertoire of organized behaviours for example infants’ crying, smiling, clinging and proximity seeking that foster infant-parent interactions and maximize survival. Under conditions of stress such as illness, unfamiliar environments and being left alone, infants direct certain behaviours toward their caregivers to gain protection and safety (Carlson, Sampson, and Sroufe, 2013). In the absence of stress, proximity-seeking behaviours are reduced and the attachment system enables children to engage in other adaptive behaviours that promote exploration and mastery of the environment (Carlson, Sampson, and Sroufe, 2013). Similarly, all dimensions of parental attachment (trust, communication, alienation) are significantly related to wellbeing variables. Specifically, attachment to both parents is positively and meaningfully related to life satisfaction and positive affect, and meaningfully and negatively to somatic complaints, stress and negative affect. The attachment system, therefore, allows children to relate to their parents both as a ‘secure base’ from which to explore, and as a ‘safe haven’ for obtaining support and protection in times of perceived threat.

A cross-sectional study of 587 American middle school students found that in early adolescence, high life satisfaction was much more tied to positive relationships (in terms of attachment [perceptions of trust, support, care) with parents than with friends (Ma and Huebner 2018). While high attachment to both sources co-occurred with greater life satisfaction, parent attachment explained 19 % of the unique variance in early adolescents’ life satisfaction scores, in comparison to 3 % unique variance explained by peer attachment. Further, peer attachment partially mediated the inﬂuence of parent attachment on girls’ life satisfaction, with greater parent attachment predicting greater peer attachment, which, in turn, linked to higher life satisfaction. Thus, while adolescents’ peer relationships take on signiﬁcant meaning during youth, relationships within the family set the foundation for the potential beneﬁts of strong friendships on adolescent psychological well-being (Willis, & Limb, 2016). However, this study was done in a developed country setting yet the current study is being carried in a developing country within Africa.

In South Africa, it is indicated by World Health Organization (2020) that in every 10 adolescents, 6 of them demonstrate mental health problems. According to WHO (2020), some adolescents are at greater risk of mental health conditions due to poor attachment or relationship with their parents. In a study by Allen, Grande, Tan, and Loeb, 2018), it was realized that parent adolescent attachment had a great influence towards the psychological wellbeing of the adolescent. When parents provide positive financial, social and emotional attachment with their children, especially the adolescents, the wellbeing of such children tends to be positive.

Tanzania National Data of People with mental health challenges (2020) indicates that 5 in every 10 adolescents in Tanzania are experiencing mental health problems. Based on the report, a number of psychological wellbeing outcome determinants such as poverty, drug use, hard living condition, being orphan, stigma, discrimination or exclusion, or lack of access to quality support and services are reported to be associated with increased mental health problems among the adolescents in Tanzania. However, the current study is not interested in the factors associated to poor psychological wellbeing among adolescents, but focusing on the relationship between parent-child attachment on psychological wellbeing of adolescent.

In Kigoma District, Mental Health Report (2021) indicates that 3 in every 10 adolescents aged 14-19 years were reported to have psychological wellbeing outcome in 2019, and in 2020 statistics shows an increase to 5 in every 10 adolescents being affected while in 2021 it was reported that 6 in every 10 adolescents experienced mental health challenges, despite efforts in ensuring that schools have guidance and counseling teachers, health facilities provide mental health services and religious groups provide necessary counselling services to the adolescents, a study on the association between parent adolescent attachment and psychological wellbeing of adolescent is yet to be carried out in Kigoma District. Curiously, previous studies (Seligman, 2012, Keyes, 2019) have shown that there is an association between parent-child attachment on psychological wellbeing of adolescents, hence motivating the researcher to carry out this study and establish the association between parent-child attachment and psychological wellbeing of adolescents in Kigoma District, Tanzania.

**Statement of the Problem**

According to World Health Organization (2020), in order to improve the psychological wellbeing of the adolescents, the government of Tanzania has conditioned each school to have a qualified guidance and counseling teacher, health facilities to provide mental health services to the affected members of the public and religious groups to provide necessary counselling services to the people.

According to Tanzania **Ministry of Education** and Vocational Training (2020) report, 10.7%–21.1% of school aged (14-19 years) adolescents experience psychological challenges associated with depressive symptoms. However, the situation in Kigoma District Tanzania indicates that 3 in every 10 adolescents aged years (30%) were reported to have psychological wellbeing challenges in 2019, and in 2020 statistics shows an increase to 4 in every 10 adolescents (40%) being affected while in 2021 it was reported that approximately 5 in every 10 adolescents (50%) experienced mental health challenges (Kigoma District Mental Health Report, 2021).

Despite such efforts, schools guidance and counseling teachers have still demonstrated an increasing trend in deteriorated psychological wellbeing of adolescents in Kigoma District (Kigoma District Mental Health Report, 2022). Consequently, many adolescents have opted to drop out of school, engage in drugs, prostitution, violence, theft, early marriage and a few have attempted suicide. Therefore, if something is not addressed in regard to the way of life, parental support, then the District may end up with less or unproductive citizens in years to come. This therefore, motivates the researcher to carry out this study and establish the association between parent-child attachment and psychological wellbeing of adolescents in Kigoma District, Tanzania.

**Research Questions**

1. What is the association between secure parent-child attachement style and psychological wellbeing of adolescents in Kigoma District?
2. What is the association between insecure (ambivalent, and avoidant) parent-child attachment style and psychological wellbeing of adolescents in Kigoma District?
3. What is the effect of school factors on psychological wellbeing of adolescents in Kigoma District?

**General Objective**

The general objective of this study it to establish the association between parent-child attachment style and psychological wellbeing of adolescent in Kigoma District, Tanzania so as to address the increasing cases of mental health problems among the adolescents.

**Specific Objectives**

1. To establish the association between secure parent-child attachment style and psychological wellbeing of adolescents in Kigoma District.
2. To establish the association between insecure (ambivalent, and avoidant) parent-child attachment style and psychological wellbeing of adolescents in Kigoma District.
3. To determine the effect of school factors on psychological wellbeing of adolescents in Kigoma District.

**Hypothesis of the Study**

1. There is no association between secure child attachment styles and psychological wellbeing of adolescents in Kigoma District.
2. There is no association between insecure child attachment styles and psychological wellbeing of adolescents in Kigoma District.
3. There is no effect of school factors on psychological wellbeing of adolescents in Kigoma District.

**Significance of the Study**

**To Adolescents:** Findings of this study will provide help to the adolescents who will learn about the association between parent-child secure and insecure attachment styles on their psychological wellbeing as well as get help from relevant stakeholders in ensuring that they address the problem of psychological wellbeing in future.

**To government and Policy Makers**: Findings of this study will provide relevant information to the government of Tanzania and other policy making bodies in the world in regard to secure and insecure attachment styles on psychological wellbeing of adolescents. Such information will be used as basis for new laws which will protect adolescents from mental health problems in future.

**NGOs:** Findings of this study will be of great help to NGOs who can use the data in coming up with projects to help the affected adolescents in the area. NGOs can establish guidance and counseling projects in schools, community and other relevant areas to assist affected adolescents.

**Scope of the Study**

This study will be carried out in Kigoma District. Kigoma Region (Mkoa wa Kigoma in Swahili) is one of Tanzania's 31 administrative regions. The regional capital is the city of Kigoma. Kigoma Region borders Kagera Region, Geita Region, Katavi Region, Tabora Region, DRC and Burundi. The study will be carried out in Kigoma District because of the increasing cases of poor psychological wellbeing of the adolescents.

This study is focusing on establishing the association between parent-child attachment styles and psychological wellbeing of adolescents in Kigoma District. The independent variable (parent-child attachment style) is indicated (secure, ambivalent, and avoidant), while the dependent variable (psychological wellbeing of adolescents) is indicated by depression and behavioral development.

The study will consider a one year timeframe of August 2022 to August 2023 for the proposal, data collection and project to be completed. In addition, an relevant literature from 2010 to 2023 is considered in this study.

**Limitations of the Study**

The study intends to use adolescents aged 14-19 years as the target population. However, this group of respondents may experience inferiority complex which may make them fear to provide data regarding their relationship and attachment with their parents as well as their psychological wellbeing. However, the researcher will explain the purpose of the study to them and promise to treat their data with confidentiality and privacy.

The study will be limited to a questionnaire as the main tool of data collection. However, a questionnaire, especially with closed ended questions seem to be biased since it does not give a room for the respondents to express themselves. However, the study considers an interview guide containing open ended questions which will assist in providing qualitative data supporting the quantitative data.

**Theoretical Framework**

**Attachment Theory by Bowlby (1980)**

This study will be based on the theory of child attachment proposed by Bowlby (1980). The theory describes the fundamental bond between parent and infant that is essential to survival and development. Attachment is based on ethology, and Bowlby conceptualized attachment as a biologically based repertoire of organized behaviours for example infants’ crying, smiling, clinging and proximity seeking that foster infant-parent interactions and maximize survival. Under conditions of stress such as illness, unfamiliar environments and being left alone, infants direct certain behaviours toward their caregivers to gain protection and safety. In the absence of stress, proximity-seeking behaviours are reduced and the attachment system enables children to engage in other adaptive behaviours that promote exploration and mastery of the environment.

**Child-Adolescent Attachment Theory by Ainsworth (1969)**

Many theories of attachment involved an all-or-nothing process. This means researchers like Tuteur (2020) and Schechter & Willheim, 2009) have often focused on why some attachments are able to occur or why they do not. Ainsworth went against this body of research because she believed that attachments were formed through a process that was much more complex than previously discussed. The Ainsworth (1969) attachment theory focuses on providing an explanation as to why there are individual differences in attachment. Newborns often attach to people and have a primary attachment point, which is usually their mother. Young children also form numerous attachments to certain family members and friends. Unlike adults, however, these infants and youth are unable to verbalize why they make these attachments.

To create her attachment theory, Ainsworth (1969) would create an observational technique that she called the Strange Situation Classification. Devised in 1969, it would become the foundation of her ideas about individualized attachment. Ainsworth wanted to investigate the security of attachments in young children. This caused her to develop an 8-step procedure to watch how children would display attachment behaviors and what their individualized style happened to be. Each step in the strange situation scenario would last for about 3 minutes, except for the initial stage that included the experimenter, which would only last for a minute or less. The mother and child would start out alone. Then a stranger would join the mother and the infant. The mother would then leave the child alone with the stranger. In the next stage, the mother would return to the child and the stranger would leave. Then the mother leaves and the child is left alone. The stranger then returns, which is followed by the mother returning and the stranger leaving.

Ainsworth (2005) designed a scoring scale that could then be used during the observations made during this 8-stage process. There were four points of emphasis that were based on the interaction behaviors that the child would direct at the mother when she returned and was reunited with the child. The proximity of the child to the mother and any contact-seeking behaviors that were evident. How long that contact was maintained. If there was any avoidance of proximity or contact with the mother. Resistance to contact from the mother by the child or resistance to comforting efforts (Ainsworth, 2005).

Each behavioral episode was directly scored for 15 seconds using the attachment theory from Ainsworth (Ainsworth, 2005). Then each behavior would be rated by the observer on a scale of 1-7 based on the behavior intensity that was displayed. Through her observational work, Mary Ainsworth discovered three primary attachment styles that may affect children. Type A attachments were those that caused the child to be insecure and avoidant.Type B attachments were those that were secure. Type C attachments were insecure and resistant.

**Adolescent-Adult Attachment Theory by Bartholomew and Horowitz (1991)**

Bartholomew and Horowitz proposed four adult attachment styles in terms of working models of self and others; including secure, dismissive, preoccupied, and fearful. Adult attachment styles derived from past relationship histories are conceptualized in the form of internal working models. Here individuals can hold either a positive or negative belief of self or also a positive or negative belief of others, thus resulting in one of four possible styles of adult attachment. The model of others can also be conceptualized as the avoidant dimension of attachment, which corresponds to the level of discomfort a person feels regarding psychological intimacy and dependency. Alternatively, the model of self can be conceptualized as the anxiety dimension of attachment, relating to beliefs about self-worth and whether or not one will be accepted or rejected by others (Collins & Allard, 2001).

Therefore, since the theories talks about parental attachment and its association with wellbeing variables of the child, it is suitable and applicable in this study which intends to establish the association between parent-child attachment and psychological wellbeing of adolescents in Kigoma District, Tanzania.

**Conceptual Framework**

Figure 1 of the study shows the association between parent-child attachment and psychological wellbeing of adolescents in Kigoma District, Tanzania. The independent variable (parent-child attachment) is indicated by trust, communication and alienation, while the dependent variable (psychological wellbeing of adolescents) is indicated by life satisfaction, stress status and depression symptoms.

**Independent Variables Dependent Variable**

**Psychological wellbeing of adolescents**;

* Self-Acceptance
* Positive Relationships with Others
* [Autonomy](https://en.wikipedia.org/wiki/Autonomy)
* Environmental Mastery
* A Feeling of [Purpose and Meaning in Life](https://en.wikipedia.org/wiki/Meaning_of_life)
* [Personal Growth and Development](https://en.wikipedia.org/wiki/Personal_development)

**Parental-child attachment styles**;

1. **Secure**style

Positive and Loved

1. **Insecure styles**

* **Ambivalent**

**Angry and confused**

* **Avoidant**

Unloved and rejected

Moderating Variables

* **School Factors;**
* School environment
* Teacher-child relationship
* Teacher-Parent Relationship

*Figure 1: Conceptual Framework, Source: Keyes, 2019*

The idea behind the use of this conceptual framework is to show how secure and insecure attachment styles influence psychological wellbeing of adolescents when other factors are constant. However, the moderating factors of school factors are suspected to influence the outcome between the independent variable and the dependent variable. The assumption is that, when parent child attachment is positive, then psychological wellbeing of adolescents is expected to be positive. And when there is negative parent-child attachment, then psychological wellbeing of adolescent or child is adversely affected.

**Operational Definition of Terms**

**Parent-child attachment:** In this study, it refers to how parent and the child interact to each other based on their relationship as parent and child in Kigoma District, Tanzania. John (2010) devoted extensive research to the concept of attachment, describing it as a "lasting psychological connectedness between human beings." Bowlby shared the psychoanalytic view that early experiences in childhood are important for influencing development and behavior later in life.

**Secure: In this study, it refers to a parent child attachment whereby the child becomes distressed when the parents are not at home** **in Kigoma District, Tanzania.** Secure parental attachment, according to Nanu (2015) refers to a situation whereby children tend to have a safe childhood; they were able to rely on their parents and had the courage and confidence to venture out on their own. When they grow up, they tend to feel safe in their relationships, connected to their partners, and confident in their love and support. Yet, they still feel free and independent. This will be measured using a five-point Likert scale; 1 = Strongly disagree will be interpreted as very low level with a mean range scale of (1.00 -1.79), 2 = Disagree will be interpreted as low level with a mean range scale of (1.80-2.59, 3 = somehow agree will be interpreted as moderate level with a mean range scale of (2.60-3.39), 4 = Agree will be interpreted as high level of with a mean range scale of (3.40-4.19), 5 = Strongly agree will be interpreted as very high level with a mean range scale of (4.20-5.00).

**Ambivalent: In this study, this refers to parent child attachment whereby the child become very distressed when the parents are not at home, not putting attention on the child** **in Kigoma District, Tanzania.** According to Nanu (2015), a**n ambivalent attachment style or anxious-preoccupied attachment style develops in children who inconsistently receive love and affection and can never rely on whether their parents will be available to them or not. This is also referred to as an anxious attachment. This insecure attachment style may lead to feelings of anger or jealousy in some people, and passive acceptance for others. It can also result in a child who is filled with insecurity and constantly looking to fill the void left by inattentive parents (Otis, 2015).** **This will be measured using a five-point Likert scale; 1 = Strongly disagree will be interpreted as very low level with a mean range scale of (1.00 -1.79), 2 = Disagree will be interpreted as low level with a mean range scale of (1.80-2.59, 3 = somehow agree will be interpreted as moderate level with a mean range scale of (2.60-3.39), 4 = Agree will be interpreted as high level of with a mean range scale of (3.40-4.19), 5 = Strongly agree will be interpreted as very high level with a mean range scale of (4.20-5.00).**

**Avoidant**: In this study, this refers to parent child attachment whereby the child show no distress, seem to be okay when the parent is not at home in Kigoma District, Tanzania. According to John (2010) addolescents who fall within the category of an avoidant attachment style deliberately distance themselves from their partners emotionally. They prefer being isolated and not relying on anyone. They are very independent and can be dismissive of the idea of needing anyone. They often choose to remain detached and unemotional. This will be measured using a five-point Likert scale; 1 = Strongly disagree will be interpreted as very low level with a mean range scale of (1.00 -1.79), 2 = Disagree will be interpreted as low level with a mean range scale of (1.80-2.59, 3 = somehow agree will be interpreted as moderate level with a mean range scale of (2.60-3.39), 4 = Agree will be interpreted as high level of with a mean range scale of (3.40-4.19), 5 = Strongly agree will be interpreted as very high level with a mean range scale of (4.20-5.00).

**Psychological wellbeing of adolescents:** In this study, it refers to how the adolescent demonstrate self-acceptance, positive relationships with others, autonomy, environmental mastery, a feeling of purpose and meaning in life, and personal growth and development in Kigoma District, Tanzania.

**Self-Acceptance:** Self-acceptance can be defined as: feelings of satisfaction with one's self despite deficiencies and regardless of past behaviors and choices in Kigoma District, Tanzania. According to Shepard (1979), self-acceptance is an individual's satisfaction or happiness with oneself, and is thought to be necessary for good mental health.This will be measured using a five-point Likert scale; 1 = Strongly disagree will be interpreted as very low level with a mean range scale of (1.00 -1.79), 2 = Disagree will be interpreted as low level with a mean range scale of (1.80-2.59, 3 = somehow agree will be interpreted as moderate level with a mean range scale of (2.60-3.39), 4 = Agree will be interpreted as high level of with a mean range scale of (3.40-4.19), 5 = Strongly agree will be interpreted as very high level with a mean range scale of (4.20-5.00).

**Positive Relationships with Others:** In this study, it refers to traits such as**forming good habits, thinking positive, behaving with kindness and respectable manners** are essential to forming positive relationships with other in Kigoma District, Tanzania. This will be measured using a five-point Likert scale; 1 = Strongly disagree will be interpreted as very low level with a mean range scale of (1.00 -1.79), 2 = Disagree will be interpreted as low level with a mean range scale of (1.80-2.59, 3 = somehow agree will be interpreted as moderate level with a mean range scale of (2.60-3.39), 4 = Agree will be interpreted as high level of with a mean range scale of (3.40-4.19), 5 = Strongly agree will be interpreted as very high level with a mean range scale of (4.20-5.00).

[**Autonomy**](https://en.wikipedia.org/wiki/Autonomy)**:** In this study, it refers to Self- government; freedom to act or function independently among adolescents in Kigoma District, Tanzania. This will be measured using a five-point Likert scale; 1 = Strongly disagree will be interpreted as very low level with a mean range scale of (1.00 -1.79), 2 = Disagree will be interpreted as low level with a mean range scale of (1.80-2.59, 3 = somehow agree will be interpreted as moderate level with a mean range scale of (2.60-3.39), 4 = Agree will be interpreted as high level of with a mean range scale of (3.40-4.19), 5 = Strongly agree will be interpreted as very high level with a mean range scale of (4.20-5.00).

**Environmental Mastery:** Environmental mastery is the intellect that we are able to have an impact on the events in our lives and are capable of acting on our own behalf in Kigoma District, Tanzania. In this study, environmental mastery is associated with the individual adolescent’s ability to choose or create environments suitable to his or her psychic conditions. This will be measured using a five-point Likert scale; 1 = Strongly disagree will be interpreted as very low level with a mean range scale of (1.00 -1.79), 2 = Disagree will be interpreted as low level with a mean range scale of (1.80-2.59, 3 = somehow agree will be interpreted as moderate level with a mean range scale of (2.60-3.39), 4 = Agree will be interpreted as high level of with a mean range scale of (3.40-4.19), 5 = Strongly agree will be interpreted as very high level with a mean range scale of (4.20-5.00).

**A Feeling of**[**Purpose and Meaning in Life**](https://en.wikipedia.org/wiki/Meaning_of_life)**:** Though often used interchangeably, meaning and purpose are not the same in Kigoma District, Tanzania. Meaning refers to how we “ make sense of life and our roles in it,” while purpose refers to the “ aspirations that motivate our activities ” (Ivtzan et al., 2016). In this study, this terms will refer to the value adolescents put in life when doing anything. This will be measured using a five-point Likert scale; 1 = Strongly disagree will be interpreted as very low level with a mean range scale of (1.00 -1.79), 2 = Disagree will be interpreted as low level with a mean range scale of (1.80-2.59, 3 = somehow agree will be interpreted as moderate level with a mean range scale of (2.60-3.39), 4 = Agree will be interpreted as high level of with a mean range scale of (3.40-4.19), 5 = Strongly agree will be interpreted as very high level with a mean range scale of (4.20-5.00).

[**Personal Growth and Development**](https://en.wikipedia.org/wiki/Personal_development)**:** According to Rieck (2016), personal development is a process concerned with specific aspects of the individual: the development of ‘what’, and the ways this can be planned, achieved and evaluated. Personal growth, on the other hand, is a more generic process having to do with the totality of the individual; it is always judged in terms of values. In this study, it refers to whether the adolescents have developed life skills, knowledge, wisdom and experience about life in Kigoma District, Tanzania. This will be measured using a five-point Likert scale; 1 = Strongly disagree will be interpreted as very low level with a mean range scale of (1.00 -1.79), 2 = Disagree will be interpreted as low level with a mean range scale of (1.80-2.59, 3 = somehow agree will be interpreted as moderate level with a mean range scale of (2.60-3.39), 4 = Agree will be interpreted as high level of with a mean range scale of (3.40-4.19), 5 = Strongly agree will be interpreted as very high level with a mean range scale of (4.20-5.00).

**School Factors:** In this study, it refers to school environment, teacher-child relationship and teacher-parent relationship suspected to affect the psychological wellbeing of adolescents in Kigoma District, Tanzania.

**School environment:** In this study, it refers to the layout of the school on whether it is attractive or not to the adolescent in Kigoma District, Tanzania. Does the school have playgrounds, good specious classroom, library and other facilities or not. This will be measured using a five-point Likert scale; 1 = Strongly disagree will be interpreted as very low level with a mean range scale of (1.00 -1.79), 2 = Disagree will be interpreted as low level with a mean range scale of (1.80-2.59, 3 = somehow agree will be interpreted as moderate level with a mean range scale of (2.60-3.39), 4 = Agree will be interpreted as high level of with a mean range scale of (3.40-4.19), 5 = Strongly agree will be interpreted as very high level with a mean range scale of (4.20-5.00).

**Teacher-child relationship**: In this study, it refers to the interaction between the teacher and the child, based on whether it is good or not in terms of communication, listening, attending to the child issues and helping the child when in need in Kigoma District, Tanzania. This will be measured using a five-point Likert scale; 1 = Strongly disagree will be interpreted as very low level with a mean range scale of (1.00 -1.79), 2 = Disagree will be interpreted as low level with a mean range scale of (1.80-2.59, 3 = somehow agree will be interpreted as moderate level with a mean range scale of (2.60-3.39), 4 = Agree will be interpreted as high level of with a mean range scale of (3.40-4.19), 5 = Strongly agree will be interpreted as very high level with a mean range scale of (4.20-5.00).

**Teacher-Parent Relationship:** In this study, it refers to the interaction between the parent and the teacher, based on whether it is good or not in terms of communication, listening, and helping the adolescent on behalf of the parent in Kigoma District, Tanzania. This will be measured using a five-point Likert scale; 1 = Strongly disagree will be interpreted as very low level with a mean range scale of (1.00 -1.79), 2 = Disagree will be interpreted as low level with a mean range scale of (1.80-2.59, 3 = somehow agree will be interpreted as moderate level with a mean range scale of (2.60-3.39), 4 = Agree will be interpreted as high level of with a mean range scale of (3.40-4.19), 5 = Strongly agree will be interpreted as very high level with a mean range scale of (4.20-5.00).

**CHAPTER TWO**

**LITERATURE REVIEW**

**Introduction**

This chapter contains literature review on parent-child attachment style and psychological wellbeing of adolescent. Source of the literature is published journals, articles and reports. Aim of the literature review is to review the views of other researchers and scholars for the identification of the study gaps.

**Parental-child attachment styles**

This section of the study contains literature on parental-child attachment styles covering three attachment styles of secure, ambivalent and avoidant on how such attachment styles influence psychological wellbeing of adolescents.

**Secure Attachment Style and Psychological wellbeing of adolescents**

Secure attachment relationships is associated with several positive outcomes for adolescents. The literature review by Jiang, Huebner, & Hills, (2013) shows that securely attached adolescents have greater life satisfaction, self-esteem (Huntsinger & Luecken, 2004), perceived social competence (Boling, Barry, Kotchick, & Lowry, 2011), emotional intelligence (Nanu, 2015) and resilience (Bender & Ingram, 2018). Despote the fact that the research suggest that secure attachment has a significant predictive role on self-efficacy of adolescents, this is yet to be established among the adolescents in Kigoma District.

A recent study by Llorca, Cristina Richaud, and Malonda (2017) revealed, on a sample of 417 adolescents, that peer attachment positively correlated to their character development. Furthermore, Rieck (2016) revealed that higher levels of secure attachment were positively related to greater social self-efficacy. Pan, Zhang, Liu, Ran, and Wang (2016) reported that secure attachment relationship with parents and peers is a significant predictor of Chinese young adolescents’ emotional self-efficacy. Despite the fact that Rieck (2016) and others revealed that higher levels of secure attachment were positively related to greater social self-efficacy, this is yet to be described in relation to how secure attachment style influence adolescent psychological wellbeing in Kigoma District.

Adolescence is amongst the most rapid stage of human development. It is the period to create knowledge and skills, learn to manage emotions, obtain attributes and capacities and relationships with parents and peers (Otis, 2015), and all these aspects are important for enjoying these years and assuming the roles of adults. The purpose of the study by Dharvinder, Karuna and Arti (2021) was to examine the relationship between parental attachment, self-esteem and psychological wellbeing of adolescents. Methods: The participants were 292 adolescents with age ranging from 13 to 18 years. Inventory for parent and peer attachment (IPPA) by Armsden and Greenberg self-esteem scale by Rosenberg and psychological wellbeing scale by Ryff were used to measure the parental attachment, self-esteem, and psychological wellbeing in adolescents. Result: Results indicated that the the correlation value of parental attachment and psychological wellbeing was found to be 0.306. The value of correlation value for self-esteem and psychological wellbeing was found to be 0.342. Nuri, Direktör, & Bulut (2017) concluded that significant positive relationship was found between parental attachment, self-esteem, and psychological wellbeing. This section of the literature focus more on parental attachment with no clear correlation between secure attachment and psychological wellbeing of adolescents, hence calling for this study to assess and evaluate the effects of secure attachment on the wellbeing of adolescents in Kigoma District.

Bolat and Odacı (2016) found that securely attached adolescents demonstrated higher behavioral development, and self-efficacy in their career decisions. In another investigation, Makkiyan, Malekitabar, and Farahbakhsh (2016) reported that both securely attached blind and non-blind groups of female adolescents achieved higher emotional, social and general efficacy scores. These findings suggest that secure attachment style is an essential construct for adolescents’ self-efficacy beliefs. However, this has to be proven through a research assessing the association between secure attachment and psychological wellbeing of the adolescents in Kigoma District.

Early adolescence is an important phase of development characteristically to stretch between the ages of 10 and 14 from childhood to late adolescence. Throughout this crucial time, an adolescent undergoes a rapid change physically, cognitively, socially and emotionally (Hagan, Shaw, & Duncan, 2018). In Turkey and in other countries, young adolescents often move into a new and larger school settings that require them deal with challenging academic and social situations, and also cope with the stress factors associated with puberty (Finkenauer, Engels, & Meeus, 2012). The reviewed literature fail to put clearly how secure attachment affects adolescents’ psychological wellbeing.

**Insecure Attachment Style and Psychological wellbeing of adolescents**

**Ambivalent Attachment Style**

An ambivalent attachment style or anxious-preoccupied attachment style develops in children who inconsistently receive love and affection and can never rely on whether their parents will be available to them or not. This is also referred to as an anxious attachment. This insecure attachment style may lead to feelings of anger or jealousy in some people, and passive acceptance for others. It can also result in a child who is filled with insecurity and constantly looking to fill the void left by inattentive parents (Otis, 2015). Children with ambivalent attachment tend to believe that just because they are loved one day, does not mean they will still be loved the next. As a result, they develop a fear that those they love will leave them (Nuri, Direktör, & Bulut, 2017). Children may desire to love, strive for affection, and crave attention, but they are terrified those things will be fleeting. Children feel unsafe in their relationships romantic or social since they don't know if their significant other or friend will continue to want them around in a week, a month, or a year from now. This insecurity leads them to look for problems even if there are none, and as time goes on, it results in an internalization of the problem and repeated insecure attachment patterns. A child in this type of family dynamic will come to believe they are the problem, as is the case for most types of insecure attachments. Because they cannot see any situational reasons for the change in feelings, they start to believe it must be their fault that their behavior, personality, or even appearance are the cause for their parents' inconsistent affection. They may become convinced they are not good enough to receive the love and attention they want, or that they are not properly communicating their needs. As a result, they tend to have difficulty navigating their relationships with others (Tavakolizadeha, Tabarib, & Akbari, 2015). It is evident from the literature that ambivalent attachment style has negative outcome towards the wellbeing of adolescents, however, this has to be evaluated through this research to assess the association between ambivalent attachment style and adolescent psychological wellbeing in Kigoma District.

Attachment styles adopted by parents are essential in development of adolescent psychosocial wellbeing (Willis, & Limb, 2016). This phenomenon is more profound in blended families where there are multiple relationships that can lead to many challenges. However, with appropriate attachment styles adopted by parents such challenges can be mitigated. However, application of an ambivalent parental attachment style is said to promote the behavior of adolescents by making them learn and accept doing this the best way they can without entirely depending on their parents (Willis, & Limb, 2016). This needs to be researched on to establish the effects of ambivalent attachment style on the psychological wellbeing of the people in Kigoma District.

The purpose of a Gachenia and Kamunyu (2021) study was to assess the influence of attachment styles on adolescents’ self-esteem among secondary school students from blended family in Kiambu County, Kenya. Attachment theory by Bowlby guided this study. The study adopted a mixed method approach, descriptive causal effect design and pragmatic paradigm to guide the study. Multi-stage sampling method and inclusive /exclusive criteria were used. Firstly the study adopted survey method as the sampling technique because the total population of adolescents that came from blended families was unknown. Simple random sampling was used to select 9 schools and also determine the 5 classes to be sampled in each of these schools. Data was collected using questionnaires, counsellors’ interview schedule and focus group discussions. Data was analysed through descriptive statistics, statistical assumption tests, correlation tests- T- test and ANOVA analysis while qualitative data was analysed by use of narrative analysis. Results indicated that ambivalent attachment styles adopted by parents influence the establishment of adolescent psychosocial wellbeing, which is yet to be established in Kigoma District.

**Avoidant Attachment Style**

Attachment to both parents by adolescent is crucial for adolescent development for instance (Mónaco et al., 2019) suggest that adolescents that develop a secure relationship with both parents report strong emotional competence, higher satisfaction with life ,high self-esteem and less stress (Willis, & Limb, 2016). Findings in a study by Rosen, (2016) concur with that such support has a positive influence on adolescents’ satisfaction with life and their self-esteem. As noted above most previous studies had dwelt so much on paternal but not maternal attachment. However, avoidant parental attachment has proven to have both positive and negative contributions towards the psychological wellbeing of adolescents with a study by Mónaco et al., (2019) avoidant insecure attachment make adolescents stay away from their parents hence making it easy for them to develop and act in unwanted manner. It is the intention of this study to assess the association between avoidant attachment and adolescent psychological wellbeing in Kigoma District.

Attachment styles are indispensable elements in evoking human behavior. Precious and priceless social relations or social behavior of every individual is ever more determined by these styles only. Adapting to positive well-being at home, school and peer adjustments are the essential social capabilities expected from the adolescents in order to have effective behavior potentials (Willis, & Limb, 2016) Mostly, accomplishments and achievements of academic pursuits of adolescents seem to get initiated by the affectionate bond they receive either from their parents or from caretakers. Hence, the current study by Kumar & Sujan (2016) seeks to sketch the probable link between attachment styles on the social competence of the adolescent students. Here, sample consists of 1152 male and 1188 female adolescent students. The Attachment Styles Questionnaire and The Adolescent Social Competence Scale were used to collect relevant data. Suitable statistical analyses were adopted for analyzing the data. The findings showed that the attachment styles seem to persuade the social competence of the adolescent students, which is yet to be established in Kigoma District.

More is known about links between parent-child relation-ships and the cognitive component of subjective well-being in comparison to the affective component. While subjective well-being (and life satisfaction in particular) is a dominant indicator of well-being, other indicators of wellness and ﬂourishing merit consideration. For instance, Seligman (2002) advances that well-being entails positive emotions about one’s past (gratitude) and one’s future (hope, optimism) in addition to contentment with one’s present (positive affect). However, how the psychological wellbeing is influenced by parental attachment is yet to be established in Kigoma District.

Keyes (2009) operationalizes positive mental health as including indicators of social well-being (positive interpersonal relationships, social contribution, community integration) and psychological well-being (personal growth, purpose in life, self-acceptance) in addition to emotional well-being (akin to the positive affect and life satisfaction components of subjective well-being). This model yields mental health categories that range from languishing (equivalent to mental unhealthy) to ﬂourishing high hedonic/emotional well-being in addition to positive functioning in more than half of the social and psychological domains. Keyes (2009) explains more about social and psychological wellbeing, but does not indicate the association between avoidant attachment style and adolescent psychological wellbeing in Kigoma District.

**School Factors and Psychological wellbeing of adolescents**

School environment affects learners’ psychological wellbeing with the notuon that a good school environment reduces stress and promotes learner’s empotinal and social development (Stanly, & Bhubaneswar, 2016), whereas, learners’ social and emotional experiences influence learning processes and in turn affect learning outcomes. Schools that prioritize students’ well-being have a higher chance of improving their school environment through providing sporting facilities, good, spacious and attractive infrastructures such as classrooms and library (Stanly, & Bhubaneswar, 2016). Numerous variables related to school environment have been positively associated with better student psychological wellbeing and promotes students’ school performance (Yang, 2010).

A violent related school environment where children are bullied, canned and abused affects the psychological wellbeing of adolescent learners (Seligman, 2009). The prevalence of school violence (physical, psychological, and sexual), as well as bullying both in-person and online, is a key obstacle to a positive psychosocial wellbeing of many learners (Crisp, 2017). School violence has a significant impact on the physical and mental well-being of learners, their ability to learn and their educational outcomes. Victims and witnesses of school violence are more likely to miss school, have lower grades, and/or drop out of school entirely. School violence also contributes to their lower self-esteem, depression, anxiety, and other mental health issues (Seligman, 2011).

In a study by Jing et al (2020) examines the way in which teachers influence child-perceived peer social support and peer victimization for 2,678 children within 183 classrooms in preschool through grade three. Two levels of teacher influence are considered, namely teacher-child closeness and conflict relationships at the child-level, and teacher management of interpersonal interactions at the classroom-level. Results of multilevel regression models showed that teacher-child closeness was associated with the growth of child-perceived peer social support from fall to spring, whereas teacher-child conflict and teachers' behavior management practices were associated with the change in child-perceived peer victimization across the academic year. These associations were unique and above and beyond the influence of children's actual peer social interactions, including reciprocal friendships and the collective classroom reputation of peer victimization. Collectively, findings highlight the multi-faceted teacher roles in shaping children's perceptions of their peer social experiences during the earliest years of schooling.

Conversely, unsupportive relationships may impair development and amplify psychosocial problems and psychological distress. There is evidence that problematic teacher-pupil relationships are stronger predictors of later school-related adjustment than positive relationships. A study of over 3500 children followed from first to the third grade reported that children's psychosocial adjustment was associated with teachers' relationships with individual children and average classroom levels of teacher-child conflict and closeness (Ystgaard, 2007).

Academic and behavioural problems as far ahead as the eighth grade may be predicted by negative teacher-pupil relationships in kindergarten. Similar findings have been reported in older children whereby poor teacher-pupil relationship has adverse effect on the psychological wellbeing of the child. Teachers report that they need to provide higher levels of support and more behavioural regulation for children with whom they perceive that they have poor relationships (Ladd, Birch, and Buhs, 2009).

**Summary of Reviewed Literature and Identified Gaps**

Previous studies have discussed more on parent-child attachment styles on the wellbeing of adolescents in different parts of the world. For instance, Jiang, Huebner, & Hills, (2013) shows that securely attached adolescents have greater life satisfaction, self-esteem (Huntsinger & Luecken, 2004), perceived social competence (Boling, Barry, Kotchick, & Lowry, 2011), emotional intelligence (Nanu, 2015) and resilience (Bender & Ingram, 2018). In addition, a recent study by Llorca, Cristina Richaud, and Malonda (2017) revealed, on a sample of 417 adolescents, that peer attachment positively correlated to their character development. Furthermore, Rieck (2016) revealed that higher levels of secure attachment were positively related to greater social self-efficacy. Pan, Zhang, Liu, Ran, and Wang (2016) reported that secure attachment relationship with parents and peers is a significant predictor of Chinese young adolescents’ emotional self-efficacy. Despite the fact that Rieck (2016) and others revealed that higher levels of secure attachment were positively related to greater social self-efficacy, this is yet to be described in relation to how secure attachment style influence adolescent psychological wellbeing in Kigoma District.

Curiously, previous studies (Seligman, 2012, Keyes, 2019) have shown that there is an association between parent-child attachment in terms of trust, communication and alienation on psychological wellbeing of adolescents, whereby, according to Keyes (2019) attachment to both parents is positively and meaningfully related to life satisfaction and positive affect, and meaningfully and negatively to somatic complaints, stress and negative affect, which is yet to be established in the study area hence calling for this study to establish the association between parent-child attachment style and psychological wellbeing of adolescent in Kigoma District, Tanzania so as to address the increasing cases of mental health problems among the adolescents.

In addition, most of the literature provides qualitative description of the association between parent-child attachment with no quantitative description given by the researchers yet this current study intends to provide both quantitative and qualitative explanation and description of the association between parent-child attachment style and psychological wellbeing of adolescent in Kigoma District, Tanzania.

Lastly, there is no any study in the literature which has considered the use of either Attachment Theory by Bowlby (1980), Child-Adolescent Attachment Theory by Ainsworth (1969), Adolescent-Adult Attachment Theory by Bartholomew and Horowitz (1991) or the three theories in the same study, hence making this study a special one.

**CHAPTER THREE**

**METHODOLOGY**

This chapter provides the methods that will be used to conduct the study. It contains the research design, locale of the study, population of study, sample size and sampling procedures, method of data collection and instruments, data collection procedures, data quality control and data analysis techniques.

**Research Design**

The study will adopt a facility-based cross-sectional study design with a quantitative approach. The cross-sectional research design therefore, will be used because it allows collection of data at a single point in time which makes it relatively cheap and less time-consuming than other types of research. In addition, it allows the collection of data from a large pool of subjects. According to Creswell, (2015), a cross-sectional study is a type of research design in which you collect data from many different individuals at a single point in time. In cross-sectional research, one observes variables without influencing them. This study will apply both quantitative and qualitative research approaches. The quantitative approach will be used to collect and analyse numerical data. The quantitative approach will enable the overall summary of the study variables and investigation of relationships between the study variables.

**Locale of the Study**

This study will be carried out in Kigoma District. Kigoma Region (Mkoa wa Kigoma in Swahili) is one of Tanzania's 31 administrative regions. The regional capital is the city of Kigoma. Kigoma Region borders Kagera Region, Geita Region, Katavi Region, Tabora Region, DRC and Burundi. The study will be carried out in Kigoma District because of the increasing cases of poor psychological wellbeing of the adolescents.

**Study Population**

Kigoma District has an estimated 102,943 residents with 5,928 of them being adolescents aged 14 years to 19 years (Kigoma District Population Statistics, 2021). The area has a total of 31 private and public secondary schools and being a facility based cross-sectional study, selected schools will be considered in this study. The school students are targeted in this study because they are reported to be highly affected with high number of adolescents with psychological wellbeing challenges (Kigoma District Education Office, 2022).

**Target Population**

According to Amin (2005), the unit of analysis is the major entity that is being analysed in a study, and it is the 'what' or 'who' that is being studied. In social science research, typical units of analysis include individuals (most common), groups, social organizations and social artifacts. Therefore, this study will target 4 secondary schools as unit of analysis whereby the study is being carried out in secondary schools because the highest number of schooling adolescents aged 14 to 19 years are in secondary schools. The schools are targeted in this study because they are reported to be highly affected with high number of adolescents with psychological wellbeing challenges (Kigoma District Education Office, 2022). The specific Secondary schools are Masanga with 583 students, Buhande with 491 students, Katubuka with 571 students and Ujiji with 548 students as illustrated in Table 1.

**Sample Size**

The study will employ Sloven’s formula to determine the sample size. Sloven’s formula is

Where; N = total population [2,193]

n= total sample size.

E= desired margin error [0.05]

**Table 1: Target Population and Sample Size**

|  |  |  |  |
| --- | --- | --- | --- |
| **Name of School** | **Target Population** | **Sample Size** | **Sampling procedure** |
| Masanga Secondary School | 583 | 90 | Simple Random |
| Buhande Secondary School | 491 | 76 | Simple Random |
| Katubuka Secondary School | 571 | 88 | Simple Random |
| Ujiji Secondary School | 548 | 84 | Simple Random |
| **Total** | **2,193** | **338** | Simple Random |
| **School counsellors** | **4** | **4** | **Purposive/Census** |

**Sampling procedure**

This study will apply a simple random sampling technique to sample the adolescent study respondents. According to Yates, et al (2008), a simple random sample (or SRS) is a [subset](https://en.wikipedia.org/wiki/Subset) of [individuals](https://en.wikipedia.org/wiki/Individuals) (a [sample](https://en.wikipedia.org/wiki/Sample_(statistics))) chosen from a larger [set](https://en.wikipedia.org/wiki/Set_(mathematics)) (a [population](https://en.wikipedia.org/wiki/Statistical_population)) in which a subset of individuals are chosen [randomly](https://en.wikipedia.org/wiki/Randomization), all with the same probability. It is a process of selecting a sample in a random way. In SRS, each subset of k individuals has the same probability of being chosen for the sample as any other subset of k individuals. A simple random sample is an unbiased sampling technique. Therefore, in this study, a simple random sampling technique will be used through a lottery approach. For instance, the researcher will visit Masanja Secondary School with 583 folded pieces of papers indicated numbers 1 to 583 and request the students to pick one paper each (this will be done during evening assemble session at school). Those who will pick papers indicated numbers 1 to 90 will be given a questionnaire to answer while those who will pick papers indicated numbers 91 to 583 will be excluded from the study. Next day, the researcher will visit Buhande Secondary School with 491 folded pieces of papers indicated numbers 1 to 491. Those who will pick papers indicated number 1 to 76 will participate in answering the questionnaire while those who will pick papers indicated number 77 to 491 will not participate in the study. This method or approach will be used in the other two secondary schools as illustrated in Table 3.2.

**Data Collection Methods and Instruments**

**Data collection methods:**

Questionnaire survey and key informant interview methods will be applied in this study.

**Questionnaire survey**

Surveys are used as a method of gathering data in many different fields. They are a good choice when you want to find out about the characteristics, preferences, opinions, or beliefs of a group of people (Creswell, 2015). According to Creswell (2015), before you start conducting survey research, you should already have a clear [research question](https://www.scribbr.com/research-process/research-questions/) that defines what you want to find out. Based on this question, you need to determine exactly who you will target to participate in the survey. Therefore, in this study, the questionnaire survey will be carried out on adolescents in Kigoma.

**Interview Method**

According to Creswell (2012), the fundamental purpose of an interview as a method of data collection as verbal responses is to gather information thoroughly. The interview’s goals include exchanging ideas and experiences, extracting data on a wide range of topics, and allowing the interviewee to reflect on his past, define his present, and consider his future options. Various types of interviews are conducted to obtain research data. Therefore, in this study, the interview will be carried out on guidance and counseling teachers because they have the role of observing and managing the mental health and psychological wellbeing of the adolescents in schools hence they have the knowledge and experience regarding the psychological wellbeing of students in schools.

**Instruments of Data Collection**

In regard to tools of data collection, self-administered questionnaires and key informant interview guide will be used. A questionnaire survey method will be used for data collection in this study. The survey method will be used in this study because it permits the collection of large amounts of data from a large population in a short period of time making it less costly compared to other methods. According to Creswell (2015), a questionnaire survey can be used to investigate the characteristics, behaviors, or opinions of a group of people. The key informant interview will assist in providing qualitative data for the study. The study will employ these methods because they are time and cost effective and also provide a sense of physical evidence (Creswell, 2014). Thus, the study will be able to collect much data within a very short time.

**Self-administered questionnaire**

A self-administered questionnaire containing closed-ended questions will be used as the research instrument in this study. The questionnaire is chosen because of its associated advantages in terms of data processing and analysis costs which are cheaper in addition to taking little time (Creswell, 2015). According to Creswell (2015), a questionnaire is a [research](https://en.wikipedia.org/wiki/Research) instrument that consists of a set of [questions](https://en.wikipedia.org/wiki/Question) (or other types of prompts) for the purpose of gathering [information](https://en.wikipedia.org/wiki/Information) from respondents through survey or statistical study. A research questionnaire is typically a mix of close-ended questions and open-ended questions. Open-ended, long-term questions offer the respondent the ability to elaborate on their thoughts.

In this study, the questionnaire will consist of three sections: Section is the introduction section, A will capture data on demographic characteristics of the respondents, Section B will capture data on objective questions and section B will contain respondents suggestion open ended question.

# **Key Informant Interview Guide**

According to Creswell (2012), interviews provide a deeper understanding of social phenomena and they are most appropriate where little is already known about the study phenomenon or where detailed insights are required from individual participants. They are also particularly appropriate for exploring sensitive topics, where participants may not want to talk about such issues in a group environment. The researcher has deemed key informant interview approach in order to gather qualitative data. Thus, an interview guide will be administered to 5 school guidance and counseling teachers within Kigoma District.

**Validity and Reliability**

The data quality control will be achieved by ensuring the validity and reliability of the data collection instruments.

**Validity**

Validity is the appropriateness of the instrument. Content validity will be used since it focuses on the extent to which the content of an instrument corresponds to the content of the theoretical concept it is designed to measure (Amin, 2004). He further states that for an instrument to be accepted as valid, the average index should be 0.6 or above. The researcher with experts in terms of the supervisors and panel member will scrutinize the instruments and identified the relevant items to make corrections prior to data collection. The content validity index (CVI) will then be computed as follows;

**Reliability**

Reliability refers to the consistency of the instrument in measuring whatever it is intended to measure. The method of internal consistency will be adopted by the researcher; a pilot study will be carried out to check the consistency and logical flow of the questions before data collection. The researcher will rely on the experience of school guidance and counselling officers with the experience regarding the psycho-social and psychological wellbeing of the adolescents as well as other guidance and counselling experts in the District. The corrections made during the review will be used to revise the tool accordingly to ensure that they are reliable before data collection. In addition, a pretest of the questionnaire will be carried out from 20 adolescents from Musoma District as it has similar characteristics as Kigoma District in terms of poor state of adolescent psychological wellbeing. The Statistical Package for Social Scientists (SPSS) will be used to determine the reliability of the instrument before collecting the data. According to this study, a reliability coefficient of 0.7 and above is regarded as reliable and consistent according to Cronbach’s Alpha, (1951) as cited b Gill, Stewart, and Chadwick (2018).

**Data Collection Procedure**

After presenting the research proposal, the researcher will be given an approval letter from the Dean of Bugema University Graduate School and then he will present the letter to Kigoma District Administration and get an acceptance letter permitting him to proceed with data collection.

Step by step actions will be followed in the data collection process. On arrival at the district, the researcher will introduce himself and present the letter from the university. He will then explain the purpose of the study to the district administration who then will introduce the researcher to the households.

The researcher will also explain to the participants that the information which they will give will be used only for the purpose it is collected for and not any other. The researcher will assure the participants the utmost confidentiality in relation to the information that they will give. Thereafter the researcher will seek for their informed consent to participate in the study.

Also given the COVID-19 pandemic, the researcher will observe all the recommended standard operating procedures like wearing the face masks all the time, maintaining social distance, sanitizing and washing hands with soap regularly, and avoiding crowded places among others. Thus, the researcher will visit the study field while on a face mask and before distribution of the tools to the respondents, the researcher will sanitize himself and the respondent.

**Data Analysis**

**Qualitative Data Analysis**

The qualitative data will be analysed using thematic analysis that aims to find common patterns across a data set as it involves getting familiar with the data.

**Quantitative Data Analysis**

Before data analysis, data cleaning will be done to check correctness and completeness then will be coded using the operationalization codes. Then the data will be entered in the computer for analysis using the Statistical Package for Social Scientists (SPSS) version 26.

**Descriptive Statistics**

Then will analyze each objective. Objective 1, 2, and 3 will be analysed by descriptive statistics to process categorical data presented in frequency, percentage distributions, Means (M), and Standard Deviation (SD).

**Inferential Statistics**

Objective 4 will be analysed through inferential statistics. At bivariate level, Pearson's correlation moment test will be used to determine whether there is an association between parent-child attachment styles and psychological wellbeing of adolescents. The computed Chi-Square test will be compared to the critical value 0.05 level of significance at a 95% confidence interval. At multivariate level, all the variables that will be significant at the bivariate level will be included in a logistic regression model to determine the relationship between the independent variables and the dependent variable. The null hypothesis will be rejected when the calculated p-value is less than alpha value of 0.05 level of significance.

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**APPENDIX I: QUESTIONNAIRE**

Dear respondent,

I am **SITTA HALILA SUSU**, a student of Bugema University Graduate School currently carrying out a study purposefully to complete a research topic on “**PARENT-CHILD ATTACHMENT STYLES AND PSYCHOLOGICAL WELLBEING OF ADOLESCENTS IN KIGOMA DISTRICT, TANZANIA.”** I am humbly requesting you to take some of your time to fill this questionnaire. The responses will be treated with utmost confidentiality and purposely used for academic purpose only. Thank you in advance.

| **PART A: RESPONDENT’S BACKGROUND INFORMATIONS**  *(Please tick in the appropriate space [* **√]** *provided)* | |
| --- | --- |
|  | Gender: (I) Male [ ] (ii) Female [ ] |
|  | Age: (i) 14-16 [ ] (ii) 17-19 [ ] |
|  | Education Level: Primary [ ], Secondary [ ], Not in School [ ] |

**PART B: OBJECTIVE QUESTIONS**

***Please tick in the appropriate space* [√] *provided, for each statement indicating clearly your level of satisfaction by using the 5-point Likert scale below***

1-Strongly disagree, 2-Disagree, 3-Not Sure, 4-Agree and 5-Strongly agree

| **PARENTAL ATTACHMENT STYLES** | | | | | |
| --- | --- | --- | --- | --- | --- |
| **Secure** | **SD** | **D** | **NS** | **A** | **SA** |
| 1. You are not distressed when your parents are at home |  |  |  |  |  |
| 1. You always feel safe at home when parents are around |  |  |  |  |  |
| 1. You always rely on your parents |  |  |  |  |  |
| 1. You always have the courage to venture out on your own |  |  |  |  |  |
| 1. You always have confidence to do things on your own |  |  |  |  |  |
| 1. You feel safe in your relationship with other adolescents |  |  |  |  |  |
| 1. You feel confident in love |  |  |  |  |  |
| 1. You always free |  |  |  |  |  |
| 1. You feel independent |  |  |  |  |  |
| **Insecure Attachment Style** | **SD** | **D** | **NS** | **A** | **SA** |
| **Ambivalent** | **1** | **2** | **3** | **4** | **5** |
| 1. You get very distressed when your parents are not at home |  |  |  |  |  |
| 1. You get very distressed when your parents do not show attention to you |  |  |  |  |  |
| 1. You always feel hunger when your parents are not around |  |  |  |  |  |
| 1. You develop jealousy in other children when they are with their parents |  |  |  |  |  |
| 1. You always feel insecure when your parents are not around you |  |  |  |  |  |
| **Avoidant** | **1** | **2** | **3** | **4** | **5** |
| 1. You don’t show distress even when your parents are not at home. |  |  |  |  |  |
| 1. You like distancing yourself from your friends emotionally |  |  |  |  |  |
| 1. You don’t like relying on anyone including your parents |  |  |  |  |  |
| 1. You are dismissive of the idea of needing anyone |  |  |  |  |  |
| 1. You are always detached |  |  |  |  |  |

| **ADOLESCENT PSYCHOLOGICAL WELLBEING** | | | | | |
| --- | --- | --- | --- | --- | --- |
| **Self-Acceptance** | **SD** | **D** | **NS** | **A** | **SA** |
| 1. I feel happy with my life now |  |  |  |  |  |
| 1. I don’t regret my past choices |  |  |  |  |  |
| 1. I don’t regret my past negative behavioral outcomes |  |  |  |  |  |
| **Positive Relationships with Others** | **SD** | **D** | **NS** | **A** | **SA** |
| 1. I ensure that I form a positive habits |  |  |  |  |  |
| 1. I always ensure that I have positive thinking |  |  |  |  |  |
| 1. I show kindness to other people |  |  |  |  |  |
| 1. I respect other people |  |  |  |  |  |
| [**Autonomy**](https://en.wikipedia.org/wiki/Autonomy) | **SD** | **S** | **NS** | **A** | **SA** |
| 1. I always govern my actions |  |  |  |  |  |
| 1. I always act with freedom |  |  |  |  |  |
| 1. I function independently |  |  |  |  |  |
| **Environmental Mastery** | **SD** | **D** | **NS** | **A** | **SA** |
| 1. I always choose good friends |  |  |  |  |  |
| 1. I always choose to stay in a clean room/house |  |  |  |  |  |
| 1. I always avoid a violent environment |  |  |  |  |  |
| **A Feeling of**[**Purpose and Meaning in Life**](https://en.wikipedia.org/wiki/Meaning_of_life) | **SD** | **D** | **NS** | **A** | **SA** |
| 1. I think life is a good thing |  |  |  |  |  |
| 1. I always ensure that the world is a good place to live in |  |  |  |  |  |
| 1. I value nature because it is beautiful |  |  |  |  |  |
| [**Personal Growth and Development**](https://en.wikipedia.org/wiki/Personal_development) |  |  |  |  |  |
| 1. I have the feeling that I have developed good life skills |  |  |  |  |  |
| 1. I have a feeling that I have developed good knowledge about life |  |  |  |  |  |
| 1. I have gained more wisdom in how I deal with issues. |  |  |  |  |  |
| **SCHOOL FACTORS** | **SD** | **D** | **NS** | **A** | **SA** |
| **School Environment** |  |  |  |  |  |
| 1. We have attractive infrastructures at school |  |  |  |  |  |
| 1. We have good sport facilities at school |  |  |  |  |  |
| 1. We love each other at school |  |  |  |  |  |
| 1. We help each other at school |  |  |  |  |  |
| **Teacher-Child Relationship** | **SD** | **D** | **NS** | **A** | **SA** |
| 1. My teachers listen to me all the time |  |  |  |  |  |
| 1. I get a lot of love from my teachers |  |  |  |  |  |
| 1. When I have problems, teachers are ready to help me |  |  |  |  |  |
| **Parent-Teacher Relationship** | **SD** | **D** | **NS** | **A** | **SA** |
| 1. My parents call my teachers and talk about my performance |  |  |  |  |  |
| 1. My parents visit the school more often to discuss issues of school |  |  |  |  |  |
| 1. My parents say good things about my teachers. |  |  |  |  |  |

End of the Interview

Thanks for Your Time

**Appendix II: Interview Guide for Key Informants**

1. What is the effects of secure attachment style on adolescent psychological wellbeing in Kigoma District?
2. What is the effects of ambivalent attachment style on adolescent psychological wellbeing in Kigoma District?
3. What is the effects of avoidant attachment style on adolescent psychological wellbeing in Kigoma District?
4. How do you describe the state of adolescent psychological wellbeing in Kigoma District?
5. What do you think should be done to promote adolescent psychological wellbeing in Kigoma District?
6. How do you think school factors affect the wellbeing of adolescents in Kigoma District?

End of the Interview

Thanks for Your Time