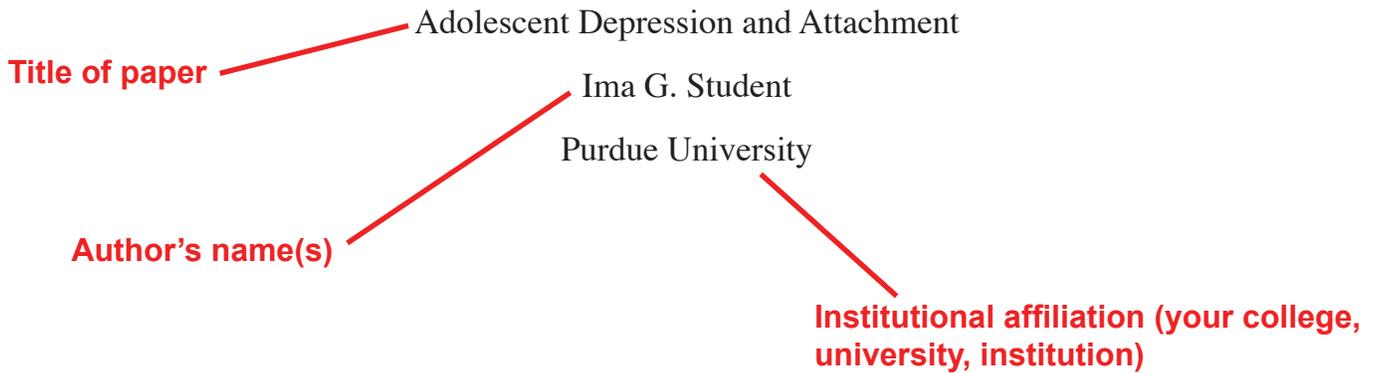


Heading (on all pages): running head plus page number

Running Head: ADOLESCENT DEPRESSION

Running head (a shortened version of the title is defined on the title page and used in the heading of your paper.



Title, name and affiliation are centered. Heading is right justified. Running head is left justified.

Adolescent Depression and Attachment

Depression affects over 20% of adolescents. It is a disorder that disturbs their mood, causes a loss of interest or pleasure in activities they should enjoy, and makes them irritable. Several things are thought to be correlated with depression in adolescents.

Explains why topic is important

Studies are listed in alphabetical order.

Some examples include, a failure to individuate, insecure attachments, negative parental representations, etc (Milne & Lancaster, 2001; Olsson, Nordstrom, Arinell, & Knorr-ring, 1999). In the present paper, the role of attachment plays in adolescent depression is investigated. It is hypothesized that insecurely attached adolescents, (ambivalent or avoidant), will display higher levels of depression related symptoms and behaviors than securely attached adolescents. The following five literature review attempt to demonstrate and support this hypothesis.

Gives reader an idea of what the paper will cover.

This is considered jargon and needs to be explained.

Focuses only on reviewing literature that supports hypothesis.

In a research article by Salzman (1996), two specific questions were addressed for guiding the study. First, would the age group (18-21) being investigated correspond in frequency and quality to attachment patterns reported by other researchers? Second, would personality characteristics of secure adolescent attachments correlate with personality characteristics of infant and child studies? The focus of the investigation was on late adolescent female attachment patterns, specifically maternal, using a semi structured interview. It is hypothesized that secretly attached females will have a strong positive identification with their mother, higher self-esteem ratings, and lower depression scores, while ambivalent and avoidant females will have a more negative identification with their mother, lower self-esteem ratings, and higher depression scores. The sample consisted originally of 1001 random psychology students at a college, but through screening procedures and the importance to have approximately equal numbers in all categories of attachment, it was reduced to 28 who were used in the study.

Descriptions of the prior studies should always be in the past tense because the study has already occurred.

Notice that not a lot of detail is given about how the study was conducted. Instead, the description focuses on the rationale behind the study.

The results in this study supported the hypothesis that relative percentages of the attachments (secure, ambivalent, avoidant) would correspond to those reported by infant researchers. The current study percentages were; 73% had a secure attachment, 16% had an ambivalent attachment, and 10% had an avoidant attachment. This has significance when looking at what infant researchers report, which is 70% secure, 20% ambivalent and 10% avoidant (Salzman, 1996). The results also indicated that there was a significant difference in personality characteristics between the secure and ambivalent groups. Ambivalently attached females were significantly more depressed and reported significantly lower rates of self-esteem than securely attached female adolescents. The avoidant attachment group was in the middle of the secure and ambivalent groups in relation to depression and self-esteem, but wasn't significantly different from either group. It is also reported that securely attached female adolescents have a significantly more positive maternal identification than ambivalently attached adolescents and avoidant female adolescents fall in the middle.

All citations come before punctuation

Notice that the author focuses on the main findings that related to the hypothesis stated earlier.

All of these results combined confirm the hypothesis that personality characteristics like positive affect, interpersonal skills, and self-esteem, of securely attached adolescents correlates to infant child personality characteristics of secure attachments (Salzman, 1996). One limitation to the study is that it is not longitudinal. It rests on here and now rather than beginning at childhood and following the females as they were developing. Another limitation to the study is the sample consisted of all females. The correlations may have been significantly different had adolescent boys been involved.

Author points out relevant methodological issues that may have affected findings.

There isn't much transition between description of the different studies (here and throughout the paper). It would be better to show the connections between the ideas of the different studies. This would make the organization of the paper clearer to the reader and would stress the similarities and differences between the studies.

Next, the topic of attachment in relation to adolescent depression is addressed according to social networks. In a research article by Olsson et al. (1999), two questions were addressed. First, do depressed adolescents have a more limited and insufficient social network? Second, do depressed adolescents view the emotional condition of their family as more negative? The focus of the study is to investigate the social networks of depressed adolescents, with and without conduct disorder comorbidity, and compare the results with the social networks of the control group (non-depressed adolescents). A sample of 177 pairs, ages 16-17, female and male were used in the study. Five subgroups were created out of these 177 pairs through initial screening processes.

With more than two authors, use all of the names in the first citation. Afterwards just use the last name of the first author followed by "et al."

More jargon; most readers won't know what this means.

The results indicate that an adolescent with an episode of major depression does not differ significantly from the controls. They do not have deficiencies in social interactions, attachment, or family climate. This finding is not easily explained other than these individuals are less affected by the depressive thinking. On the other hand, adolescents with double depression or dysthymia feel their primary caregiver is available but more inadequate than controls. Also, they view their family condition as more negative than controls. These results confirm the hypothesis that depressed adolescents have an insufficient, limited social network and that they view their family conditions as more negative (Olsson, et al., 1999). One limitation to this study is the information is from the adolescents themselves. Parents had no involvement. Another limitation is that the controls were chosen from the whole group after screening by having a score below moderate depression. The controls themselves may not be absolutely free from depression.

Discusses findings and how they relate to the hypothesis.

Points out limitations that affect the study's validity.

Next, the topic of attachment in relation to adolescent depression is addressed using a hypothetical model. In the research article by Milne and Lancaster (2001), they investigate the processes that are related to depression. The main focus was to create a model that included parent representations, parent attachment, peer attachment, separation-individuation, interpersonal concerns, and self-critical concerns and demonstrate how, when combined, they can predict symptoms of depression in adolescents. The sample consisted of 59 females, ages 14-16, from secondary schools. It is predicted that past parenting will be related to attachment felt to parent currently, that maternal control and care will be related to attachment and the process of separation-individuation, that adolescent attachment will be directly related to parent attachment

This sentence would be clearer as two separate sentences

Doesn't quote from the article; provides a summary instead. This is much more common in APA style.

The results indicate that female adolescent symptoms of depression are explained by interpersonal concerns, self-critical concerns, parent and peer attachment, perceived parenting, and separation-individuation. The results indicate that female adolescents are more vulnerable to depressive symptoms if they have low levels of maternal care, experience feelings of guilt, dependence, and self-criticism, and have poor parent and peer attachments. Both maternal care and control predicted parent attachment. In regards to this finding, too much maternal care predicts high levels of depression. This is contrary to what is hypothesized and believed to be true because there is a point where too much maternal care can have negative effects (Milne & Lancaster, 2001). One limitation of this study is that shorter versions of some measures had to be used due to the time constraints mandated by the school. Another limitation to the study is that the focus is on females and the relationships they have with their mothers.

Explains how the findings contradict the hypothesis.

Next, the topic of attachment in relation to adolescent depression is addressed by testing factors related to attachment. In the research article by Muris, Messters, Melick, and Zwambag (2001), it is hypothesized that adolescents who considered themselves securely attached on the initial measure would have higher scores of trust and communication and lower scores of alienation than ambivalent or avoidant attached adolescents. Also, it is predicted that adolescents who identify themselves as insecurely attached will display higher levels of depressive symptoms and anxiety disorders than securely attached adolescents. Furthermore, trust and communication would be negative correlated with depression and anxiety and positively correlated alienation. The sample consisted of 155, female and male, 12-14 years old. The tests were administered during class time with a teacher or research assistant always present.

In this sentence, the commas are not necessary.

Good connection with other study that was discussed earlier. More of this would make the paper flow better and be easier to see the connections between ideas.

The percentages yielded of the attachments (secure, ambivalent, avoidant) are consistent with infant child studies, but also with Salzman's (1996) research. The current study's percentages were 72.9% secure 16.8% ambivalent, and 10.3% avoidant. The results support both predictions made by the authors, with the exception that communication was only correlated with adolescent depression scores (Muris, et al., 2001). One limitation to the study is that it is assumed that attachment later in life is a direct result of early attachment. Another limitation to the study is whether or not categorical test like the attachment questionnaire for children is as precise as a dimensional measure might be. With this measure, the extent to which the adolescent displays an attachment can be measured.

Finally, the topic of attachment in relation to adolescent depression is addressed using a longitudinal study. In a research article by Allen, Hauser, and Borman-Spurrell (1996), a longitudinal study investigates the effects of adolescent psychopathology on future attachment patterns. Two questions that were addressed in this study are relevant to the main topic of this paper. First, does adolescent psychopathology that results in hospitalization predict future insecure attachments in young adulthood? Second, are young adults' attachment styles reflective of their current state of mind and does this link have a direct effect from adolescent psychopathology? The sample consisted of 142, upper middle class females and males, ages 14-17. Seventy-six of the adolescents were recruited from a public high school; the other 66 were adolescents who had been admitted to a psychiatric hospital for severe psychopathology. Eleven years after the adolescents were initially interviewed and tested, they were reevaluated and data was compared. At the initial assessment, parents were integrated into the process.

Makes explicit connection between literature being reviewed and thesis.

A comma is needed here.

The results indicate a significant difference between high school and previously hospitalized young adults' attachment style. Almost 50% of high school adolescents in young adulthood had a secure attachment style, compared to only approximately 8% of the previously hospitalized young adults. Also, previously hospitalized young adults showed a lack of resolution of previous trauma and were not able to explain attachment experiences clearly or consistently. These results give conclusions to the import questions in the study (Allen, et al., 1996). One limitation to the study is the question of reliability of the trauma information reported by the adolescents. Another limitation to the study is the fact that all the individuals involved were from the same socio-economic status.

An apostrophe is needed here.

This sentence could be phrased more clearly.

Taken together, the results indicate that attachment plays an important role adolescent depression, significantly ambivalent or avoidant (Allen, et al., 1996; Milne & Lancaster, 2001; Muris, et al.; Olsson, et al.; Salzman, 1996). Adolescents that are secure attached to their primary care giver tend to have lower rates of depression related symptoms and behaviors. It can be assumed from these five literature reviews that infant attachment styles influence future attachments, behaviors, and psychological well-being. More longitudinal studies should be done. It is important to understand the actual though process over several years of individuals who have different attachment styles. Also, parents and other individuals who play a major role in the individuals' lives who are involved in the study should be included more. This would help with testimony reliability and better assessment of the severity of the disorder.

Conclusion sums up the main findings of the lit. review, and gives suggestions as to what future research should focus on.

Notice that references are listed in alphabetical order, not order they appear in the paper.

References

All lines after the first line of each reference are indented (this is called a hanging indent).

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- Olsson, G. I., Nordstrom, M., Arinell, H., & Knorrning, A. (1999). Adolescent depression: Social network and family climate—a case-control study. *Journal of Child Psychology Psychiatry and Allied Disciplines*, 40, 227-237.
- Salzman, J. P. (1996). Primary attachment in female adolescents: Association with depression, self-esteem, and maternal identification. *Psychiatry: Interpersonal & Biological Processes*, 59, 20-23.

Journal title and volume number (or underlined).