IDENTITY STATUS AND ADJUSTMENT TO LOSS AMONG ADOLESCENTS

DISSERTATION

Presented to the Graduate Council of the University of North Texas in Partial Fulfillment of the Requirements

For the Degree of

DOCTOR OF PHILOSOPHY

by

Heather L. Servaty, B.A., M.S.
Denton, Texas
August, 1997

The purpose of the present investigation was to explore the relationship of the adolescent experience of parental death to the variables of identity formation, adjustment, and coping. The inclusion of adolescents who had experienced parental divorce and those who had not experienced either loss condition allowed for group comparisons. In addition to the type of loss distinction, adolescents were also separated based on age and gender. A series of three 3 (type of loss; parental death, parental divorce, and control) x 3 (age; early, middle, and late) x 2 (gender) Multivariate Analyses of Covariance with socioeconomic status and social desirability as covariates were performed on the subscales of the EOM-EIS (identity status), the Hopkins Symptoms Checklist (adjustment), and the A-COPE (coping strategies). Main effects for type of loss indicated that the parental death and divorce groups, although not differing from each other, scored significantly higher than the control group on adjustment problems in the areas of Obsessive-Compulsive, Depression, Somatization, and Anxiety. In contrast, only the parental death group scored
significantly higher than controls on the Interpersonal Sensitivity adjustment subscale which measured uneasiness and negative expectations regarding personal communications and interpersonal inadequacy and inferiority. These findings reinforce the need for continued programs established to assist and support adolescents who have experienced parental death or divorce, while also highlighting the importance of addressing the social stigma still associated with parental death. Main effects for age were found for identity status, with early and middle adolescents scoring higher than late adolescents on Foreclosure, an identity status indicative of ideological and value commitments based on parental views rather than on personal exploration. In addition, middle adolescents scored higher on the Moratorium status than the late adolescent group, suggesting that this middle group may be more in the heart of the identity crisis period than their older peers. These findings underscore the unique position middle adolescents are in; struggling between a sense of connection with familial values and the initiation of the identity crisis period.
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TABLE OF CONTENTS

ACKNOWLEDGEMENTS. ........................................ iii
LIST OF TABLES ............................................ v

Chapter

I. INTRODUCTION. ........................................... 1
   Divorce
   Adolescence and Divorce
   Moderator Variables: Adolescence and Divorce
   Theoretical Issues in Divorce
   Death of a Loved One
   Adolescence and Death
   Theoretical Issues in Death Loss
   Identity and Adolescence
   Identity and Divorce
   Identity and Death
   Type of Loss, Adjustment, and Identity Formation
   Statement of the Problem
   Hypotheses Testing in the Present Investigation

II. METHOD .................................................... 73
    Sample
    Materials
    Procedures

III. RESULTS ................................................ 80
    Multivariate Analyses of Covariance
    Identity Status
    Adjustment
    Coping
    Correlational Analyses
    Additional Analyses

IV. DISCUSSION ............................................. 88
    Limitations
    Conclusions

APPENDICES ................................................ 118

REFERENCES ................................................ 155
<table>
<thead>
<tr>
<th>Table</th>
<th>Page</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Number of participants in each group</td>
<td>119</td>
</tr>
<tr>
<td>2. Correlations between covariates and dependent variables</td>
<td>120</td>
</tr>
<tr>
<td>3. Table of means for identity variables</td>
<td>121</td>
</tr>
<tr>
<td>4. Table of means for adjustment variables</td>
<td>122</td>
</tr>
<tr>
<td>5. Table of means for coping variables—parental death group</td>
<td>123</td>
</tr>
<tr>
<td>6. Table of means for coping variables—parental divorce group</td>
<td>124</td>
</tr>
<tr>
<td>7. Table of means for coping variables—control group</td>
<td>125</td>
</tr>
<tr>
<td>8. Correlations between coping behaviors and adjustment variables</td>
<td>126</td>
</tr>
<tr>
<td>9. Correlations between coping behaviors and identity variables</td>
<td>127</td>
</tr>
<tr>
<td>10. Correlations between identity and adjustment variables</td>
<td>128</td>
</tr>
<tr>
<td>11. Correlations between identity achievement and adjustment variables—youngest and oldest parental death groups with corresponding t values</td>
<td>129</td>
</tr>
<tr>
<td>12. Correlations between time since divorce, time since death, and dependent measures</td>
<td>130</td>
</tr>
</tbody>
</table>
CHAPTER I
INTRODUCTION

Loss is an inevitable and universal facet of human experience. Rando (1995) emphasized that loss, grief, and mourning are inherent aspects of all change. She separated loss into the two categories of physical and psychosocial (symbolic) loss. Physical losses are those which involve the loss of something that is tangible (e.g. a house burns down, a car is stolen, a breast is removed in a mastectomy). In contrast, a psychosocial loss is one that is intangible (e.g. divorce, chronic illness, shattered dreams) and as such often goes unrecognized. Although this distinction is conceptually useful, Rando noted that the majority of life transitions involve losses of both types. Two rather salient situations in which this overlap is most apparent are the death of a loved one and the loss associated with divorce. In a more formal sense, divorce and death have been recognized as life events that require major life adjustments (Reese & Smyer, 1983).

Seligman, Gleser, Rauh, and Harris (1974) have noted that a major criticism of loss-related research is the failure to distinguish between varying types of loss. The present study specifically investigated type of loss (death vs. divorce) as a critical variable in determining
adjustment among adolescents, with an emphasis on the impact of such losses on identity. Adolescence has been viewed as a critical developmental period in which to experience loss (Gordon, 1986; Sugar, 1968). Sugar (1968) has noted that adolescents must already contend with the loss of an inner image and adapt to changing internal and external realities, tasks which are compounded by losses such as those associated with parental divorce and death.

Divorce

The United States has the highest marriage and divorce rates in the world (Kitson & Raschke, 1981), with approximately one in every two marriages likely to fail (Brehm, & Kassin, 1990). The rising rates of divorce have been the catalyst for a growing body of literature focused on the possible short and long-term effects of marital disintegration on the lives of children.

The short-term effects of divorce in terms of emotional, social, and academic functioning have been consistently noted (Doherty & Needle, 1991; Emery, 1988; Kalter, 1987; Krantz, Clark, Pruyn, & Usher, 1985). Specifically, research has indicated that in comparison to those living with both parents, children of divorced parents frequently show more aggression (Emery, Hetherington, & DiLalla, 1984; Felner, Ginter, Boike, & Cowen, 1981), problems with peers (Felner, Stolberg, & Cowen, 1975; Guidubaldi, Cleminshaw, Perry & McLaughlin, 1983), and
academic difficulties (Guidubaldi, et al., 1983; Hetherington, Camara, & Featherman, 1983).

In their review of the literature in this area, Emery, et al. (1984) stated that, overall, children living with one custodial parent performed less well on measures of physical health, psychological adjustment, academic performance and interests, and social interactions with peers and parents. Investigators have also suggested that children of divorced parents are over-represented in mental health clinics (Guttentag, Salasin, & Belle, 1980; Kalter & Rembar, 1981).

According to Kalter (1987), there is less agreement concerning the long term effects of divorce, but evidence suggests that parental divorce does have lasting negative effects on a sizable majority of children. Kulka and Weingarten (1979) found that men and women who were 16 years or younger when they experienced parental divorce, reported significantly higher divorce rates, more work-related problems, and higher levels of emotional distress, than did their peers who were raised in intact families.

Two extensive investigations done by Hetherington, Cox, and Cox (1982) and Wallerstein and her colleagues concerning the short and longer-term effects of divorce on children have made invaluable contributions to the knowledge base in this field. Hetherington et al. began following families two months after parental divorce was final. At two months, children in mother-custody divorced homes,
showed more antisocial, acting out, and impulsive behaviors, more noncompliance and aggression with authority figures and peers, more dependency behaviors, greater anxiety, more depression, more difficulty in peer relationships, and more problem behaviors in school than their peers in nondivorced families. These problems persisted at the two year follow-up and were more severe and enduring for males than for females.

At the six year follow-up Heatherington, Cox, and Cox (1985) found stability of behavior problems, with externalizing problems more stable in males and internalizing more stable in females. Externalizing behaviors noted at earlier follow-ups were significantly linked to the later development of internalizing behaviors. Female adjustment was now similar to that of nondivorced females, but males from divorced homes showed more aggressive behavior and less social competence than males from non-divorced homes.

Wallerstein and her colleagues have done an extensive descriptive and longitudinal analysis of the symptomatology of children who were at three distinct developmental levels at the time of parental divorce. The youngest group of children studied were those who were between the ages of 2 and 6 1/2 at the time of divorce. Initial responses to separation found in this age group included feeling profoundly upset, showing intense neediness, high incidence
of regression, and acute separation anxiety (Wallerstein & Kelly, 1975). At the 18-month follow-up, researchers found that almost half of these preschoolers looked more troubled than they had initially, with males more troubled at school, playground, and home than the females. At the ten-year mark follow-up, most of these children reported few or no memories of the intact predivorce family, few recalled their own feelings at the time, and not one mentioned feeling frightened although fear was the symptom most noted by researchers at the initial interview. Although preschoolers seemed the most distressed initially, Wallerstein (1984) argued that these findings suggest that in the long run they may be the age group least burdened. She concluded that these younger children appeared to be spared the continuing painful memories reported by the older children in the study, but that the divorce had remained a central aspect of their lives and for 30% evoked strong feelings, tears, and profound sadness.

The middle age group followed in this investigation were children who were in early latency at the time of divorce. Initial findings for this age group indicated that they were preoccupied with issues of loss and separation: loss of the protective family structure and separation from father (Kelly & Wallerstein, 1976). The authors reported profound mourning of these losses which resembled the grief reactions of young children who experienced parental death.
They explained that these reactions were often accompanied by intense anxiety that negatively affected school work and peer relationships and also by anger toward the mother. At the ten year follow-up most of these young people were doing average or above average in school and one fourth were doing poorly or failing (Wallerstein, 1987). Feelings of disappointment, bewilderment, and low-keyed resentment toward the father were common among these children. In addition, the majority expressed feelings of sadness, neediness, and a sense of their own vulnerability. Wallerstein (1987) reported that these children expressed sadness over the loss of the more nurturing, protective environment they perceived in intact families. In addition, children in this age group had high levels of anxiety concerning relationships with the opposite sex, marriage, and personal commitments. Females seemed more able to draw on social support networks and were more likely to become involved in dating and sexual relationships, whereas males were more likely to be lonely and hold back in social situations. Half of the males and one fourth of the females were considered poorly adjusted and at high risk at the ten-year follow-up.

The oldest group of children in the study were between the ages of 9 and 19 at the time of parental divorce and included two groups, those who were still in latency or preadolescence and those who had already reached
adolescence. Wallerstein and Kelly (1976) found marked differences between the initial reactions of these two groups. The preadolescent group expressed strong feelings of powerlessness, fear, and intense anger at one or both parents for precipitating the divorce. About half of these children showed a severe drop in their academics which lasted during the year following divorce. The adolescent group expressed a high level of anxiety regarding their own future. The authors reported that many seemed to show a developmental spurt, becoming very helpful and compassionate toward one or both parents during and after the divorce.

At the ten year follow-up a significant number of these children (ages 9 to 19 at time of divorce) reported vivid memories of the unhappy events at the time of the divorce. As these children looked back they expressed sadness, resentment, and a sense of having missed out on the experience of an intact family. Although many reported feeling proud of their advanced maturity level, they regretted that the divorce had taken up so much of their school and play time. Most of these young people reported a strong commitment to the ideal of a lasting marriage, but one third of the females appeared wary of commitment and fearful of betrayal in intimate relationships.

Overall, Wallerstein (1987) concluded that at the ten-year follow-up the older two groups (including adolescents) were less well adjusted on a wide range of measures than
were the youngest group of children who had been preschoolers at time of the divorce. Such findings have led to the recognition of age as an important contributing factor affecting childhood reactions to divorce. More specifically, adolescents have been identified as a distinct group with unique developmental issues and tasks. Frost and Pakiz (1990) have noted the importance of considering the developmental level of the child, particularly in reference to adolescence which is a period of rapid, biological, social, and emotional change.

Adolescence and Divorce

Springer and Wallerstein (1983) have speculated that divorce and remarriage may be particularly difficult for adolescents. In addition to having strong ties to the absent parent, adolescents are negotiating issues regarding discipline, autonomy, sexuality, and parent and peer relations.

Palosaari and Aro (1994) researched the significance of age at the time of parental divorce on later adjustment. They compared Finnish children who experienced divorce prior to school age, in latency (7-12) and in adolescence (13-16). Among males depression was significantly more prevalent in those who had experienced parental divorce in latency than in those who had experienced it before school age or in adolescence. The prevalence in the two latter groups of males was similar to that in males from nondivorced
families. In females, the time of parental divorce was not associated with the prevalence of depression in young adulthood. Overall, the results indicated that depression was the least common in females from intact families.

Age and gender in relationship to marital disruption were also investigated by Frost and Pakiz (1990). They separated their sample into four groups: a) those whose parents had not experienced marital disruption; b) those whose parents were divorced or separated before the adolescent was six; c) those whose parents were divorced or separated when the adolescent was between the ages of six and nine; and d) those whose parents were divorced or separated when the adolescent was ten or older. Adolescents from recently disrupted families reported smoking cigarettes or marijuana significantly more often than those in all other groups. Members of this group also appeared in juvenile court more often than individuals in the three other groups. Gender differences were found in truancy, with females from recently divorced families skipping school more often than all other groups. Females from recently divorced homes also reported a greater degree of emotional problems and the highest level of depressive type behaviors.

Santrock (1987) has suggested that the developmental period of adolescence may be a time when divorce exacerbates the friction between parents and adolescents, increasing the likelihood that adolescents will participate in antisocial
behavior. Doherty and Needle (1991) investigated the adjustment and substance-use behavior of adolescents before and after parental divorce. They found that adolescents from disrupted families reported, across pre- and post-occasions, lower psychological well-being, lower self-esteem, lower sense of mastery, higher strain with parents, and more substance abuse than their peers from continuously married families. Interactional findings indicated that males from disrupted families reported more substance use, while females from disrupted families reported lower psychological well-being and higher strain with parents. A greater increase in substance use was found for the maritally disrupted group of males than for the continuously married group of males. By combining the scores for psychological well-being, self-esteem, mastery, and strain with parents, the authors created a summed psychological adjustment score and found that females' difficulties were occurring prior to the separation and did not change much after the divorce, while the difficulties of males increased after the divorce.

Neighbors, Forehand, and Armistead (1992) also investigated the academic functioning of young adolescents before and after parental divorce. They found that males from families who would soon divorce had significantly lower GPAs prior to their parents' divorce than did males whose families would remain intact and females whose parents would
and would not divorce. Females from subsequently divorcing homes showed a decrease in GPA which began prior to divorce and continued beyond the time of divorce.

A critical component of adjustment which researchers in the area of divorce have also investigated is the role of coping. Krantz et al. (1985) investigated children's perception of divorce and its relation to coping and adjustment. They found that boys' evaluation and appraisals of divorce events was found to be related to their postdivorce adjustment in the home but not in the school (as reported by teachers). Infrequent use of adaptive statements about divorce and frequent use of maladaptive statements were related to undesirable behaviors. For girls, the more problematic behavior at home was related to infrequent adaptive answers to open-ended questions and greater agreement with maladaptive answers on the rating scales but not to the other measures of appraisal. Overall a trend toward better cognitive and behavioral functioning was found among girls. Krantz et al. found that positive cognitive coping by children of divorce was related to fewer adjustment problems.

Sandler, Tein, and West (1994) conducted a cross-sectional and prospective longitudinal study of stress, coping, and psychological symptoms in children of divorce (ages 7-13). They designed a model with four dimensions--active coping, avoidance, distraction, and social support
and found that confirmatory factor analysis based on this four-factor model fit well with their data. Avoidance coping was significantly and positively related to depression, anxiety, and conduct problems and active coping was marginally and negatively related to depression and anxiety and conduct problems. Using longitudinal methods with interviews immediately following divorce and one about 6 months later, stability was found in the children's reports of stress as well as each of the measures of coping and symptoms.

Distraction at Time 1 predicted lower anxiety and depression at Time 2. According to Sandler et al., (1994), distraction involves doing a substituted activity to keep one's mind off of the stressor, whereas avoidant thinking involves efforts to repress or block out the stressor. Results indicated that support-seeking coping at Time 1 was associated with higher levels of depression at Time 2. The authors suggested that these children may have been dissatisfied with the support they received.

Armistead et al. (1990) gathered data from 39 mothers and their 12- to 16-year old adolescents. Their investigation focused on three types of coping: active-cognitive, active-behavioral, and avoidance. Results indicated that the active-cognitive style of coping was most often used and that the avoidance style was utilized the least. Correlational data indicated that avoidance coping
was related to poor functioning, particularly for females. For males, more physical symptoms were reported in those using more avoidance-type coping.

**Moderator Variables: Adolescence and Divorce**

It is important to note that Furstenberg and Teitler (1994) discussed the need to look beyond the event of divorce and addressed factors which exist before and after the divorce which seem to affect adolescent symptomatology and adjustment. Factors which have been investigated include socioeconomic status, parental conflict, and family stressors.

Kurdek and Sinclair (1988) found that when socioeconomic status and demographic variables (e.g. race, number of siblings) were controlled for, the severity of adolescent self-reports of psychological symptoms, and school problems were unrelated to family structure (e.g. two-parent nuclear, stepfather, and mother-custody families), grade, or gender. Across family structure, high goal directedness, low psychopathology, and few school problems were related to low family conflict, high number of relationships and high personal-growth dimensions of family environment, high social support from peers, frequent use of external-support coping strategies (professional support and spiritual support), and infrequent use of negative externalizing coping strategies (ventilation, passive problem-solving, and low family problem-solving).
Borrine, Handal, Brown, and Searight (1991) researched family conflict and adolescent adjustment by separating adolescents based on three marital status groups (divorced, blended, and intact) and three perceived conflict groups (low, middle, high). Results indicated that marital status was not related to adolescent adjustment either alone or through an interaction with perceived family conflict. Perceived family conflict was found to be the crucial factor affecting adjustment.

Through a similar investigation, Aro (1988) found that children in divorced families and those in families with parental discord reported more symptoms of distress than their peers from intact homes. Parental divorce was related to lower academic performance and sex differences were found in self-esteem, with females from divorced families reporting the lowest self-esteem. Males from families marked by parental discord reported lower self-esteem than males in either the divorced or intact family groups. In both sexes, alcohol use was more common in the divorce and discord groups than in the intact family group.

Forehand et al. (1991) examined the functioning of adolescents from intact and divorced families, paying particular attention to parent-adolescent relationships and family interpersonal conflict. Results indicated that adolescents from divorced families were functioning at a lower level, as reported by social studies teachers, than
adolescents from intact families. There were no changes in adolescent functioning or the parent-adolescent relationship from the first to second year postdivorce. High levels of interparental conflict in divorced families were associated with more parent-adolescent relationship problems and parent-adolescent relationships problems were a better predictor of problems in adolescent functioning than divorce alone.

Forehand et al. (1991) investigated the relationships between family stressors (divorce, interparental conflict, maternal depression) and adolescent functioning. The areas of functioning they examined included externalizing problems, internalizing problems, and academic performance. Results indicated that as the number of stressors increased, adolescent functioning decreased in all areas. Overall, males displayed more externalizing problems than females. Those adolescents who were experiencing two family stressors reported more internalizing problems than those in the group experiencing one stressor, and in turn these adolescents reported more internalizing problems than members of the non-stressor group. Results in the area of academic performance indicated that adolescents experiencing one or two family stressors had significantly lower GPAs than those experiencing no family stressors.
Theoretical Issues in Divorce

On a more theoretical level, Kalter (1987) has presented a developmental vulnerability model of the long-term effects of divorce on children. He suggested that post-divorce factors such as multiple shifts in residence, economic distress, continued parental hostility, emotional loss of the non-resident parent, parental dating and remarriage can create new developmental challenges for children and can be source of developmental vulnerabilities. Kalter stated that the developmental achievements most often impeded are the capacity to control aggressive impulses, the ability to achieve emotional separation, and the development of a valued sense of gender identity.

The last two of these achievements are of importance to the present investigation and, therefore, will be discussed more fully. Kalter (1987) asserted that the central developmental tasks of adolescence are the de-idealization of parents, a new integration of the sense of self as emotionally separate from parents, and a renewed investment in intimate, enduring relationships with peers. According to Kalter, there are three common resolutions to the issue of separation for adolescents whose parents divorce. They may regress, acting more like a middle or late elementary school child. In contrast, they may appear older and more mature leaving adolescent separation tasks undone and losing the chance to engage in important peer relationships. They
may also rebel. Kalter highlighted the difficulty adolescents are likely to experience while trying to achieve the task of separation when the father is absent.

In terms of gender identity formation, Kalter (1987) reviewed research that has indicated that boys' identification with the father is the primary vehicle for the internalization of an appropriate sense of masculine identity and without the father's presence feminine characteristics may develop. He argued that girls may feel rejected by father and perceive that mother has also been rejected. Consequently, the sense of being valued as female may not develop.

Wallerstein (1983) has conceptualized the readjustments involved in divorce into a series of six tasks which must be dealt with over a number of years. Task I is acknowledging the reality of the marital rupture. Although it is sometimes harder for younger children to grasp this notion, most children master this task by the end of the first year of separation. Task II is disengaging from parental conflict and distress and resuming customary pursuits. It is during this task that the child must take appropriate steps to safeguard his/her individual identity. According to Wallerstein, Task III is resolution of the loss. Divorce involves many losses which include the partial or total loss of one parent from the family, the loss of the familiar routine, the loss of the symbols, traditions, and the
continuity of the intact family, and the loss of protective physical presence of two parents. Wallerstein believes this is the most difficult task and is likely to last many years. Task IV involves resolving anger and self-blame. Divorce is unlike bereavement in that it is entirely man- or woman-made and represents a choice for at least one of the partners. Children are aware of this reality. They may blame one or both parents or themselves. Task V is accepting the permanence of the divorce. Children of divorce face a more difficult task in accepting the permanence than do grieving children because they know that death can never be undone, but when both parents are living hope remains that they will be re-united. Task VI is achieving realistic hope regarding relationships. This is the task that occupies the child of divorce during the adolescent years and it is complicated by the many developmental tasks that adolescents confront. According to Wallerstein, similar to a child dealing with parental death must learn to take a chance on loving others knowing that humans are mortal, the child of divorce must learn to take a chance on a loving relationship that may fail while keeping the realistic hope that it will be successful.

Overall, Wallerstein (1983) argued that the child's experience of parental divorce is comparable in several ways to the experience of the child who loses a parent to death. Parental divorce and death trace a pattern of time that
begins with an acute, time-limited crisis, and is followed by an extended period of disequilibrium which may last several years. Both involve disruption of close family relationships, the weakening of the protection provided by the nuclear family, and powerful demands for major psychological, social, and often economic reorganization.

The tasks which Wallerstein (1983) has outlined do in fact resemble commonly accepted theories of the death loss grieving process (Kubler-Ross, 1969; Wolfelt, 1983). As noted earlier, the present investigation sought to compare the differential effects of these two types of loss on the adolescent experience.

Death of a Loved One

The death of a loved one is clearly one of the most difficult life changes of human experience. DeSpelder and Strickland (1992) noted that although all people will eventually encounter a death loss, "no two experiences of grief are alike" (p. 247). This notion has led researchers to investigate the factors which contribute to the variability in bereavement reactions and to the deterioration some adults and children experience when faced with a death loss.

Research with adults has shown that low socioeconomic status and multiple life crises (e.g. prior marital problems) may predict poor bereavement outcome (Parkes, 1976). Others have found that severe grief reactions are
more common when the death is sudden (Glick, Weiss, and Parkes, 1974; Parkes, 1976), unacknowledged by society (Doka, 1989), perceived as preventable (Bugen, 1976), and when the survivor reports a low level of purpose in life (Pfost, Stevens, & Wessels, 1989). Smith, Lingle, and Brock (1978-79) hypothesized that those who perceived the deceased as more similar to themselves would experience greater grief reactions, but they have not as yet substantiated this idea empirically.

Additional variables which have been found to affect the expression of bereavement in adults include the mode of death, and the gender and ethnicity of the survivor. Range and Niss (1990) found that those grieving accidental deaths more often reported that the death "seemed less real" than those grieving homicide, natural or suicide deaths. Sheskin and Wallace (1976) stated that suicidally bereaved individuals can have intensified feelings of blame and guilt. The literature clearly suggests that men and women grieve differently (Oltjenbruns, 1989; Shuchter & Zisook, 1993). Women tend to feel more helpless and report more physical problems, whereas men show less acceptance of death, express themselves less and drink more (Shuchter & Zisook, 1993). In terms of ethnicity, Masamba and Kalish (1976) suggested, after a description and analysis of funerals of Blacks, that grief work is facilitated by the
relatively free expression of feelings which occurs and is encouraged in the Black culture.

In addition to the above factors, developmental level has been recognized as a critical variable to be considered in bereavement outcome investigations. Cook and Oltjenbruns (1989) maintained that adults, children, and adolescents grieve in unique ways as a function of their particular level of cognitive and psychosocial development.

The facts of death as they relate to young people underscore the relevance of bereavement as a salient issue for many children and adolescents. Research suggests that five percent of American children will lose a parent through death before they reach the age of 16 (Wessel, 1983). Other estimates suggest that one out of every six children will lose a parent to death before the age of 18 (Van Dexter, 1986). According to the U.S. Bureau of the Census (1989), approximately 1.5 million children in the United State live in single-parent families due to the death of the other parent.

Ewalt and Perkins (1979) found that by their senior year, 11% of students had lost at least one parent, 90% had lost a near relative and seen a dead person, and 21% had witnessed a death. Glass (1990) conducted a similar, but more recent survey of high school students, and found that almost half indicated that the loss of a grandparent or great-grandparent was their first experience with death. He
also found that 39% had been personally involved with death within the past twelve months, that over one third had attended a funeral in the past year and only 17% percent had never been to a funeral.

Research with bereaved children has indicated that variables such as familial history of depression, mother as the surviving parent, preexisting untreated psychiatric disorder in the child, and high socioeconomic status are factors associated with increased depression (Weller et al., 1991). Elizur and Kaffman (1983) found that children with more than average adjustment difficulties prior to their father's death experienced an increase in these problems. Children with emotionally guarded mothers exhibited considerable signs of emotional distress during the first few months after loss.

Silverman and Worden (1993) found that children reported crying more when parental death was sudden, while Weller et al. (1991) found that type of parental death was unrelated to depression. Silverman and Worden (1993) reported that the highest Achenbach Child Behavior Checklist scores were found for grieving children with low self-esteem and those who felt they had less control of their lives. Research indicates little or no relationship between bereavement outcome and the gender of the deceased parent and/or the child's gender (Elizur & Kaffman, 1983; Silverman & Worden, 1993; Weller et al., 1991).
The connection between parental death and the later development of psychiatric illness was the first line of investigation which focused on the place of death in the lives of children. Tennant, Smith, Bebbington, and Hurry (1981) contended that many psychiatrists believed and continue to believe that childhood parental loss is one of the experiences most likely to lead to adult psychopathology. Sanders (1989) noted that unlike adults who have redirected their attachments to other individuals such as a spouse or their own children, young people are still fundamentally dependent upon their parents.

This notion of childhood vulnerability to parental death has led to a rather large body of literature focused on the possible association between childhood parental death and adult psychiatric illness. Higher than expected frequencies of maternal death during childhood have been found among schizophrenics (Gregory, 1959) and general psychotic patients (Barry, 1949). Norton (1952) found a significantly higher prevalence of paternal deaths during the early childhood of hospitalized neurotics when compared with age, sex, and socioeconomic status matched medical patients. In addition, Dennehy (1966) reported higher levels of childhood parental death in male and female depressives, male schizophrenics, male alcoholics and male drug addicts.
Two reviews of research in this area (Berlinsky & Biller, 1982; Osterweis, Solomon, & Green, 1984) have noted a number of methodological problems which lead to questions concerning the validity and generalizability of findings such as those listed above. For example, studies have often treated those who experienced childhood parental death as a homogeneous group without considering individual factors such as socioeconomic status, family structure, temperament, age at the time of parental death, etc. In addition, the overuse of clinic and psychiatric hospital populations without the inclusion of an appropriately matched control group has been a criticism. In reviews of research using more sound methodological practices, no strong evidence has been found which supports a relationship between parental death and psychopathology (Crook & Eliot, 1980; Silverman, 1987; Tennant, Bebbington, & Hurry, 1980; Tennant et al., 1981). Overall, results in this area have been mixed, with the interpretation of findings being necessarily subject to the nature of the methodology used.

As investigations turned more to the actual process and experience of childhood loss, rather than its effects on later life, many psychodynamically oriented clinicians (Deutsch, 1956; Miller, 1971; Wolfenstein, 1966) concluded that children were unable to mourn. Although contemporary experts in the field of bereavement agree that children may not be capable of the intrapsychic work outlined by Freud.
(1917), they challenge the notion that children experience an "absence of grief" when faced with the death of a loved one. They contend that children are indeed able to experience grief and to express sadness (Bowlby, 1963; Furman, 1983; Silverman & Worden, 1992; Wass, 1993; Webb, 1993).

According to Bowlby (1963), "the belief that children are unable to mourn can be seen to derive from generalizations that had been made from the analyses of children whose mourning had followed an atypical course" (p. 672). Similar methodological flaws found in investigations which have reported the absence of mourning in childhood highlight the misleading nature of the literature in this area. Examples include the lack of a control group, data based on solely parental report, data based on adult retrospective report, and sampling bias (Osterweis et al., 1984; Vida & Grizenko, 1989).

Another possible explanation for the persistence of the reporting of this absence of grief notion is that there is no universal pattern of childhood bereavement (Vida & Grizenko, 1989). This lack of consistent phenomenology has led to a number of investigations which are primarily descriptive in nature. Findings have indicated that children experience certain symptoms which are similar to those of adults. Such responses include sadness and crying (Raphael, 1982; Van Eerdewegh, Bieri, Parrilla, & Clayton,
1982; Vida & Grizenko, 1989), anxiety (Raphael, 1982), irritability (Van Eerdewegh et al., 1982; Vida & Grizenko, 1989), and feelings of shock and confusion (Silverman & Worden, 1993).

Research has indicated that children often have academic, (Silverman & Worden, 1993; Van Eerdewegh, et al., 1982), sleep (Raphael, 1982; Silverman & Worden, 1993; Vida & Grizenko, 1989), appetite (Raphael, 1982, Van Eerdewegh et al., 1982; Vida & Grizenko, 1989), and behavioral difficulties (Elizur & Kaffman, 1983; Vida & Grizenko, 1989). In addition, somatic complaints are more often noted in grieving children than in their adult counterparts (Silverman & Worden, 1993; Sood, Weller, Weller, Fristad, & Bowes, 1992). Silverman and Worden (1993) found that only a small number of children immediately expressed anger, while others have found that anger and aggressive behavior are common in grieving children (Kaffman & Elizur, 1979; Raphael, 1983).

In general, Bowlby (1963) has pointed out that the mourning process commonly seen in infancy and early childhood is very similar to the pattern which has been labeled as pathological mourning in adults. Specifically, children often experience unconscious yearning for the lost person, unconscious feelings of blame toward the deceased person, strong self-blame, compulsive care for other persons, and a persistent belief that the loss is temporary.
Vida and Grizenko (1989) note that the common childhood experience of grief does not fit into the DSM-III-R criteria for uncomplicated grief.

One possible explanation for the differences between the bereavement experience of children and adults is the limited cognitive capacity of children. Anthony (1940) conducted one of the first major investigations of childhood concepts of death. While assessing 91 children ages 3-13, she asked each child the meaning of the word dead during the course of a vocabulary test. The responses fell into five categories from really no understanding to a logical and biological explanation. A significant correlation was found between these levels of understanding and both the chronological and mental age of the children.

Nagy (1948) hypothesized three stages in children's perception of death. The first of Nagy's stages (ages 3-5) roughly corresponds to Piaget's preoperational level of cognitive development. Children at this age deny the finality of death and consider it temporary and reversible. Stage two (ages 6-8) is marked by the realization that death is final. However, children at stage two do not grasp the universality of death, but rather conceive of it as a personified figure whom the elderly cannot run fast enough to escape. Nagy (1948) found that children at stage three (ages 9-12) have a rather realistic concept of the finality and irreversibility of death.
Koocher (1973) grouped children ages 6 to 15 based on Piaget's framework of cognitive development and then asked them questions concerning the cause of death. Children's answers were strongly related to their level of cognitive development, with children at higher levels of Piaget's framework producing higher-order answers to death-related questions.

Much of the current literature on children's understanding of death has focused on the acquisition of the death concepts of universality, nonfunctionality, and irreversibility. Speece and Brent (1992) found that, although most of the children in their study had acquired one these three concepts in the early school years, fewer than half achieved all of them.

Swain (1979) found that age was the only variable consistently related to death understanding and that sex, level of parent education, and degree of religious influence within the family did not emerge as significant influences. She commented on the consistency between her findings and those found by earlier investigators (Anthony, 1940; Nagy, 1948). Specifically, children under the age of five tend to view death as reversible rather than final, improbable or escapable rather than inevitable, and as other-oriented rather than as personally possible. She failed to find, as did Koocher (1973), the stage reported by Nagy (1948) in which children believed in personified figures of death.
(e.g. ghosts, the grim reaper). Overall, Swain (1979) concluded that as age increases so does the recognition of the finality, universality, and inevitability of death.

**Adolescence and Death**

Although many researchers have asserted that adolescents have a more mature understanding of the reality of death and dying than their younger counterparts (Koocher, 1973; Speece & Brent, 1992), much of the theoretical and empirical work in the area of childhood bereavement has grouped children and adolescents together (Silverman & Worden, 1992; Sood et al., 1992; Van Eerdewegh et al., 1982; Wass, 1995; Wolfenstein, 1966). Experts have commented on the lack of research focused on adolescents as a distinct group of grievers (Balk, 1991, Fleming and Adolph, 1986; Garber, 1985).

This scarcity exists despite the fact that many recognize that adolescent bereavement presents an extremely serious life crisis at a time when changes are taking place in many major developmental domains such as physical, cognitive, moral, interpersonal, and psychosocial (Balk, 1991; Gordon, 1986). Gordon (1986) emphasized that because adolescents have their own biological, cognitive and emotional landmarks, it is necessary to separately focus on their particular developmental needs concerning topics of dying and death.
Empirical work has attempted to clarify features of adolescent conceptions of and reactions to death which are distinct from those of younger children and adults. Cheifetz, Stavrakakis, and Lester (1989) conducted a pilot study of the affective reactions of 16 children (ages 4-17) focusing on the developmental emotional aspects of bereavement. Younger children showed irritability displayed through tension, demandedness, impatience, and jealousy in the relationship with the surviving parent. In contrast, pre-adolescents and adolescents expressed a mild depression. Similarly, Vida and Grizenko (1989) found that adolescents showed more affective features similar to those of adults, while younger children exhibited more behavioral grief symptoms.

Gray (1989) noted age differences in the role of social support between bereaved adolescents and children. He found that, whereas younger children may be very accepting and open to support from the remaining parent, adolescents may view such support as a threat to their independence. Gray attempted to identify the sources and kinds of social support that bereaved adolescents found helpful. He reported that one fourth of the group rated the parent as "the most helpful" support person and that one third reported that their relationship with the surviving parent got worse after the death. The individual most often identified as "the most helpful" was a peer.
Harris (1991) examined the progress of bereavement in a non-patient sample (ages 13-18) of eleven adolescents in the year following parental death. She found that all subjects reported sadness and tears soon after the death, particularly at the funeral. Results indicated that the first six months were marked by sleep disturbances, deterioration in school performance and poor concentration. During the second six months after loss, seven out of eleven of the teens experienced depression, alcohol abuse, delinquency, and threatened school failure. Other important themes reported by the adolescents were the importance of events surrounding the time of parental death, saying goodbye, isolation of grief, coping with the loss, and effect of grief on peers.

Balk (1983) found that for adolescents (N=33) grieving the death of a sibling and feelings of depression at the time of the death were associated with confusion about the death at the time of the interview (time since sibling death M=23.6 months). Most adolescents reported that thoughts of the sibling decreased from the time of death to the time of the interview. About half of the teenagers reported moments when they believed they had seen or heard their dead sibling. As they looked back to the time immediately following their sibling's death, twenty-three subjects reported sleep difficulties, half reported hallucinations, and twelve reported thoughts of suicide. Most noted an
immediate negative effect on their study habits which decreased over time.

Fanos and Nickerson (1991) separated adult subjects into three groups based on the age at which they experienced their sibling's death (9-12, latency; 13-17, adolescent; 18, late adolescent). Using the above subject groups, the authors found that those who were adolescents at the time of the loss reported higher levels of anxiety, depression, and guilt than either those who were latency-aged or late adolescents at the time of their sibling's death.

Oltjenbruns (1991) surveyed late adolescents who had experienced the death of someone close to them concerning positive outcomes associated with grief. Unlike their younger counterparts, she found that adolescents were able to identify positive factors such as a deeper appreciation of life, greater caring for loved ones, strengthened emotional bonds with others, and greater emotional strength.

Although the above findings seem to suggest that adolescent conceptions of and reactions to death are very similar to those of adults, Noppe and Noppe (1991) argued that adolescents' views of death are qualitatively different from those of adults. They contended that adolescents tend to understand the universality of death in a modified sense in which there is a concept of personal uniqueness and invulnerability ("it can't happen to me"). In addition, they suggested that adolescents' understanding of
nonfunctionality and irreversibility may be affected by a fascination with the afterlife and more primitive notions of another world of the dead existing parallel to that of the living. Rosen (1991) similarly concluded that teenagers have an odd mixture of a realistic intellectual understanding of death and a sense of omnipotence that convinces them that they are invincible.

Wass (1995) noted that adolescents tend to hold rather abstract notions of death as darkness, eternal light, transition, or nothingness. She stated that they frequently formulate their own theologies about life after death, which may include beliefs in reincarnation, transmigration of souls, spiritual survival on earth, and spiritual existence at another level in a state of peace and beauty.

Research indicates that this distinctly adolescent conception of death leads to bereavement reactions which are also disparate from those of adults. Balk (1983) reported that the grief symptoms of the adolescents he studied were similar to those of adults, but that they had a "lingering" quality which was unique. Raphael (1983) also noted this prolonged aspect of teenage mourning.

Meshot and Leitner (1993) compared the grief reactions of young adults who had lost a parent in adolescence to those who had lost a parent in adulthood. They utilized a standardized grief measure, The Expanded Texas Grief Inventory, and analyzed the scale item by item. Those who
had experienced loss in adolescence were more involved in
the funeral rites than the adult loss group, which may
indicate a heightened need in adolescence for rituals and
similar acts of closure. In addition, the adolescent group
reported more sleep problems, irritability, anger, and
struggles in being with other people than did the adult
group. The adolescent group also reported higher scores of
disbelief that the person died, feelings of emptiness, a
desire to talk with someone about the death, dreams about
the deceased, and feelings of anger toward the deceased
person for abandoning them.

When Meshot and Leitner (1993) analyzed the present
focused items on the scale, they found that the adolescent
group reported more current concerns about such issues as
fairness surrounding the death, an intense sense of loss
that is very personal, feelings that the parent who died is
irreplaceable, and a strong presence of the deceased in
dreams and other people. In contrast, somatic concerns were
more of a problem for the adult group. Overall, the authors
concluded that the reactions of adolescents, although
similar to those of the adults, were more intense.

Rosen (1991) contended that for teenagers the death of
any family member is compounded by the normal instability
and higher death anxiety that they are coping with as part
of the transition from child to adult. She contended that
denial would be a developmentally normal coping mechanism
for these adolescents. Others have also addressed the role of coping for adolescents who have experienced parental death.

Hogan and DeSantis (1994) attempted to identify what sibling bereaved adolescents perceived to help or hinder them in coping with and adapting to the death of a sibling. Adolescents reported that helpful strategies included actively engaging in stress reducing activities such as playing a musical instrument, keeping busy, or releasing pent-up emotions. In addition, the adolescents reported receiving help through a personal belief system or an inner strength. Sixty-nine percent of the bereaved adolescents stated that family members were helpful and forty-seven percent reported that mothers and fathers provided comfort and caring by helping them accept the normality of their feelings and sharing memories about the dead sibling/child. Fifty-one percent of the adolescents stated that they had friends who helped them cope with their grief and eleven percent of the sample mentioned time as a helpful factor in coping.

**Theoretical Issues in Death Loss**

With the growing attention given to adolescents and their unique bereavement experience, theoretical work has emerged focused on adolescent attitudes and reactions to death. Fleming and Adolph (1986) addressed the fact that
there is no comprehensive model to facilitate an understanding of the adolescent grief experience.

In their model of adolescent grief, Fleming and Adolph (1986) separate conflicts and tasks which they believe are crucial during three distinct maturational phases of adolescence (Phase I-Separation vs. Reunion; Phase II-Independence vs. Dependence; Phase III-Closeness vs. Distance). They contend that each phase has identical core issues that provoke cognitive, behavioral, and affective responses. The core issues include: predictability of events, self-image, belonging, fairness/justice, and mastery/control. Although the core issues are the same at each phase, Fleming and Adolph present unique cognitive, behavioral, and affective responses which they hypothesize may emerge for each phase.

The core issue of self-image is most salient to the present investigation and, therefore, is discussed in more detail. Fleming and Adolph (1986) noted that at Phase I adolescents cognitively recognize that they are different from everyone else, but when a parent has died this takes on a different meaning and they begin to feel "marked." Behaviorally, bereaved adolescents in Phase I may try to resolve the conflict of differing views of themselves by becoming the "good" child or by behaving the opposite and acting-out. Affective responses in Phase I focus on
separation issues and include emotions which are depressed, flat or agitated.

Fleming and Adolph (1986) explained that most adolescents in Phase II cognitively believe that they can do anything. However, a bereaved adolescent in this phase realizes that they cannot and may experience cognitive responses such as low self-efficacy and the loss of a sense of mastery. Behaviorally, adolescents in Phase II tend to react independently through either aggressive or overcontrolled behaviors. Affectively, these adolescent's responses are fragmented, inconsistent, and reflect the struggle of becoming self-competent.

Bereaved adolescents in Phase III have cognitive reactions focused on trust in that they hesitate to put their trust in another for fear of further loss. Behaviorally, they may have images of being overinvested in another or being hopelessly withdrawn from others. Affectively, these adolescents may feel the extremes of acceptance or rejection from others.

In their theoretical work, Noppe and Noppe (1991) highlighted the many complex factors which contribute to the death related attitudes of adolescents. They referred to these factors as dialectical themes and considered how the biological, cognitive, social, and affective dialectics interact in contributing to adolescent beliefs about death. The biological dialectic concerns physical maturation and
Noppe and Noppe suggested that the rapid movement toward physical growth in adolescence may bring to the surface a contradiction for adolescents in that they feel so alive and yet know they will one day cease to exist. They also suggested that the loss of innocence that accompanies sexual development may be another link between bodily changes and death conceptions.

Noppe and Noppe (1991) built their cognitive dialectic on the work of Piaget and contend that the adolescent conception of death is directly related to the entry into the stage of formal thought. The third dialectic is the social context of development which centers around how critical interactions with family members and the peer group concerning topics of old age and death contribute to adolescent concepts.

The major elements which Noppe and Noppe (1991) emphasized in the affective dialectic are the emerging sense of identity, the need for autonomy, and the struggle with depression and suicide attempts. They contended that Erikson's analysis of adolescence as a period of conflict between identity and role diffusion has provided the basis for exploring the affective experience during this phase of the life span.

The present investigation incorporated aspects of each of these theoretical models in that it involves the separation of adolescents into three distinct age groups
similar to the phases noted by Fleming and Adolph (1986). In addition, it focuses specifically on how the adolescent affective dialectic, as outlined by Noppe and Noppe (1991), may affect or be affected by parental death and divorce, specifically in the area of ego identity formation. As previously discussed, the inclusion of adolescents who have experienced parental divorce allows for the investigation of the differential effects of type of loss.

Identity and Adolescence

The field of psychology has long recognized the importance of the developmental task of identity formation in adolescence. Theoretically, it has been argued that identity formation is a critical factor in adolescent adjustment to parental death (Fleming & Adolph, 1986; Noppe & Noppe, 1991) and divorce (Kalter, 1987; Wallerstein, 1983). In this light, a brief introduction to the area of ego identity development is followed by a review of empirical work which has addressed the effects of loss on identity formation.

Erik Erikson has contributed more than any other theorist to the understanding of identity development. According to Erikson (1963), the crisis of the fifth stage of his epigenetic theory of psychosocial development occurs in adolescence and involves the polar outcomes of ego identity and identity diffusion. Adolescence as a distinct
period is regarded by Erikson (1968) as central to his theory of psychosocial development:

The wholeness to be achieved at this stage I have called a sense of inner identity. The young person, in order to experience wholeness, must feel a progressive continuity between that which he had come to be during the long years of childhood and that which he promises to become in the anticipated future; between that which he conceives himself to be and that which he perceives others to see in him and to expect of him. Individually speaking, identity includes, but is more than, the sum of all the successive identifications of those earlier years when the child wanted to be, and often was forced to become, like the people he depended on. Identity is a unique product, which now meets a crisis to be solved only in new identifications with age mates and with leader figures outside the family. (Erikson, 1968, p. 87).

Erikson (1968) stated that it is not until adolescence that individuals acquire the physical, mental, and social capabilities necessary to experience and pass through the crisis of identity. He viewed adolescence as a period when vocational and ideological questions emerge and are first addressed and when individuals should experiment with
various identities and ideologies before committing themselves to an identity for the future. It is important to note that Erikson was conscious of the interactions between psychological, social, and historical variables which contribute to ego identity development.

As is the case for all of Erikson's stages, the resolution of an earlier crisis necessarily affects later development. If, as an adolescent, an individual does not succeed in forming a strong identity he/she will have difficulty in adulthood, particularly in forming genuine intimate relationships with others.

According to Hamer and Bruch (1994), Erikson's notion of identity "(a) provides a sense of continuity between a person's past, present, and anticipated future; (b) provides a framework for organizing and integrating behaviors across diverse aspects of a person's life; and (c) provides direction for the person's life" (p. 437).

Jackson and Bosma (1992) noted that although identity is used differently in research based 1) on the work of Erikson, 2) the idea of self-concept, and 3) on social psychological theories, there is usually no attempt to define the concept clearly. They argued that this leads to problems when comparing the results from various studies investigating identity in adolescents.

Waterman (1982) has also noted the difficulty researchers have encountered even when attempting to
consistently operationalize within the Eriksonian identity construct. He stated that the assessment instruments that have been developed have often contained some combination of the following aspects of identity:

a) a clear sense of self-definition;
b) the presence of commitments regarding goals, values, and beliefs;
c) the existence of activity directed toward the implementation of commitments; d) the consideration of a range of identity alternative;
e) the extent of self-acceptance;
f) a sense of personal uniqueness;
g) confidence in one's personal future (p. 341-342).

He listed a number of pen-and-paper instruments such as Rasmussen's (1961) Ego Identity Scale, Dignan's (1965) Ego Identity Scale, the Ego Identity-Incomplete Sentences Blank (Marcia, 1966), the Inventory of Psychosocial Development (Constantinople, 1969), and the Identity Achievement Scale (Simmons, 1970). More recently, Bennion and Adams (1986) have revised the Extended Objective Measure of Ego Identity Status (EOM-EIS) which was originally developed by Adams, Shea, and Fitch (1979). Rosenthal, Gurney, and Moore (1981) have developed a scale called the Erikson Psychosocial Stage Inventory (EPSI). Although the existence of such a variety of instruments designed to measure ego identity formation has created difficultly in comparing findings, these scales
have promoted a great deal of research in the area of ego identity formation.

Marcia (1966) was one of the first to operationalize and develop a method for measuring ego identity status through the use of a structured interview and an incomplete sentence form. He developed a model with four identity statuses: achievement, moratorium, foreclosure, and diffusion. According to Marcia, an individual who has reached identity achievement has experienced a crisis period and is committed to an occupation and ideology. Those in identity diffusion may or may not have experienced a crisis period, but they lack occupational and ideological commitment. Individuals in moratorium are in the heart of the crisis period with commitments being vague. It is at this point that individuals are actively struggling with commitments. The individual in foreclosure has not yet experienced a crisis, but still expresses commitment. These persons often become what parents or others wish them to be.

Hill (1993) has noted that Marcia's four identity statuses can be located within a two dimensional grid according to an individual's level of the two subprocesses of crisis (exploration) and commitment which are applied to vocational, religious and ideological choices. Crisis refers to the individual process of actively choosing among alternatives, while commitment refers to the degree of investment the individual indicates.
Waterman (1992) has recently suggested that the addition of a third subprocess called personal expressiveness to Marcia's model would provide a more complete picture of identity formation. According to Waterman, an activity which is personally expressive for an individual is related to feelings of intense involvement and of being fulfilled, and an idea that the activity is what the person has always been meant to do. In this light, not all identity commitments are personally expressive and some may be simply pragmatic in nature. The notion of adding another dimension to Marcia's theory has not been studied empirically.

Marcia's original model of ego identity formation has fostered a large body of literature. Research focused on the psychological factors associated with the four statuses has been mixed. Marcia (1980) found that identity achievement and, to a certain extent, moratorium were associated with positive psychological characteristics such as autonomy, post-conventional moral reasoning, high self-esteem, mature intimacy, and internal locus of control. In addition, diffusion and foreclosure were related to authoritarian attitudes, conventional or preconventional moral reasoning and stereotyped personal relationships. Adams, Ryan, Hoffman, Dobson, and Nielson (1985) found that identity diffusion, when compared to identity achievement,
was associated with conformity and susceptibility to peer pressure.

Blustein and Philips (1990) found that college students who had an achieved identity status used more rational and systematic decision-making strategies. In contrast, those in the foreclosed status tended to rely on dependent strategies and did not endorse systematic or internal strategies. Diffused status was associated with a tendency to rely on intuitive and dependent styles or to exhibit an absence of systematic and internal styles, while the moratorium status was not consistently associated with variations in decision-making styles. O'Connor and Nikolic (1990) found that egocentrism was associated with higher scores on identity crisis and identity achievement, and with lower scores on identity diffusion.

Waterman and his colleagues conducted a longitudinal investigation at a private liberal arts college and found that an interest in art, music, literature, and foreign films seemed to predict present and/or future identity achievement (Waterman & Goldman, 1976). Waterman and Archer (1979) found that male and female high school and college students who wrote poetry were more often classified as identity achievers.

In contrast to the above findings which seem to suggest a positive relationship between higher levels of ego identity status and better adjustment, Rotherman-Borus
(1989) found higher levels of anxiety, inattentiveness, and behavior problems among adolescents with moratorium and achievement status when compared to those with foreclosure and diffusion. Jones and Hartmann (1988) found that, although adolescents in identity diffusion abused substances the most, those adolescents in moratorium and achievement were more likely to abuse substances than those in foreclosure.

Despite the established nature of Marcia's ego identity model, it has not gone uncriticized. Cote and Levine (1987) contended that Marcia's (1966) ideas of "ego identity status" do not fully represent Erikson's theory of ego identity formation. They emphasized that Erikson did not intend identity crisis and formation to be interpreted as a task just of adolescence, but as a process which spans the life-cycle.

Boyes and Chandler (1992) discussed findings which cannot be explained by Marcia's Identity Status model. They addressed the fact that individuals who once scored as identity achieved have often regressed back to periods of crisis (Broughton, 1983; Marcia, 1976). In addition, they noted that Slogoski (1984) has found that subjects can be pessimistic about the idea of absolute certainty and yet be classified as foreclosed. In addition, those who are considered diffused may be classified as such because they have not seriously thought about their futures or because
they have thought about such issues, but see no way to reach resolution (Broughton, 1983; Donovan, 1975).

Flum (1994) has questioned the applicability of Marcia's model of identity formation to younger adolescents. He argued that Marcia (1966) designed his model with older adolescents in mind and, thus, the idea of crisis (exploration) is really more fitting for older rather than early adolescents. Flum contended that it is not appropriate or realistic to expect high school students to make long term commitments in the areas suggested by Marcia. He noted that some researchers have had to create categories such as foreclosure-diffusion (Marcia, 1976) and moratorium-diffusion (Donovan, 1975; Josselson, 1973) to account for this problem.

Flum (1994) designed his own measure containing questions from intrapersonal and interpersonal domains in order to investigate the possibility of different identity statuses in younger adolescents than those suggested by Marcia. The intrapersonal domain contained questions focused on such issues as self-esteem, external–internal orientation, sense of confusion, and decisiveness. The interpersonal domain contained questions focused on the areas of dependency on parents and peers, ability to withstand peer pressure, need for intimacy with friends of the same and of the opposite sex, need for solitude, and asocial orientation (mistrust).
Flum (1994) gave 878 high school students a questionnaire containing 70 items to assess the areas listed above. The items were grouped into four types of question categories: conflict situations, sentence completions, self-descriptive statements-rating scales, and an autobiographical essay. Through the use of discriminant function, Flum found that items could be used to group high school students into categories similar to Marcia's statuses of identity diffusion, foreclosure, and moratorium. He found that 99 of the 878 did not fit into any one of these styles. It was through his analysis of the common characteristics of these remaining individuals that he suggested the "evolutive" identity status. According to Flum, this style of identity status is "evolutive in the sense that young people may resolve identity issues on their own terms but without experiencing intense identity confusion" (p. 484). He noted that individuals in this status exhibited an openness of ego functioning, relatively high ego strength, and when encountering a difficult situation they tended to perceive of it as a challenge. He found that they expressed their individuality, while maintaining strong connections with others such as their parents, who "are there" for them, and with their peers.

As did Flum (1994), many have had difficulty in applying Marcia's model to younger adolescents. Boyes and Chandler (1992) noted that empirical evidence has not found
a definite relationship between "the developmental Piagetian formal operational competencies and change in identity status" (Cauble, 1976; Leadbeater & Dionne, 1981). Archer (1989) reported that in a study of seniors in college, only one-quarter at most could be said to have an identity domain in moratorium or achievement. Hill (1993) stated that clinicians need to keep in mind that the majority of teenagers will be in diffusion or foreclosure, basically conforming to the ethical identities of their parents. He argued that young adult life may really be the time when individuals explore characteristics of identity formation outlined by Erikson.

Despite these findings, work has been done focused on fitting Marcia's model into a developmental framework, suggesting that it is applicable to teenagers. Hill (1993) noted that there is a development trend in the research based on Marcia's model, with young adolescents having a higher rate of diffusion and foreclosure and lower rates of moratorium and achievement than older adolescents. Ciaccio (1971) found little interest in identity-related issues before students entered high school. Pomerantz (1979) found that females in twelfth grade scored significantly higher on the Rasmussen Ego Identity Scale than females in eighth grade. Using Marcia's Ego Identity-Incomplete Sentences Blank, La Voie (1976) found an increasing but nonsignificant
difference with increasing achievement associated with higher grade level in high school students.

Meilman (1979) conducted a cross-sectional study and administered Marcia's identity status interview to males in each of five age groups (12, 14, 18, 21, and 24). He found age-related increases in occupational commitment, occupational crisis, religious crisis, political commitment, political crisis, and sexual crisis. Cross-sectional changes in overall identity status indicated large increases with age in the percentage of subjects in achievement status and decreases in diffusion and foreclosure.

Wires, Barocas, and Hollenbeck (1994) designed a measure based on Marcia's model and studied male adolescents aged 14.5 to 18.9. They found that age was related to identity status with younger boys having lower identity achievement scores than older boys and higher diffusion scores than did the older boys. Lieper (1981) reported a definite and positive relationship between higher levels of Kolberg's model of moral reasoning maturity and the achievement of advanced personal identity. Streitmatter (1993) found decreases in foreclosure and diffusion in seventh and eighth graders across a three year time span, but also found that none of the junior high subjects had yet attained the achieved identity status.

Although controversy exists concerning the applicability of Marcia's model to high school age students,
there is evidence to suggest that it is appropriate and therefore this model was used in the present investigation. The work by Flum (1994) is important to note, but is not yet empirically established enough to warrant its use.

In reference to other more general findings with ego identity formation, Waterman (1982) reviewed ten studies which made comparisons between male and female identity statuses and found that few gender differences have been indicated in research using pen and paper measures. Streitmatter (1993) analyzed longitudinal data from 105 junior high school, seventh and eighth grade students, and investigated the relationship between gender and identity over time. She found that the patterns of change were similar for the genders, with students growing in psychosocial maturity as they aged.

Recent work by Spencer and Markstrom-Adams (1990) has suggested the importance of racial issues in ego identity formation. The authors discussed the need to incorporate ethnic identity as a domain within the ego identity framework.

Hill (1993) noted that a recent advance in the area of identity research has been to investigate specific domains of identity status. Common domains included are sex role, vocation, political philosophy, and religious beliefs. Researchers such as Kroger (1988) and Archer (1989) have found that an individual may for example be foreclosed on
religion but achieved in sex role and vocational values. Such findings suggest the importance of including a number of domains when investigating identity status. In line with these findings, the identity measure used in the present investigation did assess ego identity formation across a variety of identity domains.

It is important to note that theorists within the area of identity status have called for an expansion of the focus of research and theoretical attention. Waterman (1982) noted that the process of identity formation is just as noteworthy of study as the outcome of this process. He stated that the "movement from adolescence to adulthood involves a preponderance of changes in identity status which can be characterized as progressive developmental shifts" (p. 342).

With a similar process focus, Berzonsky (1992) has reconceptualized Marcia's four statuses in terms of three processing orientations. They include: information-oriented (marked by self-exploration and the seeking out of relevant information before dealing with problems and making decisions; much like moratorium and achievement), avoidant-oriented (marked by procrastination; much like diffusion), and normative-oriented (marked by conformity to the standards of authority figures; much like foreclosure).

Although the process issues above are important, the present investigation focused on how loss (divorce vs. death) may affect or be affected by an adolescent's level of
ego identity status. Work in the area of identity status has touched on areas which are relevant to this question. Weinmann and Newcombe (1990) studied college students' perceptions of their affective relationships with their parents across five age periods: 1 to 5 years, 5 to 10 years, 10 to 15 years, 15 to 20 years, and the present. Those subjects found to be identity committed (achieved) showed an increasing love from mother over the years. Those who were uncommitted in identity status showed a trend of decreasing love both for and from their mothers. This finding may suggest that those adolescents with a more achieved identity status at the time of parental death of divorce may feel a greater loss than those in other statuses. In contrast, Neuber and Genthner (1977) found that identity achievers and individuals in moratorium scored significantly higher on a measure of autonomy than foreclosed and diffuse individuals. This may suggest that adolescents in these statuses would be further in their development and, therefore, be less affected by parental divorce or death.

Waterman (1982) noted that research has indicated that subjects in foreclosure have the closest relationships with their parents, with those in the diffusion status reporting feeling the most distant from their families. These results may suggest that adolescents in foreclosure may be the most
negatively affected by parental death or divorce because of their close ties with parental figures.

The above findings only point in the general direction of the possible affects of loss on adolescent identity formation. Research more specifically rooted in identity concepts has been done in both the areas of parental death and parental divorce during adolescents.

Identity and Divorce

The divorce literature contains investigations into the possible effects of divorce on identity and related variables. Weiss (1979) has suggested that children from divorced homes "grow up a little faster." Wallerstein and Kelly (1980) have suggested that divorce can either drive adolescent development forward at an accelerated rate or can retard it.

Nelson, Allison, and Sundre (1992) investigated the relationships between divorce and college students' development of identity and intimacy. They used the Personal Orientation Inventory to operationalize the progression through the identity and intimacy crises. The three groups of college sophomores and juniors were divided based on family structure. Group one consisted of individuals from intact families, group two contained students who had experienced parental divorce between the ages of 11 and 17 and group three consisted of subjects who experienced divorce before the age of 11. Results indicated
no significant differences between the groups on the Personal Orientation Inventory (POI). Nelson et al. suggested that this was the result of the effects of divorce fading over time, but acknowledged the limitation of using a scale like the POI which is a self-actualization scale that was modified to fit the topic of adolescent identity formation.

Grossman, Shea, and Adams (1980) investigated level of ego development, locus of control, and identity achievement in college students from intact, divorced, and remarried parental families. Results indicated that males from divorced homes scored higher on ego identity achievement as measured by Marcia's Ego Identity Incomplete Sentence Blank than males from intact families or females from divorced or intact homes. In addition, no significant differences were found between males from divorced and step-parent homes on any of the three measures used.

Other researchers have utilized dependent variables similar to identity status in their investigations into the effects of divorce on adolescents. Studer (1993) compared the self-concepts of adolescents from intact, maternal custodial, and paternal custodial families. Results indicated that males from divorced families had higher self-concept scores than their females counterparts in the areas of physical ability, general, emotional, and physical appearance, while females scored higher than males in the
area of honesty. Adolescents from intact families scored significantly higher than adolescence from homes in which there had been parental divorce in the self-concept areas of reading, honesty, parents, general, math, emotional, and school. When maternal and paternal custody were also included in the analysis, results indicated that adolescents from intact homes scored higher than those in the paternal custody group in the areas of reading, parents, general, math, emotional, and school. Adolescents from intact families exhibited significantly higher scores than adolescents from both the maternal and paternal custody families in the area of school self-concept.

Wadsby and Svedin (1993), using Swedish children of divorce ages 1-17, found that there were no significant differences in behavioral symptoms between children of divorce and those from intact families. However, girls from divorced families had poorer peer relations and exaggerated hunger than the reference group of children from intact families. Boys of divorce showed a lack of assertiveness and poorer peer relations than controls. Comparing the scores of these children who experienced parental divorce to the established norms, they found no differences for females, but males had significantly higher self-image scores. In contrast, Parish and Wigle (1985) found poor self-image and low self-esteem in children of divorced parents and Kinard and Reinherd (1984) found no differences
in self-image between children from divorced and intact homes.

Aro (1988) found that adolescent females from divorced families reported, in terms of self-image, that they were less intelligent, more impulsive, and less energetic than girls from intact families. In addition, he found that males from families marked by parental discord reported that they were more emotional, less energetic, and more impulsive and anxious than boys from intact or divorced families.

On a more theoretical level, Sessa and Steinberg (1991) commented on the scarcity of research focused on the changing family structures which are occurring today and how such changes transform the normal psychosocial agenda of adolescence. They focused specifically on autonomy rather than identity formation and suggested that divorce and remarriage may prompt changes in family relationships and can instigate an early autonomy process. In addition, they noted that divorce and remarriage can transform the context in which the developmental tasks of adolescence are addressed when family structure changes prior to adolescence.

The task of autonomy is related to identity formation in that it is necessary for adolescents to develop a unique sense of self which is separate from parental notions. Sessa and Steinberg (1991) presented a theoretical analysis of how adolescents from divorced families may negotiate the
task of separation differently from those in intact homes. Divorced parents are no longer infallible and they often do not parent as well during the divorce so children have to do more for themselves. Sessa and Steinberg applied the developmental readiness hypothesis of Simmon and Blyth to conclude that "if divorce initiates the individuation process before a child is prepared to examine the issues salient to this process, the development of autonomy will be premature and the experience of age-appropriate activities of childhood will be curtailed" (p. 46). They contended that the experience of parental divorce is most critical when it occurs during preadolescence or early adolescence.

Identity and Death

Balk (1990) maintained that his investigation of the self-concepts of sibling bereaved adolescents grew out of the notion of adolescence as a period of identity crisis. He emphasized that these adolescents must work on their identity while attempting to keep a satisfactory self-concept in the midst of loss. Using the Offer Self-Image Scale, Balk (1990) found that adolescents who had lost a sibling had self-concepts similar to established norms. However, their responses did not suggest that they formed a homogeneous group. Most of the adolescents reported that their peer relationships got worse, their grades went down, their eating and sleeping were affected, and that they were more mature now than they had been before the death.
In an earlier investigation, Balk (1983) interviewed sibling bereaved adolescents and found that they scored similarly on self-concept to those of the norm group except on the subscale of moral values. The bereaved adolescents had a mean score higher than the norm which Balk (1983) interpreted as an indication of better adjustment in this area. He cautioned, however, against strict interpretation due to the twelve t-tests run on the subscales of the self-concept scale and the resulting possibility that the findings were the product of capitalizing on chance.

Related to the effects of parental death on identity formation is the work by Elder (1993) which focused on the impact of parental death on the separation-individuation process. She compared thirty adolescents (ages 12-16) who had experienced parental death to thirty same aged adolescents from intact families. Results indicated that males from the father-deceased group scored significantly higher than males from intact homes on the emotional autonomy scales. Males and females in the father-deceased group showed similar attachment to fathers and mothers when compared to controls. Those adolescents from the father-deceased group who were highly attached to their mothers showed less autonomy as indicated by lower scores on the Emotional autonomy scale.

Using the Extended Objective Measure of Ego Identity Status, Sabino (1993) compared the responses of 31 college
students who had experienced parental death to college aged controls who had not experienced such a loss. Results indicated that the parentally bereaved students scored higher than controls in both interpersonal identity foreclosure and ideological moratorium.

Although research utilizing a traditional identity instrument with adolescents was not found, anecdotal offerings concerning the effects of bereavement on identity formation are common in the adolescent death loss literature. Rosen (1991) contended that parental death in adolescence may make the already trying developmental necessity of separation from the family more difficult or even impossible. The loss of a parent may interfere with the experimentation and experiencing of life that usually is necessary as the teenager begins to find his/her identity away from the family. In addition, the adolescent may feel the need to stay home to care for and protect the remaining parent.

According to Rando (1988) adolescents who are experiencing grief may want to retreat to being children again and others may feel that they must act like adults; they may feel childish, but have to put on a front of being in control. These adolescents may assume a false independence and appear to be coping quite well, when in fact they are not.
Costa and Holliday (1992) related death concepts and grief reactions to the developmental stages outlined by Erikson. They highlighted the fact that for grieving adolescents the striving for separation and independence has been interrupted and instead of separating gradually from two parents, the separation from one parent is thrust upon them. These adolescents may react by regressing and becoming more dependent on the remaining parent, or they may hurry their independence and separate before they are really ready to do so.

Silverman (1987) found that many adult women who had lost a parent in childhood used the strategy of taking on the role of the "good daughter" to cope and to feel safe in the world. Findings such as this combined with the anecdotal inferences listed above seem to suggest that parental death may affect adolescent identity formation by either pushing them into identity achievement or pulling them back into the foreclosure status.

Gordon (1986) argued that the impact of parental death may be different depending upon the adolescents' state of development. Younger adolescents who have just begun to separate from parental figures may experience a brief return to childhood, a movement which may not be particularly threatening. If the family network is supportive, understanding, and encouraging, appropriate adolescent development will take place. Older adolescents may be put
in the surrogate parent role which truncates their separation process. These ideas may suggest that early adolescents may experience more of a shift to diffusion and foreclosure whereas late adolescents who have experienced the death of a parent may tend toward identity achievement.

Research supports this distinction and suggests viewing adolescents who have experienced parental death in phases. Harris (1991) found that younger teens may be particularly vulnerable to parental loss and may become preoccupied and attached to the lost object. In contrast, older adolescents may be at risk in the long term, because denial and avoidance are high and prevent attention to and resolution of grief. Balk (1983) interviewed 33 adolescents who had experienced the death of a sibling and found that in contrast to younger adolescents, older adolescents reported feeling angry about the death when their sibling died and at the time of the interview.

**Type of Loss, Adjustment, and Identity Formation**

A few studies have explored the differential effects of divorce and death on adolescent adjustment and identity formation. Sandler, Reynolds, Kliwer, and Ramirez (1992), for example, hypothesized that separation events would be related to depression when controlling for conflict events and that conflict events would be related to conduct disorder when controlling for effects of separation. They used four samples of children (ages 8-16), with one sample
having no history of a major life stressor and the other three samples each having experienced a different stressor: parental death, parental divorce, and physical illness of the child. Results indicated significant group differences in depression and conduct disorder with the parental death group having significantly higher scores for these two variables when compared to the divorce and asthma groups, while the death group and the control group did not differ. Conflict events were more strongly related to conduct disorder than to depression in the death and control group samples. Similarly, separation events were more strongly related to depression than to conduct disorder in the death and asthma samples. Sandler et al. grouped children and adolescents together, therefore, failing to investigate the possible effects of age on adjustment.

Gregory (1965) analyzed the relationships between antecedent loss of a parent during childhood and subsequent development of delinquency or dropout from high school. He used data gathered from a statewide sample in Minnesota where ninth-graders were given the MMPI and answered demographic questions concerning orphanhood, parental divorce or separation, numbers of siblings and person with whom they were living. Data on parental occupation and socioeconomic status as well as grades were obtained from school records. Three years after testing, a student-by-student follow-up survey was made in each community and
police and court files were searched for names and records. The highest rates of delinquency were found among those boys whose parents were separated or divorced and those who were living with mother only. However, higher than average rates were also found among those boys who were living with neither parent and those who had lost a father to death. Gregory noted that the loss of a father is not only more frequent, but also more significantly related to the development of delinquency in boys than is the loss of a mother. Similar to the boys, the highest rate of delinquency for females was found among the children of parents who were separated or divorced, with the next highest rate for those who were living only with the father. In addition, a higher rate of delinquency was found among those who had lost a mother to death, than among those who had lost the father. Gregory investigated only one age group, therefore, also failing to investigate the possible differential effects based on adolescent age.

In reference to comparisons based on identity formation, Oshman and Manosevitz (1976) studied the effects of father absence and stepfather presence upon the ego identity development in males. The father absent group was comprised of adolescents who had either experienced parental divorce or death. Using the Ego Identity Scale which measures psychosocial development and yields a score for each of the first six Eriksonian crises stages and a total
score, they found that the father-present and stepfather groups scored higher than controls on each subscale of the EIS and on the total score. Significant differences were found on Trust vs. Mistrust, Industry vs. Inferiority, and the total score. When the authors separated the father absent group into those who had experienced death and those who had experienced divorce, they found no differences on the EIS subscale scores or total score. In addition, the father-present and stepfather groups did not differ from each other. Oshman and Manosevitz suggested that having a stepfather is a mitigating factor which may buffer the effects of father absence. The manner in which these authors compared adolescents who experienced parental divorce and death, the lack of female participants, and the failure to separate adolescents based on age are limitations of this investigation.

St. Clair and Day (1979) investigated the identity development and values of high school females. Using Marcia's Identity Status Interview, they found higher religious value scores in adolescents in the identity achievement, moratorium and foreclosure statuses than those in diffusion. Sixty-seven percent of those classified as identity achievers had experienced either parental divorce or death. Based on this finding, the authors suggested that the intact family may not be the most conducive environment for identity development. Criticisms of this investigation
include the lack of male participants and the failure to separate based on adolescent age and type of loss (death vs. divorce).

Nelson, Hughes, Handel, Katz, and Searight (1993) investigated the relationship between ego identity status in college students and both family structure and family conflict. Results indicated no significant relationship between family structure (intact vs. divorce and parental death) and adjustment, ideology, or interpersonal identity status. A significant relationship was found between conflict and adjustment, with adolescents from low and medium conflict families reporting fewer psychiatric symptoms and demonstrating higher levels of ego identity status than those from families with a high conflict level. These authors failed to separate adolescents based on age and type of loss (divorce vs. death).

Of the studies listed above, few formally included type of loss as a major variable of investigation, with most combining divorce and death loss. The present investigation specifically separated these two types of loss in order to explore the possible differential effects these losses have on the adjustment and identity formation of male and female adolescents of varying ages.

Each of these losses presents unique challenges for adolescents. Death involves the permanent loss of the parent, while divorce is entirely human-made and clearly not
inevitable (Wallerstein, 1983). The adolescent awareness of these realities likely differentially affects both their identity formation and adjustment. Based on his clinical experience, Garber (1982) suggested that adolescents who experience parental death tend to reveal behavior and symptomatology that is more inward directed, while those who experience parental loss through divorce more often exhibit conflict with their environment.

**Statement of the Problem**

Most investigations of adolescent adjustment to loss have neglected to incorporate type of loss as a primary variable. The present study compared the adjustment, coping, and identity formation of adolescents who have experienced either parental divorce, parental death or neither.

By including a control group and focusing on adolescence as a distinct developmental period rather than as an extension of childhood or as a precursor to adulthood, the design of the present investigation avoids two common criticisms of previous adolescent death research (Fleming and Adolph, 1986; Vida and Grizenko, 1989). The grouping of participants into early, middle, and late adolescence, as suggested by the theory of Fleming and Adolph, denotes an improvement upon the existing research in this area as it addresses the possibility that adolescents dealing with
unique developmental tasks will be differentially affected by loss.

Although gender differences have not been found in reference to adolescent responses to parental death (Harris, 1991; Silverman & Worden, 1993), rather consistent differences in adjustment between males and females have been suggested in the divorce literature (Frost & Pakiz, 1990; Heatherington, Cox, & Cox, 1985; Palosaari & Aro, 1994; Wallerstein, 1987). Through the inclusion of both male and female participants, the present investigation improved on past studies of identity formation, while also providing the opportunity to examine and possibly confirm the gender related findings listed above.

Marcia (1966) noted that past studies which attempted to measure ego identity had in actuality investigated self-ratings on characteristics that should follow if ego-identity had been achieved. These studies used the stability of self-concept and overall adjustment as a means of approaching ego identity, but did not deal specifically with the psychosocial criteria for determining the degree of ego identity. This criticism holds true for much of the literature reviewed thus far. Ego identity formation is an appropriate area of study with regard to the impact of loss during adolescence due to its theoretical grounding (Erikson, 1968; Marcia, 1966). For this reason it can be
used as a basis for making developmental predictions about adolescence and loss.

Patterson and McCubbin (1987) stressed the importance of investigating the coping styles and behaviors of adolescents in light of the unique set of stressors which they encounter such as developing an identity, differentiating from the family, and fitting into a peer group. When issues of loss are added to these adolescent stressors, coping is an even more critical variable.

The focus on type of loss as a primary variable, the separation of participants based on phases of adolescence, and the inclusion of males and females and a control group are all improvements which the present study has over past investigations of the identity formation of adolescents who have experienced parental death or divorce.

Hypotheses Tested in the Present Study

Identity status. Main effects for gender, age, and type of loss were expected. Females were expected to score significantly higher on Identity Achievement than males. The late age adolescents were expected to score significantly higher on Identity Achievement and Moratorium than middle adolescents, who in turn were expected to score higher than early adolescents on these two statuses. In addition, early adolescents were expected to score significantly higher on the Foreclosure and Diffusion statuses than middle adolescents, who were expected to score
significantly higher than late adolescents. Adolescents in both loss groups were expected to score higher on the Foreclosure and Diffusion identity statuses than the control group.

A significant age by loss interaction was expected with early adolescents who experienced loss scoring higher on Foreclosure and lower on Identity Achievement than all other groups. A significant three way interaction was also expected with the early adolescent male group who experienced divorce demonstrating the lowest level of Identity Achievement and the highest level of Foreclosure.

Adjustment. Main effects for gender, age, and type of loss were expected. It was hypothesized that males would score significantly higher on adjustment difficulties than females. Early adolescents were expected to score higher than middle adolescents, who in turn were expected to score higher than late adolescents. In addition, it was hypothesized that the control group would exhibit the lowest level of adjustment problems, followed by the death group and then the divorce group.

A significant age by loss interaction was expected with early adolescents who experienced loss scoring higher on adjustment difficulties than all other groups. A significant three way interaction was also expected with the early adolescent male group who experienced divorce demonstrating the highest level of adjustment problems.
Coping. Based on previous findings, main effects were expected for gender with females scoring higher on the coping behaviors of Developing Social Support, Solving Family Problems, Investing in Close Friends, and Developing Self Reliance and males scoring higher on the Being Humorous factor (Patterson & McCubbin, 1987).

Correlational Hypotheses. Significant positive correlations were expected between active coping behaviors and Identity Achievement scores. In addition, it was hypothesized that a negative relationship would emerge between active coping and the reporting of adjustment difficulties. In contrast, the use of avoidance as a means of coping was expected to correlate negatively with Identity Achievement and positively with adjustment related problems. A positive correlation was also expected between Foreclosure and adjustment difficulties.

Correlational analyses were also performed in order to investigate the implication in the ego identity research that some adolescents who experience great losses such as parental death and divorce may be classified as identity achieved more often than their peers who have experienced no such losses. It was expected that early adolescents who exhibit identity achieved traits would have "grown up too fast" and, therefore, would exhibit lower adjustment. Thus, it was hypothesized that those early adolescents who scored high in identity achievement would have lower levels of
adjustment, while those late adolescents who scored high on this status would have high levels of adjustment. Differences between correlations were tested via independent t-tests.
CHAPTER II

METHOD

Sample

Adolescent volunteers were recruited from public, secondary educational institutions in Texas and Minnesota. Additional adolescents who experienced parental death were recruited from the WARM Place in Ft. Worth, TX, a non-profit center established to provide support groups for grieving children, and other similar programs across the country. The time since parental divorce ranged from 2 months to 15 years (M=57.6 months), while the range for time since parental death was 2 months to 18 years (M=49.4 months). Note that the N's (see Table 1, Appendix A) are different for each dependent variable set as a function of differing degrees of missing data.

The sample of young people was purposely heterogeneous regarding various sociodemographic factors such as ethnicity and religion. Bereaved adolescents were grieving deaths of a variety of causes such as homicide, suicide, terminal illness, accidents, etc.

Materials

The questionnaire packet utilized in this research contained a number of self-report measures filled out by the adolescent participants.
Demographic information. Participants reported information regarding their age and whether or not they have experienced parental death and/or divorce.

Hopkins Symptoms Checklist (HSCL). The Hopkins Symptom Checklist (HSCL, Derogatis, Lipman, Rickels, Uhlenhuth, & Covi, 1974) is composed of 58 items, which reflect the kinds of psychological symptoms most frequently reported by individuals seeking outpatient counseling and therapy. It is comprised of five factors which include: Somatization, Obsessive-Compulsive, Interpersonal Sensitivity, Depression, and Anxiety. The scale is presented in a 4-point Likert format with respondents indicating the extent to which, (1=Not at all to 4=Extremely), they have been bothered by each symptom within the last week. Derogatis et al. (1974) found that internal consistency reliability estimates (coefficient alphas) for the five scales ranged from .84 to .87 and that test-retest reliability coefficients over a one-week interval ranged from .75 to .84. Higher scores indicate more symptoms.

Extended Objective Measure of Ego Identity Status-Revised Version (EOM-EIS). The revised version of the Extended Objective Measure of Ego Identity Status is a pen-and-paper instrument designed to assess the relative degree of prevalence of each of the four ego-identity statuses included in Marcia's (1966) model (EOM-EIS, Bennion & Adams, 1986). This 64-item measure uses a 6-point Likert format.
with respondents indicating the extent to which the item reflects their thoughts and feelings (1=Strongly Disagree to 6=Strongly Agree) with regard to religious, occupational, political, philosophical, and social contexts. The EOM-EIS is designed around the dimensions of interpersonal and ideological identity formation. Two items measure each of the four statuses (diffusion, foreclosure, moratorium, and achievement) for each of the four interpersonal and ideological content areas.

Through a personal communication with Adams, Blustein and Phillips (1990) found that the scales have adequate to excellent internal consistency (Diffusion (.68); Foreclosure (.90); Moratorium (.73); and Identity Achievement (.66)). In addition Adams indicated that the scales have stability coefficients form .82 to .90, across a 2-week interval. Bennion and Adams (1986) state that validity of the scale can be inferred from a factor structure which is relatively consistent with theoretical predications. The EOM-EIS has discriminant validity with social desirability and has expected relationships with related measures of personality identity (Bennion & Adams, 1986).

Flum (1994) argues that the EOM-EIS has only been validated with college students. However, Jones and Streitmatter (1987) used the EOM-EIS and found acceptable estimates of reliability with a sample of early and middle adolescents. Cronbach alpha coefficients were .80 for total
foreclosure, .74 for moratorium, .77 for achievement and .52 for the interpersonal diffusion subscale. The median coefficient was .67. Estimates of convergent-divergent validity ranged from .52 to .80. Minor changes will be made in the wording of items to render them more applicable to early and middle adolescents. The subscales for the four statuses will be use as continuous variables, with high scores indicating more adherence to the particular status.

Adolescent Coping Orientation for Problem Experiences (A-COPE). The Adolescent Coping Orientation for Problem Experiences was designed to measure coping responses in terms of specific behaviors undertaken in an effort to manage the demands of the stressful situation (A-COPE, Patterson & McCubbin, 1987). The A-COPE is a self-report scale containing 54 items and is presented in a 5 point Likert-format (1=Never to 5=Most of the Time). Through factor analysis, Patterson and McCubbin (1987) found 12 factors Each are presented with their respective alpha reliabilities: Ventilating Feelings (.75), Seeking Diversion (.75), Developing Self-Reliance and Optimism (.69), Developing Social Support (.75), Solving Family Problems (.75), Avoiding Problems (.71), Seeking Spiritual Support (.72), Investing in Close Friends (.76), Seeking Professional Support (.50), Engaging in Demanding Activity (.67), Being Humorous (.72), and Relaxing (.60). High
scores on the subscales indicate more frequent use of the type of coping behavior.

The authors view coping as one of four components that interact to affect adolescent adaptation. These four components include: demands (stressors and strains), resources (knowledge, skills), definitions/meaning (way the individual and family perceive situations), and coping. They define a coping behavior "as a specific cognitive and/or behavioral response of an individual (e.g. adolescent) or a group of individuals (e.g. the family) to reduce or manage demand(s)" (p. 167). This interactional theory was the guide with which Patterson and McCubbin (1987) developed their coping instrument.

Using a high school sample, they found that the most common coping pattern was relaxing, with self-reliance/optimism, investing in close friends, and seeking spiritual support also being commonly endorsed. Examples of the more infrequently stated patterns included seeking professional help, avoiding problems, and turning to family members to solve problems. In an effort to determine the concurrent validity of the measure, Patterson and McCubbin (1987) examined the relationship between coping patterns and the use of cigarettes, beer, wine, liquor, and marijuana among high school-aged adolescents aged 13-18. They found that ventilating feelings, investing in close friends, and developing social support complemented substance use;
whereas coping directed at solving family problems, seeking spiritual support, and engaging in demanding activity competed against substance use. Regression analysis indicated similar relationships between these patterns of coping and substance use.

Marlowe-Crowne Social Desirability Scale. The Marlowe Crowne Social Desirability Scale was first designed as an alternative to social desirability scales derived from MMPI items (Crowne & Marlowe, 1960). It is designed to measure response bias and contains 33 items which are culturally sanctioned, but are of improbable occurrence. A ten-item short-form of this instrument noted by Strahan and Gerbasi (M-C 1(10); 1972) will be utilized in the present investigation. Strahan and Gerbasi (1972) found a reliability coefficient of .70 and .66 with college aged males and females respectively with this short form. Framboni and Cooper (1989) utilized a sample including subjects aged 16 to 65 and found reliability coefficients of .70 and .71 for men and women respectively. In addition, they found that this short form significantly correlated with the Total scores on the Marlowe-Crowne (.90). The Marlowe-Crowne Social Desirability Scale has often been utilized with adolescent samples (Jemmontt & Jemmontt, 1993; Eisenberg, Miller, Shell, McNaIley, & Shea, 1991; Johnson & McCutheon, 1981). Minor changes were be made in items to
render them more appropriate for use with an adolescent sample. High scores indicated elevated response bias.

**Procedures**

Prior to beginning data collection, approval was obtained from the University of North Texas Committee for the Protection of Human Subjects to ensure that the procedures and materials used in the study were reasonable. Approval was also obtained from the administrative committees of all high schools and grief support centers.

Adolescents and their parents were given written descriptions of the purpose of the study and asked to sign consent forms. These informed consent forms were kept separate from the questionnaires ensuring confidentiality of the participants. Individuals who elected to participate were asked to return the parental consent form stating that parent/guardian permission was given for the child to participate. After consent was obtained, adolescents attending the secondary schools completed the packets while in class.

Adolescents recruited from the grief support centers were either presented with a brief description of the study upon their initial visit to the center or during a support group session. If the adolescent chose to participate, parental consent was then obtained. The adolescent either completed the packet during the initial intake session or during a group session.
CHAPTER III

RESULTS

Multivariate Analyses of Covariance

A series of three 3 (type of loss; parental death, parental divorce, and control) x 3 (age; early, middle, and late) x 2 (gender) Multivariate Analyses of Covariance with socioeconomic status and social desirability as covariates were performed on the subscales of each of the following; the EOM-EIS, the Hopkins Symptoms Checklist, and the A-COPE. Social desirability and SES were found to correlate with a number of the variables and so were included as covariates (see Table 2, Appendix A). Martial conflict was hypothesized to be an important covariate for the divorce literature has suggested that the extent of parental arguing may strongly affect a child's adjustment to divorce. However, the low response rate to this item by the parental death group precluded its use as a covariate.

Identity Status. Although no interaction effects were detected for the subscales of the EOM-EIS, main effects were obtained on the multivariate level for age, $F(8,528) = 2.19$, $p < .05$. Univariate analysis indicated significant differences in Moratorium, $F(2,226) = 4.21$, $p < .05$, with the middle age group scoring significantly higher than the late age group but not differing from the early age group.
and in Foreclosure, $F(2,226) = 3.73$, $p < .05$, with the early and middle age groups scoring higher than the late age group, but not differing from each other (see Table 3, Appendix A).

**Adjustment.** While there was no three way interaction, a type of loss by gender interaction was detected, $F(10,588) = 2.08$, $p < .05$, for the subscales of the Hopkins Symptom Checklist. Univariate analyses suggested that this interaction was limited to Somatization, $F(2,297) = 4.36$, $p < .05$, with females in the parental death and parental divorce groups scoring higher on this variable than males in each of these groups (see Table 4, Appendix A).

Main effects for gender were obtained on the multivariate level, $F(5,293) = 9.11$, $p < .001$. Univariate analysis indicated a significant difference in all the adjustment variables of Somatization ($F(1,297)=36.68$, $p<.001$), Obsessive-Compulsive, $F(1,297) = 24.80$, $p < .001$, Interpersonal Sensitivity, $F(1,297) = 32.85$, $p < .001$, Depression, $F(1,297) = 33.08$, $p < .001$, and Anxiety, $F(1,297) = 20.99$, $p < .001$, with females consistently scoring higher than males.

The multivariate effect for loss was also significant, $F(10,588) = 3.05$, $p < .001$. Univariate analysis indicated a significant difference by type of loss for all of the adjustment variables. The parental death and parental divorce groups, although not different from each other,
scored significantly higher, than the control group indicating greater endorsement of problems with Somatization, $F(2,297) = 8.36$, $p < .001$, Obsessive-Compulsive, $F(2,297) = 6.74$, $p < .001$, Depression, $F(2,297) = 8.61$, $p < .001$, and Anxiety, $F(2,297) = 3.02$, $p < .05$). Only the parental death group differed significantly from the control group in reference to difficulty with Interpersonal Sensitivity, $F(2,297) = 5.95$, $p < .01$.

**Coping.** No interactions were detected using the subscales of the A-COPE, however, main effects were revealed on the multivariate level for age, $F(24,558) = 2.97$, $p < .001$, gender, $F(12,278) = 9.47$, $p < .001$, and type of loss, $F(24,558) = 2.55$, $p < .001$.

Univariate analyses for gender suggested that females consistently scored higher than males on the following coping behaviors: Ventilating Feelings, $F(1,289) = 13.13$, $p < .001$, Developing Social Support, $F(1,289) = 63.71$, $p < .001$, Solving Family Problems $F(1,289) = 7.15$, $p < .01$, Seeking Spiritual Support, $F(1,289) = 15.02$, $p < .001$, Investing in Close Friends, $F(1,289) = 7.09$, $p < .01$, and Seeking Professional Support, $F(1,289) = 4.72$, $p < .05$, (see Tables 5-7, Appendix A).

Univariate analyses for age indicated that the early age group scored significantly higher than both the middle and late age groups for Seeking Spiritual Support, $F(2,289) = 6.00$, $p < .01$, Seeking Professional Support, $F(2,289) = $
6.79, \( p < .001 \), Engaging in Demanding Activity, \( F(2,289) = 6.08, p < .01 \), and Being Humorous, \( F(2,289) = 3.24, p < .05 \). The early age group scored significantly higher than only the late age group in Investing in Close Friends, \( F(2,289) = 4.08, p < .05 \). The Seeking Diversions coping behavior was utilized significantly more by the early age group than the middle age group and significantly more by the middle age group than the late age group, \( F(2,289) = 7.86, p < .001 \).

Univariate analyses for type of loss suggested that the control group scored significantly higher in Solving Family Problems, \( F(2,289) = 4.18, p < .05 \), and Seeking Spiritual Support, \( F(2,289) = 5.92, p < .01 \), than the parental death and parental divorce groups, with the latter two not differing from each other. In addition, the control group scored higher in Engaging in Demanding Activity than the parental death group, \( F(2,289) = 4.89, p < .01 \). In contrast, the parental death group was significantly higher in Seeking Professional Support than the control group, \( F(2,289) = 11.98, p < .001 \).

**Correlational Analyses**

Pearson product moment correlations between coping behaviors and adjustment variables are presented in Table 8. Ventilating Feelings, Developing Social Support, Avoiding Problems, Seeking Professional Support, and Relaxing were positively related to endorsement of problems on all five adjustment measures. Investing in Close Friends was
positively related to the Somatization, Obsessive-Compulsive, and Depression subscales. In contrast, Solving Family Problems was negatively related to Interpersonal Sensitivity, Depression, and Anxiety (see Table 8, Appendix A).

Pearson product moment correlations between coping behaviors and identity variables were also computed and are presented in Table 9. Identity Achievement was found to significantly correlate in a positive direction with all of the coping behaviors with the exception of Avoiding Problems for which the relationship was in the negative direction and Ventilating Feelings and Seeking Professional Support for which the correlation was not significant. Foreclosure was significantly and positively correlated with Seeking Diversions, Solving Family Problems, Seeking Spiritual Support, and Engaging in Demanding Activity, while negative correlated with Avoiding Problems. Diffuse identity status was negatively correlated with Developing Self-Reliance, Developing Social Support, Solving Family Problems, Seeking Spiritual Support, Investing in Close Friends, and Engaging in Demanding Activity and positively related to Avoiding Problems. Moratorium was positively correlated with Ventilating Feelings, Seeking Professional Support, Being Humorous, and Relaxing and negatively related to Investing in Close Friends.
Pearson product moment correlations between the identity and adjustment variables are presented in Table 10. Foreclosure was negatively correlated with endorsement of adjustment problems, while Moratorium was positively correlated with all but Somatization. Diffusion, however, was found to positively correlate with Somatization (see Table 10, Appendix A).

The early and late parental death groups were selected and correlations between Identity Achievement and the adjustment variables were computed for each group separately. Independent t-tests were computed and no significant differences were detected (see Table 11, Appendix A).

Additional Analyses

In light of the fact that participants in the parental death and divorce groups experienced losses at varying times, subsequent analyses were performed in order to determine the effect of time since loss. Pearson product moment correlations between the time since divorce and time since parental death are shown in Table 12. Time since divorce did not significantly correlate with any of the dependent measures, while time since death correlated positively with Social Desirability and negatively with Seeking Professional Help.

An overall length variable was then created for both loss groups and was used as an additional covariate along
with Social Desirability and SES in a MANCOVA using only the parental death and divorce groups. The original 2 (Type of Loss; parental death or divorce) x 3 (Age) x 2 (Gender) MANCOVA utilizing only Social Desirability and SES indicated no interactional significance, but main effects were found for age, $F(42,176) = 1.46, p < .05$, and gender, $F(21,87) = 3.60, p < .001$. Univariate analyses for gender indicated that females scored higher than males on all adjustment problem subscales (Somatization, Obsessive-Compulsive, Interpersonal Sensitivity, Depression, Anxiety) as well as the following coping variables: Ventilating Feelings, Developing Social Support, Avoiding Problems, Seeking Spiritual Support, and Investing in Close Friends.

Univariate analyses for age indicated, much as in the original analysis, the middle age group scored higher on Moratorium than the older age group. In addition, the youngest age group scored significantly higher on the Seeking Diversion than the oldest group and higher on Seeking Spiritual Support than the middle age group. This youngest age group scored higher than both of the other age groups in Seeking Professional Support.

A similar MANCOVA, with the addition of the Length covariate, revealed a type of loss by age interaction with the middle age group experiencing parental death scoring significantly lower on the coping strategy of Investing in Close Friends than the early and late parental death age
groups as well as all parental divorce groups. The main
effect for gender remained with slight changes in that the
univariate results with the Avoiding Problems finding being
lost, while a univariate result emerged for the Moratorium
identity status with females scoring higher than males. The
main effect for age also remained significant with no
changes noted in the univariate results.

In addition to the issue of time since loss, there is a
possible support effect as some of the parental death and
parental divorce participants were recruited from support
programs while others were not. A 2 (Type of Loss; parental
death or divorce) x 2 (Support or No Support) MANCOVA
with social desirability and SES as covariates was
performed to address this issue. The analysis revealed no
significant multivariate interaction, $F(21,115) = 1.15, p > .05$, nor main effects for Support, $F(21,115) = .79, p > .05$, or Loss, $F(21,115) = 1.23, p > .05$. 
CHAPTER IV

DISCUSSION

Identity Status

It was predicted that the early male adolescent group who experienced divorce would demonstrate the lowest level of identity achievement and the highest level of foreclosure. Neither this three way interaction nor the hypothesized age by loss interaction, with the youngest aged adolescent groups who experienced death or divorce expected to score higher on foreclosure and lower on achievement than the other groups, were obtained. In addition, the predicted main effect for type of loss with adolescents in either loss group scoring higher on foreclosure and lower on achievement than controls was similarly not obtained.

There are a number of possible explanations for the lack of support for the above hypotheses. The first of such explanations being that loss or type of loss does not directly or interactionally (with age and gender) affect identity status. Somewhat in line with this notion, Balk (1990) found that adolescents who had lost a sibling had self-concepts comparable to established norms. Similarly, Nelson, et al. (1992) found that there were no significant differences in identity or intimacy scores, according to the Personality Orientation Inventory, between college students
from intact and divorced homes. The authors of both investigations clearly discussed the limitations of their measures in capturing the concept of identity formation. Nelson et al. (1993) also found no significant relationship between family structure (intact vs. divorce/parental death) and interpersonal identity status.

The majority of investigations focused on the effects of parental death and divorce on identity formation and related variables, although in varying directions, suggest that such losses do affect identity formation (Aro, 1988; Elder, 1993; Grossman, Shea, and Adams, 1980; Oshman & Manosevitz; 1976; Sabino, 1993; Silverman, 1987; St. Clair & Day; 1979; Studer, 1993). In this light it appears important to consider other possible explanations for the lack of support for the identity status related predictions in the present investigation.

The simplest explanation for the lack of support for the above hypothesized interactions is the small sample size in some of the cells and the resulting problems with lack of statistical power. With such low group N's as 4-6 (see Table 1), the possibility of finding an interaction, if one truly does exist, is highly compromised.

It is important to consider that a number of the above studies which reported significant identity differences related to loss were executed using college students or adults who experienced their loss (death or divorce) in
adolescence (Grossman, Shea, & Adams, 1980; Sabino, 1993; Silverman, 1987). This fact highlights the possibility that the effects of a significant adolescent loss may somehow be delayed, not presenting until young adulthood. Support for this possibility is also found in research which suggests that there is a unique and "lingering" quality to adolescent bereavement (Balk, 1983; Raphael, 1983).

It is similarly important to note that the adolescents in the present investigation had not necessarily experienced their loss recently. Therefore, an adolescent considered to be in the oldest parental death group may actually have experienced loss at a much younger age. It may be that identity differences are closely a function of the age at the time of the loss. The best way to investigate the above possibilities would be to utilize a longitudinal design following adolescents with differing loss experiences over time.

Viewing identity formation as a life-long process rather than as a stage that begins and ends during adolescence is another critical point to consider in interpreting these findings. It is possible that with a longitudinal design, it would be found that adolescents who experience parental death or divorce at different ages may go through the process of identity development in a different pattern than their peers not experiencing such losses. Research has suggested that one of the limits to
Marcia's theory is that it does not explain how some people regress while going through the process (Adams & Fitch, 1982; Broughton, 1983; Marcia, 1976). For example, reaching achievement at one age and then going "backward" to perhaps moratorium or diffusion. Following adolescents over time may reveal patterns which are unique to each loss and perhaps even interactions between loss, age, or gender.

Hill's (1993) suggestion, noted earlier, to look at specific content domains of identity status could be another explanation for the present lack of interactional and main effect findings for identity status. Perhaps the identity related effects of loss are unique to certain identity status content areas such as such as religion, friendship or dating. Kroger (1988) argued that it is quite possible for individuals to be "achieved" in some areas while "foreclosed" in others.

In addition to the above listed considerations, is the fact that the present investigation utilized the EOM-EIS measure in a continuous manner rather than as an aid in identity classification. The majority of previous studies using this measure have classified participants into one of the four statuses, whereas in the current investigation all adolescents received a score for each status. It is possible that categorizing participants based on identity status and type of loss would suggest differential effects of loss on identity formation.
Identity Status and Gender

Contrary to the prediction that females would score higher on identity achievement than males, no gender main effects were found for identity. The lack of gender differences in the present investigation is commensurate with the literature on gender as it relates to identity which suggests that males and females show similar processes of identity formation (Hill, 1993; Waterman, 1982).

Identity Status and Age

As hypothesized, main effects for age were found for identity status, with early and middle adolescents scoring higher than late adolescents on the Foreclosure status. This finding suggests that early and middle adolescents are more likely to express ideological and value commitments based on parental views rather than personal exploration and experimentation. It reinforces the importance of age as a factor affecting identity development and points to the necessity of utilizing more refined age categories while investigating adolescent psychological issues. Contrary to prediction, early adolescents did not score higher than the middle group on Foreclosure, indicating that adolescents in these two groups may not differ in their tendency to endorse parental values. This finding may also relate to the limitations noted by various researchers concerning the use of the EOM-EIS with such young adolescents (Flum, 1994;
Hill, 1993). It is possible that differences between these
groups could be detected if a different measure were used.

Contrary to prediction, the middle adolescent age group
scored higher on Moratorium than the late adolescent group
suggesting that adolescents in this middle group are perhaps
more in the heart of the crisis period of identity formation
than their older counterparts. Because Moratorium is
considered a more developed level of identity status it was
thought that late adolescents would endorse the highest
level of this variable. It may be that late adolescents are
in some sense beyond the crucial experimentation involved in
the identity crisis. This finding taken in conjunction with
the Foreclosure one listed above, highlights the unique
position middle and to an extent young adolescents are in;
struggling between a sense of connection with familial
values and the initiation of the crisis period. Sterling
and Van Horn (1989) found that adolescents in the moratorium
status scored significantly higher in death anxiety. This
finding is important for therapists to keep in mind while
working with middle aged adolescents. Although not directly
supported by the data, such an issue may become even more
critical when the adolescent has experienced the death of a
close family member.

Analyses did not confirm predictions made regarding the
Diffusion status in that the early age group did not score
significantly higher on this subscale than the middle age
group, who in turn did not score higher than the oldest age group. The lack of univariate findings for this status suggests that adolescents, regardless of age, endorse similar levels of a general lack of occupational and ideological commitment. Although the groups may differ from each other in their endorsement of the Foreclosure and Moratorium status domains, it may be that, overall, they are all to some extent confused regarding their identity. This finding may suggest that this domain of EOM-EIS measures a parallel, but in some sense distinct, process from the other statuses.

The lack of significance with regard to the Achievement identity status is in line with Flum's (1994) argument that Marcia's model is not realistic for high school students in that they are seldom ready or able to make long term ideological or vocational commitments. The present findings, however, are not necessarily consistent with Hill's (1993) idea that the majority of teenagers are in the Diffusion or Foreclosure statuses.

The fact that the middle adolescent age group scored higher than the late age group on Moratorium suggests that there is likely a level of ideological exploration that begins in adolescence. This experimentation may even begin to decrease as individuals reach ages 17-19. The present investigation does seem to suggest that the EOM-EIS instrument, which is based on Marcia's model, may be more
useful with high school students if used in a continuous rather than categorical manner.

The possibility of cohort effects must be considered as a confounding variable when interpreting the above age main effects for identity. The rising problems with violence, AIDS, and other death related variables may have impacted the younger children and led them to perhaps score higher on foreclosure than the oldest group in this study may have at time when they were 13-14 years old.

Adjustment

Neither the predicted three way interaction which hypothesized that early adolescent males experiencing divorce would score highest on adjustment difficulties, nor the age by type of loss interaction which hypothesized that early adolescents experiencing loss would score highest, were obtained. In addition, the hypothesized main effect for age which suggested that the early adolescent age group would score higher on adjustment problems than the middle adolescents who would in turn score higher than the oldest group was not found.

These findings may indicate that age, as a factor within the stage of adolescence, may not play a clear direct or interactional role in adjustment. A critical issue which must be raised, however, and kept in mind during the present discussion is that the Hopkins Symptoms Checklist (HSC) taps internally focused difficulties (e.g. depression and
anxiety) and must be seen in that light rather than as a general measure of adjustment per se. It is quite possible that with a different operational definition and instrument, age effects could emerge.

The lack of support for the above listed interactions in the current investigation makes intuitive sense when one considers the internalized nature of the HSC. The hypothesized three way interaction that young males experiencing divorce would show more difficulties was based on previous divorce literature (Emery, 1982; Hetherington, 1979). More recently, however, Emery, Hetherington, DiLalla (1984) have suggested that girls experiencing divorce are more likely to respond with internalizing behavior, while their male peers are more likely to exhibit externalizing symptoms.

Adjustment and Gender

Contrary to the hypothesis that females would demonstrate lower levels of adjustment difficulties, females scored higher on all subscales of the adjustment measure. This finding is clearly commensurate with the above discussion regarding the HSC. In addition, it is traditionally held that boys, even without the experience of a loss, tend to display more delinquent and aggressive and less internalizing difficulties than females (Berger, 1988; Seifert & Hoffnung, 1994). It is quite possible that both male and female adolescents experience difficulties with
adjustment, but that these difficulties are expressed differently based on gender.

The above findings and discussion certainly highlight the necessity for further adolescent based gender research which employs measures of both internalizing and externalizing adjustment symptoms. In a broader sense, investigations incorporating a more multidimensional approach to adjustment in adolescence would be welcome additions to the literature base. Wager (1996) noted that when attempting to look at optimal adolescent development it is critical to consider the following domains: biological, cognitive, emotional, social, moral, and vocational. In a similar vein, Crose, Nicholas, Gobble, and Frank (1992) have designed a systems model for wellness with the almost identical dimensions of physical, emotional, social, vocational, spiritual, and intellectual. Such theoretical offerings should act as guides for further research focused on adolescent "adjustment."

An unanticipated type of loss by gender interaction was found for adjustment, with females in the parental death and divorce groups scoring higher on the Somatization variable than control females and males in the respective loss groups. This finding suggests that although adolescent females in the study generally tended to somatize more than males, the experience of a major loss such as parental death or divorce seemed to exacerbate this symptom. It is
important for those (e.g. teachers, counselors, mental health professionals) working with adolescent females who have experienced these losses to be mindful of and sensitive to bodily complaints which may be indicative of adjustment problems.

**Adjustment and Type of Loss**

Although the parental divorce group was expected to demonstrate greater adjustment problems than the parental death group, results indicated that the two loss groups did not differ on Somatization, Obsessive-Compulsive, Depression, or Anxiety, but each scored significantly higher than the control group on difficulties in these areas. This finding suggests that there are likely similarities between the adjustment related effects of parental death and divorce. It may be that each loss is interpreted as irreplaceable and thus not as differentially related to adjustment as one might expect.

In contrast, only the parental death group scored higher than the control group on the Interpersonal Sensitivity subscale of the HSC. This subscale measures feelings of inadequacy and inferiority in comparison to others and also "indicates uneasiness and marked discomfort in interpersonal interactions," with negative expectations regarding personal communications. This finding highlights the feeling of isolation and stigma so commonly experienced by adolescents grieving the death of a parent.
Adolescents grieving a parental death likely find it difficult to discuss their feelings and experiences with their peers whereas teenagers who have experienced parental divorce may find it easier to locate others who have had a comparable experience. Similarly, it may be that with increasing rates of parental divorce, the associated stigma for this loss has decreased, allowing for a greater level of peer interaction. Unfortunately, it seems that the taboo nature of death continues to establish an interpersonal barrier between grieving adolescents and their peers.

These findings reinforce the need for continued programs established to assist and support adolescents of parental death and divorce, while also suggesting that the reduction of stigma as well as the Universality and Interpersonal Learning elements of group therapy/interaction (Yalom, 1985) may be particularly important for adolescents grieving the death of a parent.

Coping and Gender

The data partially supported the predicted coping main effects for gender in that females did score higher than males in Seeking Social Support, Solving Family Problems and Investing in Close Friends. Contrary to prediction, however, females did not score higher than males in Developing Self Reliance and males did not demonstrate greater use of Being Humorous than females.
As hypothesized, females scored higher than males in Seeking Social Support, Solving Family Problems, and Investing in Close Friends. This finding makes intuitive sense in that females have traditionally been viewed as depending on personal relations to cope with difficulties (Wheeler & Nezlak, 1977). In addition, females also utilized the coping behaviors of Seeking Spiritual Support, Seeking Professional Support, and Ventilating Feelings more than males. Again, females are traditionally thought to be more accepting of and willing to seek support and often may experience lower feelings of stigma when doing so (Crow, Smith, McNamee, & Piland, 1994; Garland & Zigler, 1994; Rickwood & Braithwaite, 1994). In reference to Ventilating Feelings finding, western culture has long promoted the idea that females are allowed or socialized to exhibit emotionality more than males (Sapiro, 1990). It appears that the gender roles espoused by society emerge even in adolescence. An interesting point, however, is that the Ventilating Feelings factor of the A-COPE actually taps more angry types of emotional releases such as blaming others, swearing, and letting off steam through complaining. Perhaps during adolescence these types of expressions are more allowed/tolerated in females than males.

Contrary to prediction, females did not score higher than males and Self-Reliance and males did not score higher than females on Being Humorous. These findings are likely
the result that this analysis was done through the collapsing across type of loss and so includes adolescents who experienced death and divorce as well as no loss. The predictions of these findings were based on a study done with adolescents who had not experienced such intense life events (Patterson & McCubbin, 1987). It may be suggested that in parental death and divorce there is less likelihood of adolescents of either gender engaging in humor or in self-reliance. These types of coping strategies are likely not applicable or relevant when one is attempting to manage a major loss.

Coping and Age

No hypotheses were made regarding age effects for coping, but they emerged in that early adolescents scored higher on Seeking Spiritual Support, Seeking Professional Support, Being Humorous, and Engaging in Demanding Activity than the middle or late groups. The first two findings may reflect a tendency in younger adolescents, who are more basically dependent on others than older adolescents, to feel more comfortable with seeking help. Being Humorous may also be an indication that younger teens do not feel the social demands to behave, feel, or cope "appropriately" as older adolescents do. When the individual items of the Engaging in Demanding Activity subscale are reviewed, the finding that younger adolescents scored higher on this subscale makes intuitive sense. There is an undertone of
improving the self and pleasing others in this factor which likely relates to the early adolescent's higher tendency to follow parental wishes and desires.

Early adolescents were also found to score higher on Investing in Close Friends than the late adolescent age group, again, possibly indicating their willingness to seek peer support and a lower concern about appearing vulnerable. It was also found that early adolescents scored higher in Seeking Diversions than the middle age group, with the middle group scoring higher than the late adolescent group. This finding indicates the increased emotional maturity and capacity for difficult feelings which comes with age. Older adolescents may feel less of a need to divert their thoughts and feelings because of an increased ability to tolerate a high level of emotional arousal.

Coping and Type of Loss

Although no predictions were made regarding main effects for type of loss, differences did emerge. The control group scored higher on Solving Family Problems and Seeking Spiritual Support than those in either of the loss groups. It may be that adolescents in the loss groups have a sense that no matter their efforts, they will be unable to solve the problems their family is experiencing. It may also signify a tendency to withdrawal from the family rather than to engage in family activities and discussions. Adolescents, like all people in situations involving intense
loss, may also question their spiritual beliefs and so therefore may again not see Seeking Spiritual Support as a means of coping. Adolescents experiencing losses may be less likely to engage in religious activities/beliefs as a means of coping, and although not directly supported by the current data, may even view this realm as a source of stress; an indication of the struggle with the idea of a higher power who could allow such an event to occur.

The control group scored higher than the parental death group in Engaging in Demanding Activity, which could indicate, as suggested above, a higher willingness to try to "improve themselves" as a means of coping, while those in death group do not attempt to cope in such a way. It is likely that grieving adolescents are aware that such behavior is not relevant or helpful in coping with their loss. This finding is somewhat in conflict with the suggestion that grieving adolescents may attempt to become the "good" child in reaction to parental death (Fleming & Adolph, 1986).

The parental death group scored higher than the control group in Seeking Professional Support. This finding indicates that the intense impact of losing a parent frequently leads adolescents to talk with a counselor, teacher, or mental health professional. It is important to consider, however, the fact that many children and adolescents seek therapy at the initiation of their parents
rather than as an autonomous act. Bereaved spouses may be more likely to bring their children to counseling than divorced or control parents.

Correlational Analyses

As predicted, a positive correlation between Avoiding Problems subscale of the A-COPE and adjustment problems emerged in the data suggesting that avoidance relates to psychological difficulties. Although issues of causation are impossible to address, it may be that avoidance leads to problems. It is also, possible that avoidance is the result of an overwhelming level of psychological distress. A prediction was also made regarding active coping strategies and lower levels of adjustment problems. Difficulty emerges when trying to determine the status of this prediction in that one of the coping factors of the A-COPE which can be thought of as "active" correlated in the predicted direction with adjustment difficulties (Solving Family Problems), while others correlated in the opposite direction (Ventilating Feelings, Seeking Social Support, Seeking Professional Support). In the latter cases, it may be that higher levels of adjustment difficulties lead to the use of a more active coping style. It is possible, however, that these coping behaviors somehow contribute to increased difficulties with adjustment.

As predicted, identity achievement was found to relate to lower use of Avoiding Problems and higher scores on all
the other more active oriented coping behaviors except Ventilating Feelings and Seeking Professional Support. Those adolescents who appear closer to making ideological and occupational commitments may tend use active oriented coping styles and less avoidance when dealing with difficult issues. This finding may also suggest, however, that those who are higher in Achievement are led to use more coping behaviors. It is possible that these more highly identity developed individuals are somehow more aware of problems and therefore are required to cope more.

Interestingly, Foreclosure status was found to correlate with the coping strategies in a similar pattern to that of Achievement. This finding may relate to the fact that both of these statuses involve a sense of ideological commitment, although the commitment associated with Foreclosure is based on an alignment with parental views rather than the result of self-exploration and experimentation. When one feels committed there may be a tendency to cope in more active ways rather than avoidant or perhaps active coping contributes to ideological commitment. Future research could focus on clarifying whether active coping possibly contributes to a premature commitment or more often fosters appropriate or mature identity formation.

Contrary to prediction, Foreclosure was negatively rather than positively related to problems with adjustment difficulties. This makes intuitive sense when one considers
that those endorsing Foreclosure items are less likely to be experiencing an inner struggle because their view of the world is already established through identification with parental beliefs. This is perhaps a rather passive process involving little resistance and conflict.

A negative relationship between Achievement and adjustment problems was expected, but not found. In fact, Achievement did not correlate significantly with any of the HSC subscales. This finding may be an indication of low variability in the Achievement variable with most adolescents scoring low on this variable. It may also suggest that the Achievement status can not consistently be related to internalized adjustment factors. For adolescents in the current sample, being "Achieved" may not necessary mean that one is more highly adjusted.

The Diffusion status was found to positively relate to Avoiding Problems suggesting that those who lack ideological commitment may be more likely to avoid problems or perhaps that their avoidance of problems contributes to a lack of reaching commitment. Diffusion was also found to relate to high scores on Somatization. It is possible that these two variables are related through a third; denial. Both have an avoidant undertone; somatization as a denial of emotions which emerge in a physical form and Diffusion as a resistance to or denial of engaging in the identity process.
High scores on Moratorium related to high scores on all adjustment problems, with the exception of Somatization. This finding appears reasonable in that Moratorium is associated with active engagement in the identity crisis. Being in the heart of the process may contribute to difficulties with Depression, Anxiety, Obsessive-Compulsive behaviors, and Interpersonal Sensitivity. The finding that Moratorium did not correlate with Somatization can perhaps be best understood by the idea Moratorium does not involve denial, which seems closely linked with Somatization, but rather the admission of the ideological struggle.

The lack of significant differences between the correlations between achievement and adjustment variables for early versus late adolescents suggests that differential effects of achievement status on different age groups do not exist. It is possible, however, that a true difference does exist and would emerge using a larger sample.

**Time Since Parental Death or Divorce**

Findings suggest that time since divorce did not relate to any of the dependent measures in the present investigation indicating that the time since divorce may not be as important as the actual occurrence of the divorce. It is important to consider, however, that the time since the finalizing of a divorce may not be as significant factor a factor as the time since the beginning of marital difficulties. The above issues would, of course, be best
investigated through the utilization of a prospective longitudinal design.

Time since death showed similar results with the exceptions that the longer the time since parental death the more likely adolescents were to respond in a socially desirable manner and the less likely they were to seek professional help. It is possible that adolescents feel better over time and, therefore, experience less of a need for professional support. In reference to the social desirability finding, it may be that once the intense reaction to the death dissipates, adolescents become more concerned about how others might evaluate their responses. These results may also reflect an adolescent sensitivity to the social expectation in our society that grief is a time limited phenomenon.

The lack of any further correlations between time since death and the dependent measures in the present investigation may again, such as in the time since divorce findings, indicate that the loss itself rather than the time since loss may the crucial issue. Gray (1987) has suggested that time since parental death may not relate to adjustment or other variables because adolescents, as most grieving individuals, mourn in a fluctuating manner for likely 5 or more years following the loss.

To further investigate the relationship between time since loss and the dependent measures, a general length
variable was created and used as an additional covariate with the parental death and divorce groups. Results changed slightly with the addition of this covariate. A type of loss by age interaction emerged with the middle age group experiencing parental death scoring lower on Investing in Close Friends than all other groups in the analysis. This finding may relate to the previous one that suggested adolescents ages 15-16, in general, appear to be more in the heart of the identity crisis than their younger and older counterparts. The active struggle with ideological commitments may be exacerbated for middle aged adolescents grieving the death of a parent resulting a greater difficulty in investing in deep and meaningful relationships with peers. It is also possible that these adolescents have not committed to the type of friends that are right for them and, therefore, do not engage with peers as much or at least do not view these relationships as helpful in coping.

The notion that middle adolescents invest less in close friends may coincide with Phase II of the grief model of Adolph and Fleming (1986). The authors have suggested that middle aged adolescents may tend to respond to parental death more independently through either aggression or overcontrolled behavior than their younger or older adolescent peers. Further research is needed to clearly determine the explanations behind the decreased tendency in middle age adolescents to invest in close friends.
This finding is particularly troubling when one considers the grieving adolescent social support research. Gray (1989) found that the great majority of grieving teens identified a peer as "the most helpful" person during their grief. Similarly, Hogan and DeSantis (1994) found that fifty-one of the sibling bereaved adolescents they surveyed stated that they had friends who helped them cope with their grief. It seems critical for mental health providers as well as other adults working closely with grieving teens ages 15-16 to be aware that these individuals may be pushing away their peers at a time when they seem to need them most.

This finding clearly highlights the stigma and interpersonal difficulty grieving adolescents experience after the death of a parent. Using close friends as a means of coping may be extremely difficult when one feels inadequate, inferior, and uncomfortable in interpersonal interactions as well as having negative expectations about communicating with others.

Also with the addition of the length covariate, the gender effect for Avoiding Problems was lost and a result emerged in that females scored higher than males on Moratorium. This finding may suggest that females who experience either parental death or divorce may be more likely than their male peers to engage in the experimentation and exploration involved in the heart of the identity struggle, when time since loss is controlled for.
The fact that the above findings emerged only through the adding of length since loss as a covariate suggests that this factor interacts with age, gender, and type of loss. Although not suggested by the previously noted correlations between time since divorce, time since death and the dependent variables, time since loss does appear to be a confounding factor which should be controlled for in future investigations of adolescent reactions to loss.

**Issue of Support**

The MANCOVA investigating the relationship between loss and support did not indicate any interactional or main effects suggesting that participation in a group did not affect responses to the identity, coping or adjustment variables. Although at first glance this may appear to suggest that adolescents who partook in the support groups received no benefit, it is important to note that the length of their involvement in the group was not utilized as a factor in this analysis. It is also important to remember that those who sought out support groups may have been at a lower level when beginning the group and then at the time of the study had reached the adjustment, identity, and coping levels of those adolescents who had not sought such extra support. Again, longitudinal analyses following matched controls and grieving adolescents would clearly lead to more definitive statements.
Limitations

There are various limitations to the present investigation. To begin, the small sample size in some of the cells, particularly those containing young adolescents experiencing losses, and the resulting effect on the statistical power of the analyses must be considered as a primary limitation. It is possible that findings could change or further emerge with the addition of more participants. A regression approach to the data would be a possible alternative to the present analyses. Such a procedure could better account for individual differences and would treat the variables as continuous while also avoiding the difficulty of small cell size.

In addition to problems with power, the small sample size precluded the separation of groups based on the gender of the remaining parent for the grieving adolescents or the parent with which the adolescents of divorce lived. Research has indicated that the sex of the remaining (Elder, 1993; Weller et al., 1991) or primary custodial parent (Kurdek & Sinclair, 1988) may affect adjustment and/or identity.

Other possible confounding factors not studied in the present investigation which have been found to relate to identity formation/development include the level of closeness or attachment to parents, parent the adolescent lives with, or in the case of parental death the remaining
parent (de Jong, 1992; Lopez & Gover, 1993). Similarly, Ryan and Lynch (1989) have found that emotional autonomy, closely linked to identity, is related to quality of parental attachment. Relationships/attachments to peers is another factor which appears important (Josselson, 1992; Flum, 1994; Kinney, 1993). Other variables are the development of Piagetian formal operational competencies (Boyes & Chandler, 1992), academic achievement (Cross & Allen, 1970) and moral development (Podd, 1972).

Notable variables found to relate to adjustment in children of divorce include conflict between parents, adjustment of the custodial parent, relationship with the noncustodial parent, child-rearing practices and child care, remarriage, and type of custody arrangement (Kelly, 1988). Variables found to affect the adjustment of children grieving the death of a parent include the role of the remaining parent and the family environment (Berlinsky & Biller, 1982; Krupnick, 1984), level of social support, a balanced personality, and the presence of religious beliefs (Gray, 1987). Weller et al. (1991) noted risk factors for depressive symptomatology in grieving children which include the mother as surviving parent, a preexisting untreated psychiatric disorder in the child, family history of depression and high socioeconomic status. The above factors, with the exception of the very last listed, were not included in the present investigation.
An additional factor which was not taken into account for the parental death group was the cause of death (Range & Niss, 1990; Sheskin & Wallace, 1976). Further studies are needed to investigate this issue and the possible differential effects on adolescent bereavement of a number of other death related factors such as sudden vs. prolonged, predictability of the death, etc (Bugen, 1976; Glick, Weiss, & Parkes, 1974).

The generalizability and external validity of the interactional and main effect findings which do not include the type of loss variable must be questioned in light of the present sample consisting two thirds of adolescents who have experienced a major life loss. Such a sample is likely not representative of the adolescent population as a whole. Generalizability must also be questioned in that the vast majority of participants were Caucasian.

As suggested previously, the cross-sectional nature of the study attenuates the strength of the findings. The preferable approach would be a prospective longitudinal design following adolescents who experienced loss and those who had not over time. Such a design would provide more definitive information concerning a possible causative relationship between loss and the dependent variables. In addition to clearing up the confound of individual differences, such an approach would also allow for the investigation of the possibility that adolescents who
experience loss move through the process of identity formation in a manner disparate than controls.

An additional limitation to the present study is the fact that adolescent participants were recruited from two different states. The possibility of regional differences in the experience of divorce and parental death must be considered. In addition, the participants in the investigation did not truly represent a random sample.

The subjective and self-report nature of all variables must also be considered as a possible limitation. The inclusion of more objectively operationalized variables (grades, disciplinary actions at school, behavior checklists, etc.) as well as information from other sources such as parents or teachers may have improved the investigation.

Conclusions

Despite the above listed limitations, the present investigation does provide useful information as well as suggestions for further research in the area of adolescence. To begin, the data emphasizes the unique position of adolescents aged 15-16, who seem to be struggling between a sense of connection with familial values and the initiation of the identity crisis period

Although there appear to be similarities between the adjustment difficulties of adolescents of parental death and divorce, it is necessary for professionals working with such
individuals to keep in mind the distinct challenges faced by adolescents grieving a parental death. These teenagers often feel "marked," isolated, inferior, and generally have difficulty interacting with their peers. Interventions aimed at this group of adolescents must address these critical issues.

The above listed findings seem clearly in line with the finding that adolescents aged 15-16 who experience parental death are less likely to utilize close friends as a means of coping with their loss. This finding is cause for concern in that research indicates that peers are often key players in helping teens move through the grieving process (Gray, 1989; Hogan & De Santis; 1994). Mental health care professionals must be particularly aware of the interpersonal obstacles encountered by middle aged grieving adolescents.

In addition, teachers and mental health workers interacting with females who have experienced parental death and divorce must be alert to signs of adjustment difficulties exhibited through physical complaints.

The present study confirmed previous research which indicated that there are few gender differences in identity formation (Hill, 1993; Waterman, 1982). Similar verification for the finding that females are more likely to cope through interpersonal and relational means was also indicated by the data (Patterson & McCubbin, 1987).
In reference to future investigations with adolescents, the present study clearly suggests separating adolescents into age levels of early, middle, and late, rather than assuming a homogenous group. It also adds validity to the notion of utilizing the subscales of the EOM-EIS with high school students in a continuous rather than categorical manner. In addition, the findings concerning how gender interacts with adjustment call for a more broad and multidimensional view of adolescent "adjustment."

The results suggest the need for longitudinal investigations examining the possible delayed effects of loss on identity development as well as the concept of identity formation as a process, in general, and as it relates to loss. Further work focused on discovering the clinical picture of those adolescents who seek support groups as well as on the relationship between support group involvement and identity development, adjustment, and coping is also essential.
APPENDIX A

TABLES
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* p < .05  
** p < .01
Table 3

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Table 5

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### Table 6

**Table of Means for Coping Variables—Parental Divorce Group**

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<tr>
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<td>20.86 (3.61)</td>
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<tr>
<td>Developing Social Support</td>
<td>13.60 (6.43)</td>
<td>17.79 (3.49)</td>
</tr>
<tr>
<td>Solving Family Problems</td>
<td>14.40 (5.03)</td>
<td>15.50 (3.57)</td>
</tr>
<tr>
<td>Avoiding Problems</td>
<td>10.40 (3.21)</td>
<td>9.43 (2.85)</td>
</tr>
<tr>
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<td>7.00 (2.83)</td>
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<tr>
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<tr>
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<td>2.93 (1.33)</td>
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<tr>
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<td>13.64 (3.73)</td>
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<tr>
<td>Being Humorous</td>
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<td>7.84 (2.06)</td>
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### Table 7

Table of Means for Coping Variables: Control Group

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<th>Old</th>
<th>Young</th>
<th>Middle</th>
<th>Old</th>
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<td></td>
<td></td>
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</tr>
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<td>Venalizing Feelings</td>
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<td>14.36 (3.83)</td>
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<td>Developing Social Support</td>
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<td>18.96 (4.07)</td>
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<td>21.68 (3.91)</td>
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<td>19.26 (5.39)</td>
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<td>17.92 (4.72)</td>
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<td>6.76 (2.17)</td>
<td>7.11 (2.01)</td>
<td>7.37 (1.89)</td>
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<td>13.32 (3.53)</td>
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<td>Being Humorous</td>
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<td>Relaxing</td>
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### Table 8

**Correlations Between Coping Behaviors and Adjustment (N=286)**

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<th>Interper.</th>
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<th>Anxiety</th>
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<td>-.11*</td>
<td>-.13*</td>
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<td>.04</td>
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<td>.11*</td>
<td>.09</td>
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Table 9
Correlations Between Coping Behaviors and Identity (N=286)

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<th>Diffusion</th>
<th>Foreclosure</th>
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Table 10

Correlations Between Identity and Adjustment Variables (N=268)

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<td>Interpersonal Sensitivity</td>
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<td>.03</td>
<td>-.20**</td>
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<td>Depression</td>
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<td>.20**</td>
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<td>-.15**</td>
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<tr>
<td>Anxiety</td>
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Table 11

Correlations Between Identity Achievement and Adjustment Variables Youngest and Oldest Parental Death Groups with Corresponding t values (N=49)

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<td>Interpersonal Sensitivity</td>
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<td>Depression</td>
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<tr>
<td>Anxiety</td>
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Table 12  
Correlations between time since divorce, time since death and dependent measures

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APPENDIX B

PARENT INFORMATION LETTER AND INFORMED CONSENT FORMS
Dear Parent(s):

Adolescence is a period of life filled with a variety of changes and challenges. Examples of these changes include loss experiences such as moving from one town to another, breaking up with a boyfriend/girlfriend, parental divorce, and parental death. Little is known about how teenagers, who are still learning about who they are, make sense of loss experiences.

We are conducting a study which focuses on how adolescents feel about the different losses they experience. We are also interested in how these loss experiences may affect the beliefs, attitudes, and behaviors of adolescents. As individuals who have worked closely with teenagers who have experienced loss, we are interested in this study from both a professional and personal viewpoint. It is hoped that this study will enable professionals (such as counselors and teachers) to better understand teenagers and therefore be better able to help them.

Your teenager is being asked to participate in this study which involves taking approximately 45 minutes to complete a questionnaire. There is no cost or fee to you for his/her participation, and he/she may withdraw at any time.

If you choose to allow your teenager to participate in this study, his/her answers will be kept strictly confidential, and neither your name nor his/hers will ever be used. He/she will be asked questions about his/her emotions, attitudes, physical health, and coping strategies. The potential personal benefit from participation is the opportunity for your teenager to express his/her own feelings and experiences to help professionals provide more informed and compassionate care to adolescents.

We hope you will choose to allow your adolescent to participate. Thank you for taking the time to consider this research as worthwhile and beneficial to other adolescents who will and do face a variety of losses. We know how valuable your time and your child's time are, and that is why his/her participation is all the more appreciated. If you have any questions whatsoever about the project, please call Heather L. Servaty or Dr. Bert Hayslip at 817-565-2675.

Sincerely yours,

Heather L. Servaty, M.S. 
Doctoral Candidate 
Counseling Psychology

Bert Hayslip, Jr., Ph.D. 
Regents Professor
PARENTAL CONSENT

The purpose of this study is to find out more about the feelings, attitudes, and beliefs that adolescents have about a variety of loss experiences. Your teenager's participation will involve completing a written questionnaire about his/her feelings and experiences. The completion of the questionnaire should take approximately 45 minutes. The study is for research purposes, no cost or fee is involved in participation, and your child may withdraw from the study at any time without penalty, prejudice, or loss of benefits.

All information is completely confidential, and neither your nor your child's name will be used. The primary benefits of participation are to help professionals to better understand an aspect of adolescent experience. You will be provided a summary of the results of this research if you so choose.

Having fully understood the above information, and with the knowledge I may contact Heather L. Servaty or Dr. Bert Hayslip at the University of North Texas Department of Psychology at 817-565-2675 if I have any additional questions or concerns at any time, I voluntarily consent to my child's participation in this study.

THIS PROJECT HAS BEEN REVIEWED BY THE UNIVERSITY OF NORTH TEXAS COMMITTEE FOR THE PROTECTION OF HUMAN SUBJECTS (PHONE: (817) 565-3946).

Date: ____________________________

Child's Name: ____________________________

Your Name (print): ____________________________

Your Signature: ____________________________

Researcher: ____________________________
Dear Teenager:

Being a teenager is not easy. It is likely that your life is changing quite a bit lately and sometimes these changes are tough to deal with. Examples of changes which are particularly hard include things such as moving from one town to another, breaking up with a boyfriend/girlfriend, parents divorcing, or a parent dying. Not much is known about how you, as a teenager, deal with losses like these.

We are conducting a study which focuses on how teenagers feel about the different losses they experience. We are also interested in how these experiences affect your opinions, thoughts, and actions. As people who have worked closely with teenagers who have experienced loss, we are genuinely interested in this study. We hope that this study will help professionals (such as counselors and teachers) to better understand teenagers and therefore help them more.

You are being asked to participate in this study which involves taking about 45 minutes to complete a questionnaire. If you decide while you are answering the questions that you do not want to continue you may stop at any time without any penalty. We realize that the questionnaire is long, but we hope that you will be able to complete it.

If you choose to participate in this study, your answers will be kept strictly confidential and your name will never be used. Filling out this questionnaire will allow you to share some of your thoughts and feelings and it will also help other teenagers who are going through some of the same things that you are.

We hope you will choose to participate. Thank you for taking the time to consider this project as worthwhile. We know that your time is valuable and that is why we really appreciate your help. If you have any questions ask your parents, principal, or school counselor and they will contact Heather L. SerVaty or Dr. Bert Hayslip.

If you do want to participate in this study and your parents have signed the parental consent form, please print your name on the first line and sign your name on the second line.

Your Name (print): ___________________________________________

Your Signature: ___________________________________________
APPENDIX C

DEMOGRAPHIC QUESTIONS
Please answer the questions in this packet based on how you really feel. Please do not compare or share your answers with your friends or family. We want to know what you think!!

1. Age__________

2. Sex: (1) Male____ (2) Female____

3. Race:
   _____ Caucasian (1)    _____ American Indian (4)
   _____ African-American (2) _____ Asian (5)
   _____ Hispanic (3)       _____ Other (6)

4. Religious affiliation, if any:
   _____ Catholic (1)        _____ Methodist (6)
   _____ Lutheran (2)        _____ Jewish (7)
   _____ Baptist (3)         _____ Unitarian (8)
   _____ Presbyterian (4)    _____ Episcopal (9)
   _____ Church of Jesus Christ of Latter-Day Saints (5)
   _____ Other (10)

5. How many sisters do you have?__________
   What are their ages?________________________________________

6. How many brothers do you have?__________
   What are their ages?________________________________________

7. Is your mother still living?
   _____ Yes (1)    _____ No (2)

8. Is your father still living?
   _____ Yes (1)    _____ No (2)

9. If your parents are both living what is their marital status?
   _____ Married (1)
   _____ Divorced (2)
   _____ Separated (3)
   _____ Mom Re-Married (4)
   _____ Dad Re-Married (5)
   _____ Both Re-Married (6)
10. If your parents are divorced or separated how many months ago did this happen? (please circle)

1 2 3 4 5 6 7 8 9 10 11 12 13 14
15 16 17 18 19 20 21 22 23 24 25 26 27
28 29 30 31 32 33 34 35

If applicable please circle: 3yrs 4yrs 5yrs more than 5yrs

11. If your parents are divorced, please indicate who you live with.

_____Mother (1) _____Father (2) _____Other (3)

12. What is your mother's occupation?

13. What is your father's occupation?

14. How often did/do your parents argue?

1=never 3=sometimes 4=often 5=all the time
2=occasionally

15. Have you ever talked with a counselor?

_____Yes (1) _____No (2)

16. If yes, how many months ago?

1 2 3 4 5 6 7 8 9 10 11 12 13
14 15 16 17 18 19 20 21 22 23 24

If appropriate please circle: 3yrs 4yrs 5yrs more than 5yrs

17. If yes, how many months did/have you talked with this counselor?

1 2 3 4 5 6 7 8 9 10 11 12 13
14 15 16 17 18 19 20 21 22 23 24

If appropriate please circle: 3yrs 4yrs 5yrs more than 5yrs
18. If yes, how helpful was this experience?

   Very helpful (1)
   Somewhat helpful (2)
   Neutral (3)
   Somewhat unhelpful (4)
   Extremely unhelpful (5)
   Does not apply to me (6)

19. Have you ever attended a support group?

   _____Yes (1)       _____No (2)

20. If yes, how many months ago?

   1  2  3  4  5  6  7  8  9  10  11  12  13
   14  15  16  17  18  19  20  21  22  23  24

   If appropriate please circle: 3yrs 4yrs 5yrs more than 5yrs

21. If yes, how many months did/have you attended the group?

   1  2  3  4  5  6  7  8  9  10  11  12  13
   14  15  16  17  18  19  20  21  22  23  24

   If appropriate please circle: 3yrs 4yrs 5yrs more than 5yrs

22. If yes, how helpful was this group?

   Very helpful (1)
   Somewhat helpful (2)
   Neutral (3)
   Somewhat unhelpful (4)
   Extremely unhelpful (5)
   Does not apply to me (6)
IF ONE OR BOTH OF YOUR PARENT(S) HAS/HAVE DIED PLEASE READ EACH STATEMENT AND INDICATE THE RESPONSE THAT FITS FOR YOU.

1. How many months ago did your parent(s) pass away? (please circle)

1  2  3  4  5  6  7  8  9  10  11  12  13  14
15  16  17  18  19  20  21  22  23  24  25  26
27  28  29  30  31  32  33  34  35

If appropriate please circle: 3yrs 4yrs 5yrs more than 5yrs

2. On what date(s) did your parent(s) pass away?

3. What was the nature of his/her death? (please circle)

AIDS (1)
Other Terminal Illness (2)
Murder (3)
Car accident (4)
Other accident (5)
Other serious illness, e.g., diabetes, flu, pneumonia (6)
Cancer (7)
Heart attack (8)
Suicide (9)
Stroke (10)
Unknown (11)
In sleep (12)

Other________________________

4. If your parent passed away from a terminal illness, how long was he/she sick?

0-1 month (1) 13 months - 2 years (4)
2-6 months (2) longer than 2 years (5)
7-12 months (3) not applicable (6)

5. Were you with your parent when he/she passed away?

Yes (1) No (2)

6. How emotionally close were you to your parent when he/she passed away?

Extremely close (1)
Moderately close (2)
Neutral (3)
Not very close (4)
Not close at all (5)
7. In general, how emotionally close are you to other members of your immediate family?

Very close (1)
Close (2)
Neutral (3)
Not very close (4)
Not close at all (5)

8. To what extent were you satisfied with your parent's funeral?

Very satisfied (1)
Somewhat satisfied (2)
Neutral (3)
Dissatisfied (4)
Extremely dissatisfied (5)

9. If there was a viewing, to what extent were you satisfied with the appearance of your parent (clothes, makeup, etc.)?

Very satisfied (1)
Somewhat satisfied (2)
Neutral (3)
Somewhat dissatisfied (4)
Very dissatisfied (5)
Not applicable (6)

10. To what extent do you feel that the funeral helped you cope with or adjust to the loss?

Not helpful at all (1)
Somewhat unhelpful (2)
Neutral (3)
Somewhat helpful (4)
Very helpful (5)

11. Regarding your participation in the funeral, were you satisfied with the extent of your involvement?

Yes (1)  No (2)

12. If no, did you wish you had done more (1) done less (2)
13. What about the funeral helped you most?

14. What about the funeral made things more difficult for you?
APPENDIX D

THE HOPKINS SYMPTOM CHECKLIST
Below is a list of problems and complaints that people sometimes have. Please read each one carefully. After you have done so, please rate how much that problem has bothered you during the past week including today. Circle your answer using the following scale.

<table>
<thead>
<tr>
<th>Not at all</th>
<th>a little bit</th>
<th>quite a bit</th>
<th>extremely</th>
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<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
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</table>

During the past week, including today, how much were you bothered by:

1. Headaches  
2. Nervousness or shakiness inside  
3. Being unable to get rid of bad thoughts  
4. Faintness or dizziness  
5. Loss of sexual interest or pleasure  
6. Feeling critical of others  
7. Bad dreams  
8. Difficulty in speaking when you are excited  
9. Trouble remembering things  
10. Worried about sloppiness or carelessness  
11. Feeling easily annoyed or irritated  
12. Pains in the heart or chest  
13. Itching  
14. Feeling low in energy or slowed down  
15. Thoughts of ending your life  
16. Sweating  
17. Trembling  
18. Feeling confused  
19. Poor appetite  
20. Crying easily  
21. Feeling shy or uneasy with the opposite sex  
22. A feeling of being trapped or caught  
23. Suddenly scared for no reason  
24. Temper outbursts you could not control  
25. Constipation  
26. Blaming yourself for things  
27. Pains in the lower part of your back  
28. Feeling stuck and not able to get things done  
29. Feeling lonely  
30. Feeling blue  
31. Worrying too much about things  
32. Feeling no interest in things  
33. Feeling fearful  
34. Your feelings being easily hurt  
35. Having to ask others what you should do  
36. Feeling others do not understand
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<td>37. Feeling that people are unfriendly or dislike you</td>
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<td>38. Having to do things o make sure they were right</td>
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<td>39. Heart pounding or racing</td>
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<tr>
<td>40. Nausea or upset stomach</td>
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<td>41. Feeling inferior to others</td>
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<td>42. Soreness of the muscles</td>
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<td>43. Loose bowel movements</td>
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<td>44. Trouble falling asleep</td>
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<td>45. Having to check and double-check what you do</td>
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<td>46. Difficulty making decisions</td>
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<td>47. Wanting to be alone</td>
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<td>48. Trouble getting your breath</td>
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<td>49. Hot or cold spells</td>
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<td>50. Having to avoid certain things, places or activities because they frighten you</td>
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<td>51. Your mind going blank</td>
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<td>52. Numbness or tingling in parts of your body</td>
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<td>53. A lump in your throat</td>
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<td>54. Feeling hopeless about the future</td>
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<td>55. Trouble concentrating</td>
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<td>56. Feeling weak in parts of your body</td>
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<td>57. Feeling tense or keyed up</td>
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<td>58. Heavy feelings in your arms or legs</td>
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APPENDIX E

MARLOWE-CROWNE SOCIAL DESIRABILITY SCALE
Listed below are a number of statements concerning your attitudes and traits. Read each item and decide whether the statement is TRUE or FALSE as it pertains to you.

T = True \quad F = \text{False}

1. I'm always willing to admit it when I make a mistake.  
2. I always try to practice what I preach.  
3. I never resent it when someone asks me to return a favor.  
4. It never bugs me when people express ideas different than my own.  
5. I have never deliberately said something that hurt someone's feelings.  
6. I like to gossip sometimes.  
7. There have been times when I took advantage of someone (e.g. being nice to someone just to get a ride).  
8. I sometimes try to get even rather than forgive and forget.  
9. At times I have really insisted on having things my own way.  
10. There have been times when I felt like smashing things.
Please read each item and indicate how much it reflects your own thoughts and feelings. If a statement has more than one part, please indicate your reaction to the statement as a whole. Use the following scale to place your answers next to each item.

1 = Strongly Disagree (SD)  
2 = Moderately Disagree (MD)  
3 = Disagree (D)  
4 = Agree  
5 = Moderately Agree  
6 = Strongly Agree

1. I haven't chosen the job I really want to do yet, and I'm just working at whatever is available until something better comes along.

2. When it comes to religion, I just haven't found anything that fits for me and I don't really feel the need to look.

3. There are a lot of different kinds of people. I'm still figuring out the right

4. I sometimes join in recreational (fun) activities when asked, but I rarely try anything on my own.

5. I haven't really thought about dating. I'm not too concerned whether I date or not.

6. Politics is something that I can never be too sure about because things change so fast. But I do think it's important to know what I can politically stand for and believe in.

7. I'm still trying to figure out what I'm good at and what job would be right for me.

8. I don't give religion much thought and it doesn't bother me one way or other.

9. There are many reasons for friendship, but I choose my close friends on the basis of certain values and similarities that I've personally decided on.

10. While I don't have one recreational (fun or extracurricular) activity I'm really committed to, I'm trying out different activities so I can figure out one to really get involved in.

11. Based on past experiences, I've chosen the type of dating relationship I want now.

12. I haven't really considered politics. It doesn't excite me much.

13. I might have thought about a lot of different jobs, but there's never really any question since my parents have said what they want me to do.

14. A person's faith is unique to each individual. I've thought a lot about it and I know what I can believe.
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<tr>
<td>1</td>
<td>= Strongly Disagree (SD)</td>
<td>2</td>
<td>= Moderately Disagree (MD)</td>
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<tr>
<td>4</td>
<td>= Agree</td>
<td>5</td>
<td>= Moderately Agree</td>
<td>6</td>
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15. My parents know what's best for me in terms of how to choose my friends.

16. I've chosen one or more recreational (fun) activities to engage in regularly from lots of others and I'm satisfied with those choices.

17. I don't think about dating much. I just kind of take it as it comes.

18. I guess I'm pretty much like my folks when it comes to politics. I follow what they believe when it comes to things like that.

19. I'm really not interested in finding the right job, any job will do. I just seem to flow with what is available.

20. I'm not sure what religion means to me. I'd like to make up my mind, but I'm not done looking yet.

21. I don't have any real close friends, and I don't think I'm looking for one right now.

22. Sometimes I join in recreational (fun) activities, but I really don't see a need to look for a particular activity to do.

23. I'm trying out different types of dating relationships. I just haven't decided what is best for me.

24. There are so many different political parties and ideals. I can't decide which to follow until I figure it all out.

25. It took me a while to figure it out, but now I really know what I want for a career.

26. Religion is confusing to me right now. I keep changing my views on what is right and wrong for me.

27. I only pick friends my parents would approve of.

28. I've always liked doing the same recreational (fun) activities my parents do and I haven't seriously considered anything else.

29. I only go out with the type of people my parents expect me to date.

30. I've thought my political beliefs through and realize I can agree with some but not other parts of what my parents believe.

31. My parents decided a long time ago what I should go into for a career and I'm following through with their plans.
1 = Strongly Disagree (SD)  4 = Agree
2 = Moderately Disagree (MD)  5 = Moderately Agree
3 = Disagree (D)  6 = Strongly Agree

32. I've gone through a period of serious questions about religion and God and I can now say I understand what I believe as an individual.
33. I've tried many different friendships and now I have a clear idea of what I look for in a friend.
34. After trying a lot of different recreational (fun) activities, I've found one or more I really enjoy doing by myself and with friends.
35. My ideas about what I want in a boyfriend/girlfriend are still in the process of developing, I haven't really figured it out yet.
36. I'm not sure about my political beliefs, but I'm trying to figure out what I can truly believe in.
37. It took me a long time to decide, but now I know for sure what direction to move in for a career.
38. I attend the same church my family has always attended. I've never really thought about why.
39. I don't have any close friends. I just like to hang around with the crowd.
40. I've been trying out a variety of recreational (fun) activities in hopes of finding one or more I can enjoy now and in the future.
41. I've dated different types of people and now know exactly what my own "unwritten rules" for dating are and who I will date.
42. I really have never been involved in politics enough to have made a firm stand one way or another.
43. I just can't decide what to do for a job. There are so many that have possibilities.
44. I've never really questioned my religion. If it's right for my parents it must be right for me.
45. I really don't know what kind of friend is best for me. I'm trying to figure out exactly what friendship means to me.
46. All of my ideas about what is fun to do in my free-time and in extracurricular activities I got from my parents and I haven't really tried anything else.
47. I date only people my parents approve of.
1 = Strongly Disagree (SD)  
2 = Moderately Disagree (MD)  
3 = Disagree (D)  
4 = Agree  
5 = Moderately Agree  
6 = Strongly Agree

48. My folks have always had their own political and moral beliefs about issues like abortion and I've always gone along believing what they believe.
APPENDIX G

ADOLESCENT COPING ORIENTATION FOR PROBLEM EXPERIENCES
If one of your parents has died please keep this event in mind as you answer the following questions.

If your parents are divorced please keep this event in mind as you answer the following questions.

If your parents are both living and married please indicate a loss experience that you will keep in mind as you answer the following questions.

____ Loss of a friendship
____ Death of friend/girlfriend/boyfriend
____ Break up with boyfriend/girlfriend
____ Death of relative
____ Moving
____ Knowing someone with a terminal illness
____ Death of pet
____ Other

Please indicate how often you use the following behaviors to deal with this situation. There are no right or wrong answers. Please use the following scale.

1 = never (N)  2 = hardly ever (H)  3 = sometimes (S)  4 = often (O)  5 = most of the time (M)

1. Go along with parents' requests and rules
   1 2 3 4 5
2. Read
   1 2 3 4 5
3. Try to be funny and make light of it all
   1 2 3 4 5
4. Apologize to people
   1 2 3 4 5
5. Listen to music-stereo, radio, etc.
   1 2 3 4 5
6. Talk to a teacher or counselor at school about what bothers you
   1 2 3 4 5
7. Eat food
   1 2 3 4 5
8. Try to stay away from home as much as possible
   1 2 3 4 5
9. Use drugs prescribed by doctor
   1 2 3 4 5
10. Get more involved in school activities
    1 2 3 4 5
11. Go shopping; buy things you like
    1 2 3 4 5
12. Try to reason with parents and talk things out; compromise
    1 2 3 4 5
13. Try to improve yourself (work out, get better grades, etc.)
    1 2 3 4 5
14. Cry
    1 2 3 4 5
15. Try to think of good things in your life
    1 2 3 4 5
16. Be with a boyfriend or girlfriend
    1 2 3 4 5
17. Ride around in the car
    1 2 3 4 5
18. Say nice things to others
    1 2 3 4 5
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<tr>
<td>19. Get angry and yell at people</td>
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<tr>
<td>20. Joke and keep a sense of humor</td>
<td>1 2 3 4 5</td>
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<td>21. Let off steam by complaining to family members</td>
<td>1 2 3 4 5</td>
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<tr>
<td>22. Talk to a minister/priest/rabbi</td>
<td>1 2 3 4 5</td>
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<td>23. Go to church</td>
<td>1 2 3 4 5</td>
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<tr>
<td>24. Use drugs (not prescribed by doctor)</td>
<td>1 2 3 4 5</td>
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<tr>
<td>25. Organize your life and what you have to do</td>
<td>1 2 3 4 5</td>
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<tr>
<td>26. Swear</td>
<td>1 2 3 4 5</td>
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<td>27. Work hard on schoolwork or school</td>
<td>1 2 3 4 5</td>
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<td>28. Blame others for what is going on</td>
<td>1 2 3 4 5</td>
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<td>29. Be close with someone you care about</td>
<td>1 2 3 4 5</td>
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<td>30. Try to help other people solve their problems</td>
<td>1 2 3 4 5</td>
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<td>31. Talk to your mother about what bothers you</td>
<td>1 2 3 4 5</td>
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<tr>
<td>32. Try, on your own, to figure out how to deal with your problems</td>
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<tr>
<td>33. Work on a hobby</td>
<td>1 2 3 4 5</td>
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<td>34. Get professional counseling (not a school teacher or counselor)</td>
<td>1 2 3 4 5</td>
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<tr>
<td>35. Try to keep up friendships or make new friends</td>
<td>1 2 3 4 5</td>
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<td>36. Tell yourself the problem is not important</td>
<td>1 2 3 4 5</td>
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<td>37. Go to a movie</td>
<td>1 2 3 4 5</td>
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<td>38. Daydream about how you would like things to be</td>
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<td>39. Talk to a brother or sister about how you feel</td>
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<td>40. Get a job or work harder at one</td>
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<td>41. Do things with you: family</td>
<td>1 2 3 4 5</td>
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<td>42. Smoke</td>
<td>1 2 3 4 5</td>
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<tr>
<td>43. Watch TV</td>
<td>1 2 3 4 5</td>
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<td>44. Pray</td>
<td>1 2 3 4 5</td>
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<td>45. Try to see the good things in a difficult situation</td>
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<td>46. Drink beer, wine, liquior</td>
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<td>47. Try to make your own decisions</td>
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<td>48. Sleep</td>
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<td>49. Say mean things to people: be sarcastic</td>
<td>1 2 3 4 5</td>
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<tr>
<td>50. Talk to your father about what bothers you</td>
<td>1 2 3 4 5</td>
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<tr>
<td>51. Let off steam by complaining to friends</td>
<td>1 2 3 4 5</td>
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<td>52. Talk to a friend about how you feel</td>
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<td>53. Play video games (nintendo, game-boy, etc.)</td>
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<td>54. Do a strenuous physical activity (jogging, biking, etc.)</td>
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REFERENCES


model for counseling. *Journal of Counseling and Development*, 71, 149-156.


Jackson, S., & Bosma, H. A. (1992). Developmental research on adolescence: European perspectives for the 1990s and


adolescents? Grade point average as a case in point. *Adolescence, 27*(107), 639-646.


response to the death of a significant other. Death Studies, 13, 371-378.


International Conference on Self and Identity. Cardiff, Wales.


Weinmann, L. L., & Newcombe, N. (1990) Relational aspects of identity: Late adolescents' perceptions of their


