Adolescents with significant, persistent behavioral and mental health problems are increasingly being treated in private residential treatment programs (RTPs). Recent research of such programs shows that adolescents’ symptoms improve over the course of treatment and that such positive results persist up to a year post discharge. This study attempts to address what is occurring below the symptom level by exploring if attachment security increases as symptoms improve over the course of treatment in private RTPs. The level of attachment security was assessed along the dimensions of attachment avoidance and anxiety as a global construct and according to specific relationships (with mother, father, and therapist). Overall level of symptoms was also assessed. 146 adolescents from four private RTPs participated in the first round of data collection. Those same adolescents were then assessed on three more occasions over the span of nine months. The overall number of participants declined over time due to completing their respective programs.

Using data from the first assessment, between group differences in attachment security were found between adolescents early in their treatment and late in their treatment. Post-hoc analyses revealed that adolescents in the late stage group had lower scores on Attachment Anxiety than those in the early stage group for the global measure and for mother. With Therapist as the relationship target, Attachment Avoidance was
significantly lower for adolescents later in treatment. Growth curve modeling was used to explore how attachment security changed within subjects over the nine-month study. For all variables of interest, the linear growth model provided the best fit, indicating that attachment insecurity decreased over time in a linear manner. Symptom level did not predict the overall growth trajectory of attachment security but declined over time as well. Overall findings indicate that attachment security increased over time for adolescents in private residential treatment. This change was paralleled by a decrease in overall symptom level. This study concludes by reviewing the results within the context of past literature and research, discussing the potential implications of the research, and by offering suggestions for future research.