ATTACHMENT THEORY: HISTORY AND AN OVERVIEW

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Attachment Theory

- At the core of AT is the parent-child attachment bond and the long-term benefits associated with these interactions.
- The premise is that positive early interactions promote positive long-term emotional and social attachment between the caregiver and the child.
- Bowlby’s Attachment Theory hypothesizes that the parent-child bond is established within the first six months of life and that the bond acts as a vital component to the child’s overall well-being as they progress to adulthood.
- Conversely, negative early interactions can impede positive long-term emotional and social attachment between caregiver and the child and between the child and others later in life (Butcher & Gersch, 2014; Cihan, Winstead & Laulis, 2014; Rich, 2006; Mikic & Terradas, 2014).
Key Figures

- John Bowlby
- Mary Ainsworth
- Rene Arpad Spitz
- Peter Fonagy
- Charles Zeanah
When a child has a disrupted attachment it can lead to a host of adverse behavioral, emotional, legal and social consequences as the child ages (Butcher & Gersch, 2014; Cihan, Winstead & Laulis, 2014; Rich, 2006).

Mary Ainsworth, another influential researcher in the area of attachment, conducted an experiment called Strange Situation. From Ainsworth’s research, she proposed three attachment styles; secure, avoidant and anxious-ambivalent (Ainsworth, 985; Ainsworth, Blehar, Waters & Wall, 1978; Ainsworth & Wittig, 1969; Bell & Ainsworth, 1972; Feeney & Noller, 1990).
Securely attached children can grow to become confident and less fearful of others, maintaining an inherent trust in the people around them even in the absence of verifiable information (Sroufe, Egeland, Carlson & Collins, 2005).

Insecurely attached children, on the other hand, experience less freedom to explore, because they mistrust others and feel insecure (Rich, 2006).
Disordered attachment patterns may contribute to the development of:

- Conduct Disorder (CD; Belsky & Nezworski, 1988; Malekpour, 2007).
- Borderline Personality Disorder (BPD; Dozier, Stovall & Albus, 1999)
- Increased risk for violence (Kesner, Julian & McHenry, 1997; Roberts & Noller, 1998)
- Emotional regulation deficits (Cassidy, 1994; Fonagy, Gergely, Jurist & Target, 2001)
DSM-5
Reactive Attachment Disorder

- Consistent pattern of inhibited, withdrawn behavior toward adult caregivers
  - Child usually does not seek comfort when distressed
  - Child usually responds to comfort
- Social and emotional disturbance including two of the following:
  - Minimal social and emotional responsiveness
  - Limited positive affect
  - Occurrences of irritable mood, sadness, or fearfulness that are unexplained
- Child has a pattern of extremes of insufficient care that include one of the following
  - Neglect
  - Repeated changes of caregivers
  - Rearing in unusual settings
- Care criteria is presumed responsible for the mental health issues
- Autism criteria is not met
- Evident before age 5
- Child is over 9 months developmentally

(From DSM-5)
Disinhibited Social Engagement Disorder

- A pattern of behavior in which a child “actively approaches and interacts with unfamiliar adults” and shows two of the following:
  - Reduced or absent reticence in interactions
  - Overly familiar physical or verbal behavior
  - Diminished or absent checking back with adult caregiver
  - Willingness to go off with unfamiliar adult with little to no hesitation
- Not limited to impulsivity
- Pattern of extremes of insufficient care including one of the following:
  - Neglect
  - Repeated changes of caregivers
  - Rearing in unusual settings
  (From DSM-5)
Disordered Attachment-Possible Consequences

Disordered attachment, also known insecure attachment, may contribute to:

- Academic and learning difficulties
- Anxiety
- Depression
- Relationship problems
- Substance abuse
- Violence
- Juvenile delinquency
- Conduct problems
- Antisocial behaviors in adults
Possible Adverse Factors Associated with Insecure Attachment Representations

Developmental Problems (Bowlby, 1969)

Emotional Disorders (Belsky & Nezworski, 1988; Cooper, Shaver, & Collins, 1998)

Relationship Difficulties (Belsky & Nezworski, 1988; Kassle and colleagues, 2006)

Avoidant Behaviors (Wang and Mallinckrodt, 2006)

Intimacy Deficits (Grabill & Kerns, 2000)

Attention-Deficit Hyperactivity Disorder (ADHD; Malekpour, 2007)

Academic Difficulties (Malekpour, 2007)
Possible Adverse Factors Associated with Insecure Attachment Representations


Criminality (Ward et al. 1996)

Borderline Personality Disorder (BPD) (Dozier, Stovall, & Albus, 1999)

Anti-Social Personality Disorder (ASPD) (Dozier, Stovall, & Albus, 1999)

Earlier Engagement in Sexual Activities (Brennan & Shaver, 1995; Cooper, Shaver, & Collins, 1998; Feeney, Noller, & Patty, 1993; Gentzler & Kerns, 2004)

Decreased self-esteem (Doyle & Markiewicz, 2005; McCormick & Kennedy, 1994)

Increased risk for violence (Kesner, Julian and McHenry, 1997; Roberts and Noller, 1998)

Emotional Regulation Deficits (Cassidy, 1994; Fonagy, Gergely, Jurist, & Target, 2001)

More likely to reject social support (Slade, 2008)
Possible factors that may contribute to disordered attachment patterns

- Abuse and/or neglect
- Community violence
- Congenital and/or biological problems
- Difficult temperament
- Failure to thrive syndrome
- Family disorganization and chaos
- Ineffective and insensitive care
- Medical conditions; unrelieved pain (e.g., inner ear), colicky
- Multiple out-of-home placements
Possible factors that may contribute to disordered attachment patterns

◦ Neurological impairment
◦ Parental absence
◦ Poverty
◦ Premature birth
◦ Prenatal substance exposure
◦ Severe and/or chronic psychological disturbances
◦ Substance abuse
◦ Teenage parenting
◦ Violence
Forty-four juvenile thieves - A Study by John Bowlby (1944)

- Bowlby studied a group of 44 juvenile thieves compared to a control group of 44 adolescents with emotional concerns but who did not steal.
- He found fourteen of those who stole were classified as "affectionless", compared with none in the control group. Seventeen of those who stole had been separated from their mother for more than six months before they were aged five, compared with only two who had experienced such separation in the control group.
- Bowlby concluded that there is a correlation between maternal deprivation in infancy and subsequent criminal behavior in teens.
ATTACHMENT

BASICS

Bennett, 2011
Cycle of Attachment

1. Child is asleep or content
2. Child feels distress or discomfort
3. Stress level rises as child cries out
4. Parent enters to help
5. Child feels relief
<table>
<thead>
<tr>
<th>Things that create discomfort</th>
<th>Things caused by discomfort</th>
</tr>
</thead>
<tbody>
<tr>
<td>◦ Hunger</td>
<td>◦ Pain</td>
</tr>
<tr>
<td>◦ Wet diaper</td>
<td>◦ Anxiety</td>
</tr>
<tr>
<td>◦ Bad dream</td>
<td>◦ Fear</td>
</tr>
<tr>
<td>◦ Feeling ill</td>
<td>◦ Helplessness</td>
</tr>
<tr>
<td>◦ Frightening sound</td>
<td>◦ Rage</td>
</tr>
<tr>
<td></td>
<td>◦ Increased pulse and respiration</td>
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<tr>
<td></td>
<td>◦ Increased levels of cortisol</td>
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Foster Cline’s Checklist for Attachment Disorder

- Superficially charming or engaging
- Lack of eye contact with parents
- Indiscriminate affection with strangers
- Lack of affection on parent’s terms
- Cruelty to animals
- Lying about the obvious
- Stealing
- Destructiveness
- Lack of impulse control
- Poor peer relationships
- Learning lags
- Absence of conscious
- Inappropriate demands
- Clingy behavior
- Lack of cause and effect thinking
LIMITATIONS
Bowlby conducted the majority of his research observing how mothers interacted, or failed to interact, with their child. Fewer research studies examine the interactions between a primary and secondary caregiver, such as fathers, grandparents and extended relatives.

Some scholars have argued that AT places too much importance on the parent-child relationship without fully taking into account the child’s unique personality style, temperament and personality traits.

Initial research took place in a laboratory, rather than a natural environment.

AT is not universally applicable. In non-western parts of the world such as Papua, New Guinea, and Uganda, a village cares for a group of children collectively, rather than individually (Seymour, 2004).

Children still become productive members of their society, without being raised under the traditional AT assumptions. The ability to form bonds with multiple caregivers is in direct contradiction to Bowlby’s original contention that the mother can only form a bond with one child at a time, and by extension, the child can only form one bond with the mother at a time (Field, 1996).
Moderators

- One study examined the role of neglect and insecure attachment as it relates to Reflective Functioning (mental status underlie behavior). They found:
  - RF moderated the association between neglect and insecure attachment
  - Neglect was associated with insecure attachment only in teens whose RF was low to moderate

(Borelli et al., 2014)
A 2015 study (Banford et al) examined domestic violence and family history as it relates to attachment style.

They found individuals with a history of trauma were more likely to be in relationships that were violent.

This was especially true with an anxious attachment style.
Attachment and Envy

- A 2015 study (Baumel & Berent) examined attachment style as it relates to malicious envy (a feeling of deficiency caused by the superiority of another).
- They found dismissive avoidant style demonstrated more malicious envy than fearful avoidant.
Adoption

- A 2015 study (Elovaniono et al) examined children adopted from a Finnish orphanage from ages 6-15 and covered 9 years.
- Reactive Attachment Disorder and Disinhibited Social Engagement Disorder were positively correlated with emotional behavioral issues as well as ADHD.
- Mixed types of attachment were strongly correlated with emotional and behavioral issues
Adoption

- A 2014 study (Follan & MacNamera) examined parents who adopted a child with RAD. They found the following struggles in common:
  - Feeling profoundly unprepared
  - Feeling insecure
  - Being assailed with unexpected emotions
  - Feeling committed
ATTACHMENT IN THERAPY
The therapeutic setting allows for empathy, warmth and consistency within the therapeutic relationship to affect successful outcomes (Lambert & Barley, 2001).

In the context of Attachment Theory, the therapist can function as the primary attachment figure, allowing the client to experience a secure attachment—in some cases, for the first time (Cihan, Winstead, & Laulis, 2014).
Quote from a Professional

- A therapeutic relationship formed around trust can instill a sense of safety and comfort in the client. This then can create opportunities for healing and ultimately contribute to a reduction in maladaptive behaviors and symptomology associated with a variety of mental health conditions. The appropriateness of using an Attachment Theory framework in clinical settings can be extremely beneficial. By teaching clients about their own unique attachment styles, this in turn, can create opportunities for more successful interventions that can target and treat core emotional and psychological wounds caused earlier in life. Putting all of this together, Attachment Theory is a well-suited theory for understanding and treating clinical population.
Children with complex trauma have improved clinically in the context of secure therapeutic attachments (Becker-Weidman & Hughes, 2008; Fonagy, Luyten & Strathearn, 2011; Mikulincer, Florian & Weller, 1993).
The Adult Attachment Interview

- The Adult Attachment Interview (AAI) involves a semi-structured interviewing approach comprised of multiple open-ended questions, and is considered a highly effective approach to understanding the individual’s earlier life perceptions regarding quality of attachment with their family of origin.

- One key component of the AAI protocol is the use of collaborative speech between client and administer throughout the interviewing process.

- The AAI approach also examines the participant’s history of separation and loss from significant attachment figures.

- Questions involve the relationship with mother, father, and other important caregivers...how the individual was comforted when upset...how he/she viewed his/her relationships...

Practical Points

- A 2015 study (et al) outlined the following tips for professionals in the mental health field:
  - Attachment theory should be used in the delivery and design of mental health services
  - Mental health services should evaluate the extent to which they meet the users attachment needs