

**Presentation at the 9th Counselling Conference of KAPC
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**ATTACHMENT RESEARCH
BASIC CONCEPTS – OUTCOMES AND PRACTICAL IMPLICATIONS**

1. Slide:

Attachment Research
Basic concepts – Outcomes - Practical Implications

Imagine the following situation:

Your beloved partner is gone. You want him back, you cry, you try to get into contact again, you yearn to be near him and you feel grief but also anger. You are depressed and not interested in doing anything.

If someone would said: "Take it easy – there are enough others. Why do you care about this one?", you would hardly feel understood!

You react this way because you are attached to your partner and your reaction is called: "Attachment behaviour".

Attachment behaviour is activated if you experience the loss or the mere threat of a loss of a person you are attached to. This behaviour will cease as soon as the person comes back or if you can be sure that he or she stays available.

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Typical attachment behaviours :
following, seeking proximity, crying, intense yearning, feeling depressed

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3. Slide:

Attachment

Attachment is a special bond to a specific person. It is seen as a universal human trait, which can be observed in all cultures and in all ages. Attachment does not encompass all aspects of close relationships – there are many others. What it does cover are those feelings, ideas and behaviours which have to do with security in the relationship.

It was first described as the child's tie to its mother by John Bowlby in the 1950s.

4. Slide:

Picture of John Bowlby

He and other pioneers of attachment research observed the reaction of children to the separation from their caregivers. The negative effects of bereavement and separation were obvious.

Bowlby described children in institutional care .

5. Slide:

James and Joyce Robertson

James and Joyce Robertson filmed children in hospitals, residential nurseries and foster care.

6. Slide:

Picture of Mary Ainsworth

Mary Ainsworth became famous with two observational studies. She observed children with their caregivers in their natural environment. One was conducted in Uganda in the 1950s and one in Baltimore in the 1960s.

Ainsworth noticed that different styles in care giving were associated with different attachment styles.

To illustrate the different styles imagine the following different caregivers:

The first does not like close contact, is annoyed if the child wants too much and often rejects it. The child will keep its distance to this caregiver and tries not to demand too much. If possible it regulates its emotions by itself. Attachment behaviour is reduced: It neither shows much distress when separated nor great reaction when reunited.

This attachment style is called avoidant.

An other kind of caregiver would be one, who reacts sometimes very sensitively and warmly to the child's needs but is emotionally unavailable at other times, for example due to personal problems. This child always needs to be reassured of its caregivers availability. It tries to draw attention to its needs and its attachment behaviour is increased. It shows much distress when separated and resists to be comforted after reunion.

Therefore this style is called resistant or ambivalent.

The next caregiver is constantly available and reacts promptly and adequately to the child's needs. The child can be sure that care will be provided if necessary. It shows distress if separated but it can be comforted very easily when the caregiver comes back.

This attachment style is called secure.

7. Slide:

Attachment patterns:

secure

insecure - avoidant

insecure - resistant or ambivalent

These three patterns are ways to deal with significant others, aiming at creating as much security as possible. Children are usually attached to more than one person and one child may have different attachment patterns with different people. For example: There may exist a resistant attachment to the mother and a secure to the grandmother or the father. However, one person is usually the most important attachment figure.

Although the three attachment patterns, which I have already mentioned, reflect a different extent of security, they are in the normal range of behaviour and are seen as functional adaptations. They work.

But there also exist caregivers to whom a child cannot adapt with a coherent attachment style. Imagine a mistreating, abusive caregiver or one with severe

psychological problems. If this person behaves in a frightening and inexplicable way the child is afraid and cannot trust. This child is attached but cannot handle the situation of the caregiver being around. It wants to be near and at the same time it wants to run away. For example it may fall down as it tries to approach the person, or it dissociates and seems to be in trance. This attachment style which is seen as a break-down of attachment – strategies is called disorganized or disoriented attachment.

8. Slide:

Attachment patterns:

secure

insecure - avoidant

insecure – resistant/ambivalent

disorganized/disoriented

Ainsworth created a unique laboratory arrangement to explore attachment styles between one-year-olds and their caregivers. This test is called the "Strange Situation". The "strange situation"-test observes children during separation and reunion with their caregivers. Much further research has been done using this test arrangement. It is also used to find correlations between early attachment constellations and later development.

9. Slide:

Results of research using the "Strange Situation"

Some results are:

It is much easier for a child to play, to be curious, to explore the environment and to learn something new if the caregiver is available. As soon as attachment behaviour is activated, however, exploration is reduced.

According to the results of the "strange situation"-test more than 50% of the tested children in all samples show a secure attachment behaviour.

Securely attached children have better social abilities and a more cooperative basis with their parents during childhood.

Secure attachment seems to be a protective factor against psychopathology.

Resistant attachment is associated with an increased likelihood to develop an anxiety disorder in adulthood.

In connection with disorganized attachment different psychological, psychosomatic and social problems have been found. Attachment disorganization in infancy forecasts aggressive and fearful peer relationships, conduct-problems at school as well as dissociative symptoms and elevated psychopathology during adolescence and adulthood.

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Adult Attachment

As already mentioned attachment is a life-long phenomenon. As children grow up their ability to appraise the availability of an attachment figure increases. For a toddler it may be secure enough to know that it can find the mother in the next room. An elder child is content knowing that she is in the neighbourhood and for an adolescent the possibility to have telephone contact is often more than enough. According to this change various study-tools for attachment-patterns in each age group have been developed. Elder children are encouraged to interpret picture stories, while with adolescents and adults various questionnaires are

used. One of these questionnaires is the Adult Attachment Interview which I will use to illustrate the basic features of attachment in adults.

11. Slide:

Adult Attachment Interview

This tool has been designed to study the significance of attachment to adults. They are asked about their childhood attachment experiences. The way they can talk about these is evaluated. It is assumed that people who are able to tell a coherent story about their attachment experiences are able to evaluate them in an appropriate way. This means that they can address the importance of these experiences and talk about the feelings involved without being overwhelmed by them.

Different ways of dealing with attachment related issues are found in adults. These are similar to the different attachment styles among children: avoidant, resistant, secure and disorganized.

Like the avoidant child who does not react much to the separation from the mother some adults convey: "Attachment does not mean much to me. Until now it has had no great importance in my life."

They are dismissive with regards to attachment.

Others are quite entangled in previous attachment experiences and they talk about them very emotionally. This is similar of the resistant or ambivalent attachment pattern in children, which is also characterized by increased emotions.

These adults tend to be clingy and are preoccupied with attachment issues.

The secure ones are sure that attachment relationships work. An adult who is assessed as "secure/autonomous" can talk about his attachment experiences in a very coherent way giving them an appropriate place in his life. There is a basic trust in attachment relationships. When you watch the behaviour of a secure attached child the same sense of trust is tangible.

Adults with an unresolved attachment trauma have a disorganized, dissociative style of talking about their attachment experiences. They are unable to overcome these experiences in the same way as disorganized children are unable to deal with the experience of a frightening caregiver.

12. Slide:

Adult attachment styles:

Secure/ autonomous

Dismissing

Preoccupied

Unresolved/disorganized

Secure/ autonomous

Dismissing

Preoccupied

Unresolved/disorganized

These different states of mind with respect to attachment are found in adults. A person can have more than one of these patterns as there are different relationships, although one pattern is usually predominant.

13. Slide:

Results and practical implications

I will now come to some further results of attachment research and their practical implications on psychotherapy and counselling.

I find one of the most hope-instilling results to be the following:

If a parent is qualified as secure-autonomous and can talk about his or her childhood experiences in a coherent way he or she is more likely to have securely attached children, even if this parent might have had a problematic childhood.

On the other hand parents who are assessed as not secure in the Adult Attachment Interview, especially those with unresolved trauma, tend to have insecurely attached children.

This has a great impact on the practice of psychotherapy & counselling, as the good news is that a secure-autonomous attachment pattern can be earned through positive relational experiences. Working on coherent attachment-stories with clients has proven to be a powerful means of disrupting transmissions of insecure attachment.

In romantic relationships the combination of the partners' attachment patterns is crucial.

Imagine the following couple:

One partner makes sure that the relationship does not become too important by guarding an emotional distance, as this is the way the person feels most secure. The other one needs closeness and always has to be reassured of the partner's availability. The first appears dismissive of this relationship while the second-one is preoccupied with it.

This constellation is bound to cause troubles and the feeling of not being understood on both sides.

The aim in psychotherapy and counselling could be to create awareness that both partners are actually looking for the same: namely security in the relationship, using, however, different strategies.

Considering the attachment aspect of the therapeutic relationship in psychotherapy and counselling can be very fruitful. During the therapeutic process there are repeated separations and reunions that have to be dealt with. It can be assumed that every separation from the therapist, be it the end of a therapeutic session or the perspective of upcoming holidays, activates the attachment system of the patient, even if he or she does not show visible distress.

Counsellors and therapists of course also have their predominant attachment styles. They should be able to think about their own attachment history and be aware of their personal attachment styles. This enables them to pay attention to the attachment needs of their clients and to respond to them in an appropriate, empathetic way.

Raising awareness about these aspects I consider to be of crucial importance in training & supervision of counsellors and psychotherapists.

As you may know, there is unfortunately an increasing pressure on psychotherapists within healthcare-systems to administer short, cost-effective, problem-centred treatment. This neglects the fact that it takes time to change attachment expectations and patterns which have developed over the course of a whole life-time.

Attachment theory provides a fundamental frame to understand normal and pathological mourning. Every professional group, not just counsellors and psychotherapists, which provide help for homeless or bereaved people can profit from knowing the findings of attachment research.

Attachment research has shown that the ability to explore one's environment and to learn is related to the sense of security in relationships. Providing a secure base is crucial in psychotherapy and counselling, as a stable therapeutic relationship encourages the client to choose new ways in life.

14. Slide:

Thank you for your attention!

I have come to the end of my presentation now. Thank you for your attention!
If you have any questions or contributions – welcome!

Literature recommendations

Bowlby John.: Attachment and Loss (Trilogy) London (Hogarth Press)
–Vol.1:Attachment (1969).
–Vol.2: Separation:Anxiety and Anger (1973)
–Vol.3:Loss: Sadness and Depression (1980)

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