
BOWLBY' S THEORY OF ATTACHMENT AND IT' S CLINICAL RELEVANCE



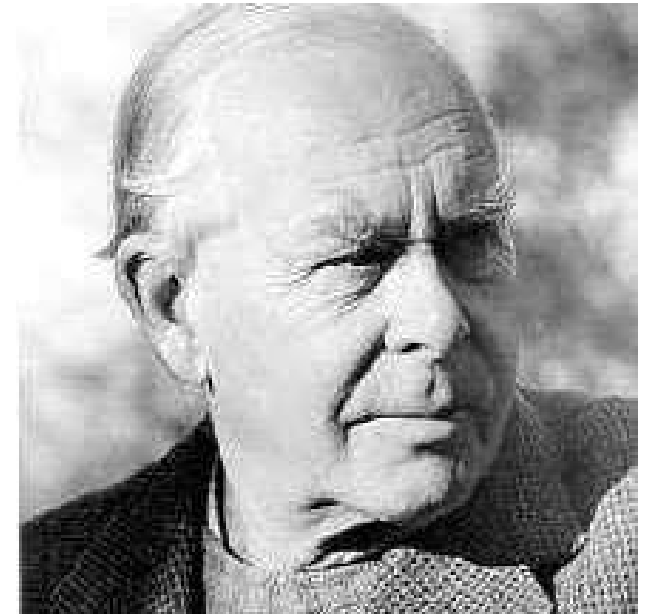
OUTLINE

- Definition
- History
- Phases of Attachment
- Expansion and Influences
- Clinical Implications
- Conclusion
- References

- Cassidy & Shaver (1999) emphasise that attachment is a pattern of emotional and behavioural interaction which develops over time as the infant and caregiver interact, especially in response to the infant's needs for attention and comfort
- An attachment is a bond or tie between an individual and an attachment figure (Prior and Glaser, 2006)
- *Attachment* can be defined as the emotional tone between children and their caregivers and is evidenced by an infant's seeking and clinging to the caregiving person, usually the mother. (Synopsis)
- By their 1st month, infants usually have begun to show such behavior, which is designed to promote proximity to the desired person.

HISTORY

- originated in the work of John Bowlby, a British psychoanalyst (1907 - 1990) , who volunteered for a year in a hospital for maladjusted children, an experience that set the stage for his later work
- In his studies of infant attachment and separation, Bowlby pointed out that attachment constituted a central motivational force and that mother - child attachment was;
- essential medium of human interaction that had important consequences for later development and personality functioning
- Being monotropic, infants tend to attach to one person; but they can form attachments to several persons, such as the father or a surrogate
- Attachment thus gives infants feelings of security



EVOLUTION

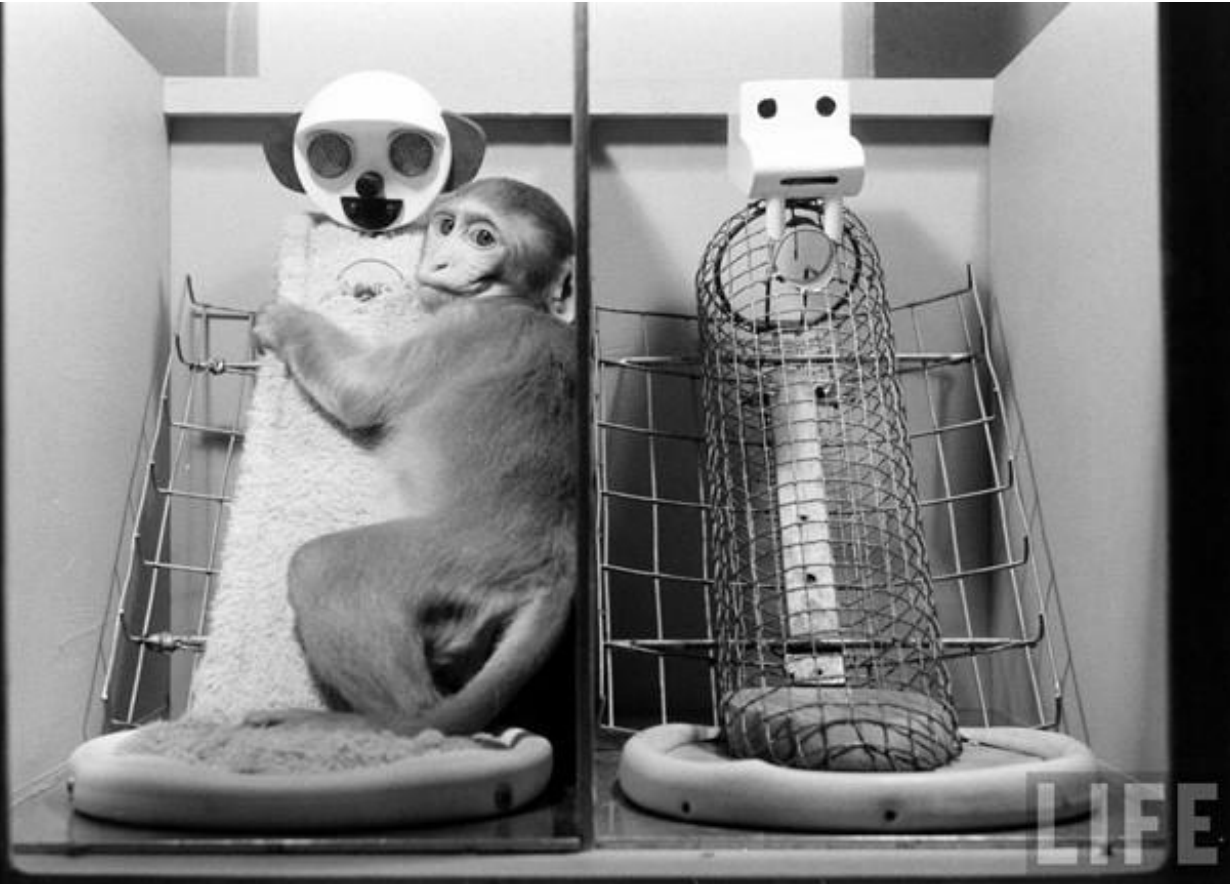
- Bowlby's was contrary to his mentor- Klein, who held that children's emotional problems are almost entirely due to fantasies generated from internal conflict between aggressive and libidinal drives, rather than to events in the external world
- Bowlby claimed that during the early years, while the child acquires the capacity for self-regulation, the mother is a child's ego and superego
- She orients him in space and time, provides his environment, permits the satisfaction of some impulses, restricts others
- Internal working model: The first relationship (mother-child) forms a template that acts as a prototype for all future relationships.

ETHOLOGICAL STUDIES

- Bowlby influenced by other works suggested a Darwinian evolutionary basis for attachment; namely, such behavior ensures that adults protect their young and has survival value
- A similar example of an instinctual attachment system is given by **Konrad Lorenz** as *imprinting*, in which certain stimuli can elicit innate behavior patterns during the first few hours of an animal's behavioral development; thus, the animal offspring becomes attached to the first thing it sees (usually mother) at a critical period early in its development.
- **Harry Harlow's** work with rhesus monkeys is relevant to attachment theory, demonstrated the emotional and behavioral effects of isolating monkeys from birth and keeping them from forming attachments. The isolates were withdrawn, unable to relate to peers, unable to mate, and incapable of caring for their offspring. Also explained the concept of *contact comfort*

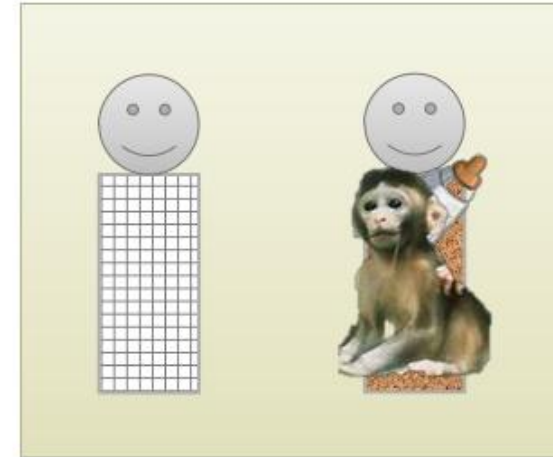
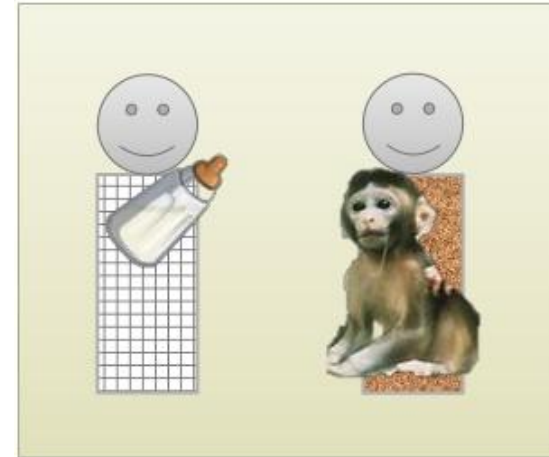


Chicks will imprint upon the first suitable stimulus encountered following hatching (left = parent ; right = man)



CONCLUSION

Harlow concluded that 'contact comfort' (provided by the softness of the cloth covering) was more important than feeding in the formation of an infant rhesus monkey's attachment to its mother.



SIGNAL INDICATORS

- Signal indicators/social releasers are infants' signs of distress that prompt or elicit a behavioral response in the mother, the primary signal being crying.
- The three types of signal indicators are hunger (the most common), anger, and pain.
- Some mothers can distinguish between them but most mothers generalize the hunger cry to represent distress from pain, frustration, or anger.
- Other signal indicators that reinforce attachment are smiling, cooing, and looking. The sound of an adult human voice can prompt these indicators.

CHARACTERISTICS OF ATTACHMENT

Bowlby's theory has four main areas of focus;

- I. Safe Haven is the primary caregiver; usually the mother or the key worker at school or nursery; that the child can rely on for comfort when needed.
- II. The Secure Base is the reliable foundation for the child throughout their learning.
- III. Proximity Maintenance is when the child wishes to explore the world but also needs to know that their Safe Haven is there for them.
- IV. Separation Distress is separation from the caregiver, causes upset and distress to the child

PHASES OF ATTACHMENT

1. *Preattachment stage (birth to 8 or 12 weeks)*: babies orient to their mothers, follow them with their eyes over a 180-degree range, and turn toward and move rhythmically with their mother's voice. not yet attached to the mother, they don't mind being left with unfamiliar adults
2. *Indiscriminate attachment in the making (8 to 12 weeks to 6 months)*: infants become attached to one or more persons in the environment. Does not protest when separated but smiles and quiets more with mother
3. *Clear-cut specific attachment (6 through 24 months)*: infants cry and show other signs of distress when separated from the caretaker or mother; this phase can occur as early as 3 months in some infants.

On being returned to the mother, the infant stops crying and clings, as if to gain further assurance of the mother's return. Sometimes, seeing the mother after a separation is sufficient for crying to stop.

4. *Reciprocal and multiple attachment (25 months and beyond)*: the mother figure and self is seen as independent, and a more complex relationship between the mother and the child of give and take develops based on language development

PDD MODEL


Bowlby described a predictable set and sequence of behavior patterns in children who are separated from their mothers for long periods (more than 3 months):

1. Protest, in which the child protests the separation by crying, calling out, and searching for the lost person
 2. Despair, in which the child appears to lose hope that the mother will return
 3. Detachment, in which the child emotionally separates himself or herself from the mother. Children in the detachment stage respond in an indifferent manner when the mother returns; the mother has not been forgotten, but the child is angry at her for having gone away in the first place and fears that she will go away again
- Some children have affectionless personalities characterized by emotional withdrawal, little or no feeling, and a limited ability to form affectionate relationships

MARY AINSWORTH

- expanded on Bowlby's observations and found that the interaction between the mother and her baby during the attachment period significantly influences the baby's current and future behavior.
- Described three main types of insecure attachment:
 1. insecure - avoidant
 2. insecure - ambivalent
 3. insecure - disorganized



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- The secure attachment child : Most infants (65–70%), Freely explore new environments, touching base with caregiver periodically for security.
 - The insecure - avoidant child (15%), having experience brusque or aggressive parenting, tends to avoid close contact with people and lingers near caregivers rather than approaching them directly when faced with a threat.
 - The insecure - ambivalent/anxious-resistant child (10%) finds exploratory play difficult, even in the absence of danger, and clings to his or her inconsistent parents.
 - Insecure - disorganized children (5–10%) have parents who are emotionally absent with a parental history of abuse in their childhood. These children tend to behave in bizarre ways when threatened.

- disorganization is a severe form of insecure attachment and a possible precursor of severe personality disorder and dissociative phenomena in adolescence and early adulthood
- Sensitive responsiveness to infant signals, such as cuddling a crying baby, causes infants to cry less in later months, rather than reinforcing crying behavior
- Unresponsive mothers produce anxious babies; these mothers often have lower intelligence quotients (IQs) and are emotionally more immature and younger than responsive mothers
- The *secure base effect* enables children to move away from attachment figures and to explore the environment.
- Inanimate objects, such as a teddy bear and a blanket (called the transitional object by Donald Winnicott), also serve as a secure base, one that often accompanies them as they investigate the world.

STRANGE SITUATION

- Ainsworth developed strange situation, the research protocol for assessing the quality and security of an infant's attachment.
- In this procedure, the infant is exposed to escalating amounts of stress; for example, the infant and the parent enter an unfamiliar room, an unfamiliar adult then enters the room, and the parent leaves the room. About 65 percent of infants are securely attached by the age of 24 months.

Episode ^a	Persons Present	Change
1	Parent, infant	Enter room
2	Parent, infant, stranger	Unfamiliar adult joins the dyad
3	Infant, stranger	Parent leaves
4	Parent, infant	Parent returns, stranger leaves
5	Infant	Parent leaves
6	Infant, stranger	Stranger returns
7	Parent, infant	Parent returns, stranger leaves



1. After a mother and infant have settled, a stranger enters and sits quietly on the free chair.



2. After an interval, the stranger starts talking with the mother and, after a while, starts to play with the child.



3. Then a little later, the mother gets up and leaves the room.



4. The stranger stays and tries to interact with the child.



5. After a period, the mother then re-enters. The stranger leaves.



6. After a further interval, the mother leaves again, leaving the child alone.



7. After a period, the stranger enters, offers comfort to the child if necessary, and tries to play with the child.



8. The mother returns, the stranger leaves, and the mother and child remain in the room for a few more minutes.



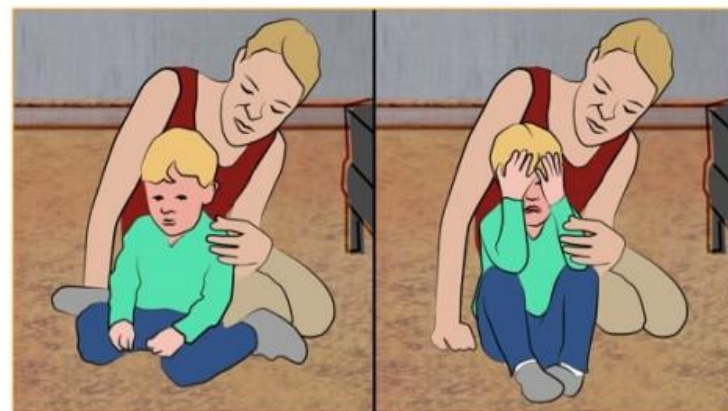
Secure



Insecure-Resistant



Insecure-Avoidant



Disorganized

CLINICAL IMPLICATIONS

- Bowlby's theory of anxiety holds that a child's sense of distress during separation is perceived and experienced as anxiety and is the prototype of anxiety
- Any stimuli that alarm children and cause fear (e.g., loud noises, falling, and cold blasts of air) mobilize signal indicators (e.g., crying) that cause the mother to respond in a caring way by cuddling and reassuring the child
- When the mother is close to the child and the child experiences no fear, the child gains a sense of security, the opposite of anxiety. When the mother is unavailable to the infant because of physical absence (e.g., if the mother is in prison) or because of psychological impairment (e.g., severe depression), anxiety develops
- Expressed as tearfulness or irritability, **separation anxiety** is the response of a child who is isolated or separated from its mother or caretaker. It is most common at 10 to 18 months of age and disappears generally by the end of the third year

LOSING ATTACHMENTS

- Persons' reactions to the death of a parent or a spouse can be traced to the nature of their past and present attachment to the lost figure
- absence of demonstrable grief may be owing to real experiences of rejection and to the lack of closeness in the relationship. The person may even consciously offer an idealized picture of the deceased.
- Persons who show no grief usually try to present themselves as independent and as disinterested in closeness and attachment.
- Severing of attachments is traumatic. The death of a parent or a spouse can precipitate a depressive disorder and even suicide, in some persons.
- The death of a spouse increases the chance that the surviving spouse will experience a physical or mental disorder during the next year
- Onset of depression and other dysphoric states often also involves having been rejected by a significant figure in ones life

DISORDERS OF ATTACHMENT

- characterized by biopsychosocial pathology that results from maternal deprivation, a lack of care by, and interaction with, the mother or caregiver
- Failure-to-thrive syndromes, separation anxiety disorder, avoidant personality disorder, depressive disorders, delinquency, academic problems, and borderline intelligence have been traced to negative attachment experiences.
- Bowlby originally thought that the damage was permanent and invariable, but he revised his theories to take into account the time at which the separation occurred, the type and degree of separation, and the level of security that the child experienced before the separation.



ANACLITIC DEPRESSION

- Anaclitic depression, also known as *hospitalism*, was first described by René Spitz in infants who had made normal attachments but were then suddenly separated from their mothers for varying times and placed in institutions or hospitals. The children became depressed, withdrawn, nonresponsive, and vulnerable to physical illness, but they recovered when their mothers returned or when surrogate mothering was available
- Foreshadowed the DSM and ICD-10 criteria of RAD (reactive attachment disorder) and DSED (disinhibited social engagement disorder)
- Requires onset in first 5 years of age and history of severe neglect
- Rule out DDx: Depression and ASD for RAD and ADHD for DSED, IDD for both

CHILD MALTREATMENT

- Abused children often maintain their attachments to abusive parents.
- Studies of dogs have shown that severe punishment and maltreatment increase attachment behavior. When children are hungry, sick, or in pain, they too show clinging attachment behavior.
- Similarly, when children are rejected by their parents or are afraid of them, their attachment may increase; some children want to remain with an abusive parent..

ROLE IN RELATIONSHIPS

- In a typical attachment interaction, one person seeks more proximity and affection, and the other either reciprocates, rejects, or disqualifies the request.
- A pattern is shaped through repeated exchanges. Distinct attachment styles have been observed. Adults with an anxious-ambivalent attachment style tend to be obsessed with romantic partners, suffer from extreme jealousy, and have a high divorce rate.
- Persons with an avoidant attachment style are relatively uninvested in close relationships, although they often feel lonely. They seem afraid of intimacy and tend to withdraw when there is stress or conflict in the relationship. Break-up rates are high.
- Persons with a secure attachment style are highly invested in relationships and tend to behave without much possessiveness or fear of rejection.

Attachment Style	Parental Style	Resulting Adult Characteristics
Secure <i>(I'm OK –You're OK)</i>	Connect and attuned to the child's emotions and physical needs.	Able to build meaningful and loving relationships, shows empathy and trust.
Avoidant <i>(I'm OK –You're not OK)</i>	Unavailable or rejecting for long periods of time.	Avoids closeness or emotional connection , can be distant, rigid, critical and intolerant of others.
Ambivalent <i>(I'm not OK –You're OK)</i>	Inconsistent and sometimes intrusive parent communication.	Anxious, insecure, unpredictable and erratic – Has a tendency to blame others. Wants intimacy but pushes people away.
Disorganized <i>(I'm not OK –You're not OK)</i>	Ignored or was not able to see or met the child's needs. Parent behaviour was frightening/abusive.	Chaotic, insensitive, prone to outbursts. Untrusting while craving security.

ROLE IN PSYCHOTHERAPY

- When a patient is able to attach to a therapist, a secure base effect is seen. The patient may then be able to take risks, mask anxiety, and practice new patterns of behavior that otherwise might not have been attempted.
- Patients whose impairments can be traced to never having made an attachment in early life may do so for the first time in therapy, with salutary effects
- Patients whose pathology stems from exaggerated early attachments may attempt to replicate them in therapy. Therapists must enable such patients to recognize the ways their early experiences have interfered with their ability to achieve independence.
- For patients who are children and whose attachment difficulties may be more apparent than those of adults, therapists represent consistent and trusted figures who can engender a sense of warmth and self-esteem in children, often for the first time.

CRITICISM

- Bowlby' s views on monotropy are controversial
- Attachment theory puts too much stress on early weeks and months of infants life
- Infant differences in temperament may influence the development of parent-infant attachment either directly or indirectly. (Goldsmith et al, 1986)
- Cultural factors such as joint families and child rearing philosophy differences

CONCLUSION

- Attachment is not an all and none phenomena and occurs in various stages and variations
- Disruption in the process leads to psychopathy and maladaptive patterns in life
- Trust and early care by a stable caregiver vital for healthy mental development of child
- “the infant and young child should experience a warm, intimate, and continuous relationship with his mother (or permanent mother substitute) in which both find satisfaction and enjoyment” (Bowlby, 1951)

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THANK YOU

Nothing tests a parent's love like being awakened by a karate chop to the neck by their co-sleeping three year old.



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