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Attachment Resources

Books

Attachment Theory in Practice: Emotionally Focused Therapy (EFT) with Individuals, Couples, and Families By: Sue Johnson

Understanding Attachment and Attachment Disorders: Theory, Evidence and Practice (Child and Adolescent Mental Health) By: Vivien Proyer and Dana Glazer

The Power of Attachment: How to Create Deep and Lasting Intimate Relationships
by Diane Poole Heller Ph.D. (Author)

Also Visit:https://dianepooleheller.com

A "Must Read": The Relationship Between Attachment And Trauma

Avoidant Attachment: Understanding Insecure Avoidant Attachment

By Joyce Catlett, M.A.

The way that parents interact with their infant during the first few months of its life largely determines the type of attachment it will form with them. The relationship between the primary caregiver and the baby can create a secure, anxious, disorganized or avoidant attachment style that will form a blueprint for relationships throughout the baby's life. When parents are sensitively attuned to their baby, a secure attachment is likely to develop. Being securely attached to a parent or primary caregiver bestows numerous benefits on children that usually last a lifetime. Securely attached children are better able to regulate their emotions, feel more confident in exploring their environment, and tend to be more empathic and caring than those who are insecurely attached.

In contrast, when parents are largely mis-attuned, distant, or intrusive, they cause their children considerable distress. Children adapt to this rejecting environment by building defensive attachment strategies in an attempt to feel safe, to modulate or tone down intense emotional states, and to relieve frustration and pain. They form one of three types of insecure attachment patterns to their parent, (an avoidant, ambivalent/anxious, or disorganized/fearful). In this article, we describe avoidant attachment patterns, which have been identified as representing approximately 30% of the general population.

What is Avoidant Attachment?

Parents of children with an avoidant attachment tend to be emotionally unavailable or unresponsive to them a good deal of the time. They disregard or ignore their children's needs, and can be especially rejecting when their child is hurt or sick. These parents also discourage crying and encourage premature independence in their children.
In response, the avoidant attached child learns early in life to suppress the natural desire to seek out a parent for comfort when frightened, distressed, or in pain. Attachment researcher Jude Cassidy describes how these children cope: "During many frustrating and painful interactions with rejecting attachment figures, they have learned that acknowledging and displaying distress leads to rejection or punishment." By not crying or outwardly expressing their feelings, they are often able to partially gratify at least one of their attachment needs, that of remaining physically close to a parent.

Children identified as having an avoidant attachment with a parent tend to disconnect from their bodily needs. Some of these children learn to rely heavily on self-soothing, self-nurturing behaviors. They develop a pseudo-independent orientation to life and maintain the illusion that they can take complete care of themselves. As a result, they have little desire or motivation to seek out other people for help or support.

What behaviors are associated with avoidant attachment in children?

Even as toddlers, many avoidant children have already become self-contained, precocious "little adults." As noted, the main defensive attachment strategy employed by children with avoidant attachment is to never show outwardly a desire for closeness, warmth, affection, or love. However, on a physiological level, when their heart rates and galvanic skin responses are measured during experimental separation experiences, they show as strong a reaction and as much anxiety as other children. Avoidantly attached children tend to seek proximity, trying to be near their attachment figure, while not directly interacting or relating to them.

In one such experiment, the "Strange Situation" procedure, attachment theorist Mary Ainsworth, observed the responses of 1-year olds during separation and reunion experiences. The avoidant infants "avoided or actively resisted having contact with their mother" when their mother returned to the room. According to Dan Siegel, when parents are distant or removed, even very young children "intuitively pick up the feeling that their parents have no intention of getting to know them, which leaves them with a deep sense of emptiness."

How does an avoidant attachment develop in children?

Why do some parents, who consciously want the best for their child, find it difficult to remain attuned or to be emotionally close to their children? Attachment researchers have identified several reasons for parents' difficulties in this area. In studying a number of emotionally distant mothers, the researchers found that the mothers' lack of response to their infant was at least partly due to their lack of knowledge about "how to support others." Some of the mothers lacked empathy, whereas others had failed to develop a sense of closeness and commitment that appear to be crucial factors in "motivating caregiving behavior." They also reported a childhood "history of negative attachment experiences with rejecting caregivers and role models," which explained why they had "a more limited repertoire of caregiving strategies at their disposal."

In other words, the mothers in this study were treating their infants much as they had been treated as children, and their babies were now forming an avoidant attachment to them.

Interestingly, a recent meta-review of attachment research has provided other "evidence for the intergenerational transmission of attachment style;" it has also demonstrated important links between parents' avoidant styles of caregiving and their children's avoidant attachment, especially in older children and adolescents.

The Avoidant/Dismissive Attachment Style in Adults

People who formed an avoidant attachment to their parent or parents while growing up have what is referred to as a dismissive attachment in adulthood. Because they learned as infants to disconnect from their bodily needs and minimize the importance of emotions, they often steer clear of emotional closeness in romantic relationships. Dismissively attached adults will often seek out relationships and enjoy spending time with their partner, but they may become uncomfortable when relationships get too close. They may perceive their partners as "wanting too much" or being clinging when their partner's express a desire to be more emotionally close.

When faced with threats of separation or loss, many dismissive men and women are able to focus their attention on other issues and goals. Others tend to withdraw and attempt to cope with the threat on their own. They deny their vulnerability and use repression to manage emotions that are aroused in situations that activate their attachment needs. When they do seek support from a partner during a crisis, they are likely to use indirect strategies such as hinting, complaining, and sulking.

According to attachment researchers, Fraley and Brumbaugh, many dismissing adults use "pre-emptive" strategies to deactivate the attachment system, for example, they may choose not to get involved in a close relationship for fear of rejection; they may avert their gaze from unpleasant sights, or they may "tune out" a conversation related to attachment issues. A second strategy is to suppress memories of negative attachment events, such as a breakup. In fact, adults categorized as dismissing report very few memories of their early relationship with parents. Others may describe their childhood as happy and their parents as loving, but are unable to give specific examples to support these positive evaluations.

People with this type of attachment style tend to be overly focused on themselves and their own creature comforts, and largely disregard the feelings and interests of other people. They also find it difficult to disclose their thoughts and feelings to their partner. Their typical response to an argument, conflict, and other stressful situation is to become distant and aloof.

Dismissive adults often have an overly positive view of themselves and a negative, cynical attitude toward other people. In many cases, this high self-esteem is defensive and protects a fragile self that is highly vulnerable to slights, rejections, and other narcissistic wounds. It exists usually as a compensation for low self-esteem and feelings of self-hatred. According to adult attachment experts Phil Shaver and Mario Mikulincer, avoidant partners often react angrily to perceived slights or other threats to their self-esteem, for example, whenever the other person fails to support or affirm their inflated self-image.

How are patterns of attachment supported by the critical inner voice?

The kinds of negative, distrustful, and hostile attitudes toward other people that are associated with a dismissing attachment style are compounded by destructive thoughts or critical inner voices. The overly positive and seemingly friendly views of self that are experienced by many avoidant individuals are also promoted by the inner voice and are often a cover-up for vicious, self-degrading thoughts. Both kinds of voices, toward the self and others, are part of an internal working model, based on a person's earliest attachments, which act as a guideline for how to relate to a romantic partner. The critical inner voice can be thought of as the language of these internal working models; the voice acts as a negative filter through which the people look at themselves, their partner and relationships in general.

Although many critical inner voices are only partly conscious, they have the power to shape the ways that people respond to each other in their closest, most intimate relationships. Individuals identified as having a dismissing attachment style have reported experiencing such thoughts as:

"You don't need anyone."
"Don't get too involved. You'll just be disappointed."
"Men won't commit to a relationship."
"Women will try to trap you."
"Why does he/she demand so much from you?"
"You've got to put up with a lot to stay involved with a man/woman."
"There are other, more important things in life than romance."
"You've got to protect yourself. You're going to get hurt in this relationship."
"You're too good for him/her."

How can we transform a dismissing/avoidant attachment into a secure one?

Fortunately, we don't have to remain trapped within the confines of the defensive attachment strategies we developed early in life.

There are many experiences throughout life that provide opportunities for personal growth and change. Although your patterns of attachment were formed in infancy and persist throughout your life, it is possible to develop an “Earned Secure Attachment”at any age.

One essential way to do this is by making sense of your story. According to Dr. Dan Siegel, attachment research demonstrates that “the best predictor of a child’s security of attachment is not what happened to his parents as children, but rather how his parents made sense of those childhood experiences.” The key to “making sense” of your life experiences is to write a coherent narrative, which helps you understand how your childhood experiences are still affecting you in your life today. In PsychAlive’s online course with Drs. Dan Siegel and Lisa Firestone, they walk you through the process of creating a coherent narrative to help you to build healthier, more secure attachments and strengthen your own personal sense of emotional resilience. When you create a coherent narrative, you actually rewire your brain to cultivate more security within yourself and your relationships.

In a previous article, I noted that being involved in a long-term relationship with someone who has a secure attachment style is one pathway toward change. The other way is through therapy; the therapeutic alliance or relationship offers a safe haven in which to explore our attachment history and gain a new perspective on ourselves, others and relationships in general.

Anxious Attachment: Understanding Insecure Anxious Attachment

By Joyce Catlett, M.A.

Understanding Anxious Attachment

Human beings are born with strong survival instincts. One of the strongest is based on an infant's inability to survive on its own and its complete dependence on an adult for nurturance and protection. Babies have an innate drive to make sure that they get their basic needs met by a parent, caregiver or other significant person in their life. Different children develop different strategies for accomplishing this depending on the emotional environment and the kind of care available to them. Attachment theory is the study of this primitive instinct and researchers have organized the various strategies into four categories of attachment patterns: secure attachment and two types of insecure attachment, avoidant attachment and anxious attachment. The fourth attachment category, known as disorganized attachment, occurs when no organized strategy is formed.

Attachment researchers have identified attunement as being significant in the formation of an attachment. Attunement means being in harmony; being aware of and responsive to another. Emotional attunement involves being in harmony first with oneself, then with another and finally with circumstances. Attunement and attachment are related in that an adult, who is available, attuned and responsive to a child's needs, beginning in infancy, establishes a secure attachment for that child. This attunement creates a strong foundation from which that child can explore the world.

A lack of attunement or misattunement from a parent or primary caregiver results in an insecure attachment developing in the relationship with their child. In another article, I discuss how an avoidant attachment pattern develops when parents are cold, emotionally unavailable and distant, and children then try to shut down their awareness of their primary needs. This article will explain how an ambivalent/anxious attachment develops in childhood and goes on to effect individuals in their adult relationships.

What is Ambivalent/Anxious Attachment?

Many parents and/or caregivers are inconsistently attuned to their children. Attachment researchers describe the behavior of these adults, noting how at times they are nurturing, attuned and respond effectively to their child's distress, while at other times they are intrusive, insensitive or emotionally unavailable. When parents vacillate between these two very different responses, their children become confused and insecure, not knowing what kind of treatment to expect. These children often feel distrustful or suspicious of their parent, but they act clingy and desperate. They learn that the best way to get their needs met is to cling to their attachment figure. These children have an ambivalent/anxious attachment with their unpredictable parent.

What behaviors are associated with an anxious attachment pattern?

Children with an ambivalent/anxious attachment pattern tend to cling to their attachment figures and often act desperate for their attention. Mary Ainsworth, who assessed children's attachment patterns at 12 to 18 months, noted that when the children with anxious attachment were reunited with their mothers, they were confused, dazed or agitated; staring off into space and avoiding direct eye contact with her. Yet, these children usually clung to the mother. They remained intensely focused on their mother, but did not seem to be satisfied or comforted. The narrow focus and limited responses of these children prevented any further play or exploratory behavior.

How does an anxious attachment pattern develop in children?

A number of factors may contribute to the formation of an anxious attachment pattern between a parent and child. The main factor in a child developing an ambivalent/anxious attachment pattern is inconsistent attunement in the relationship with their primary caregiver.

Studies have shown that the quality of the relationship between the parents plays a central role in the transmission of specific attachment patterns from one generation to the next. Therefore, a child imitates the ambivalent/anxious attachment strategies of their parent. In addition, research has also found that parents' child-rearing practices tend to reflect the specific attachment pattern they developed as children with their parents. Thus, parents who grew up with an anxious attachment are inconsistent in how they relate to their children, which their children react to by forming their own anxious attachment patterns.

Many of these parents and caregivers, due to the unreliable and inconsistent parenting they received, experience powerful feelings of emotional hunger toward their child. They act in ways that are insensitive and intrusive when they confuse emotional hunger with genuine love for their child.

In Compassionate Child-Rearing, Robert Firestone describes how parents mistake their feelings of longing and the desire to get love from their child for actual love and concern for the child's wellbeing. These parents can be over-protective, or try to live vicariously through their child, or be focused on their child's appearance and performance. They often overstep the personal boundaries of their children by touching them excessively and by invading their privacy.

How does an anxious attachment manifest in adulthood?

Children who have an anxious attachment often grow up to have preoccupied attachment patterns. As adults, they tend to be self-critical and insecure. They seek approval and reassurance from others, yet this never relieves their self-doubt. In their relationships, deep-seated feelings that they are going to be rejected make them worried and not trusting. This drives them to act clingy and feel overly dependent on their partner. These people's lives are not balanced: their insecurity leaves them turned against themselves and emotionally desperate in their relationships.

Adults with preoccupied attachment patterns are often feel desperate and assume the role of the "pursuer" in a relationship. They often have positive views of other people, especially their parents and their partner, and generally have a negative view of themselves. They rely heavily on their partner to validate their self-worth. Because they grew up insecure based on the inconsistent availability of their caregivers, they are "rejection-sensitive." They anticipate rejection or abandonment and look for signs that their partner is losing interest.

These people are often driven to engage in pre-emptive strategies in an attempt to avoid being rejected. However, their excessive dependency, demands and possessiveness tend to backfire and precipitate the very abandonment that they fear. Attachment theorists and researchers Shaver and Clark, (1994), have observed that "preoccupied" partners appear to be "perpetually vigilant and somewhat histrionic." They feel resentful and angry when their partner doesn't provide the attention and reassurance they feel they need. They often believe that unless they dramatically express their anxiety and anger, it is unlikely that the other person will respond to them. Many of those with preoccupied attachments are reluctant to express their angry feelings toward a partner for fear of potential loss or rejection. When they try to suppress their anger, their behavior tends to vacillate between outbursts of anger and pleas for forgiveness and support. In some cases, the fears and anxieties can lead to more serious emotional disturbances, such as depression.

How are patterns of attachment supported by the critical inner voice?

The pessimistic beliefs and expectations associated with adult attachment patterns are reinforced by destructive thoughts or critical inner voices about oneself, others, and the world in general. These critical voices strongly influence a person's style of relating in an intimate relationship. People with a preoccupied adult attachment have "voices" that support their beliefs that the world is an emotionally unreliable place filled with uncertainty and the potential loss of those they love. Examples of their voice attacks are, "It's obvious that he/she is losing interest in you." "Why isn't he/she more affectionate?" "He/she always has an excuse for not wanting to make love." "You're so needy and dependent. No wonder she(he) doesn't like you." "He/she doesn't love you as much as you love him/her.

How can a person transform an anxious attachment into a secure one?

Fortunately, a person's style of attachment can be revised through new experiences, through interacting with a partner who has a history of being securely attached and through psychotherapy. Another effective way to develop secure attachment in adulthood is by making sense of one's story. According to Dr. Dan Siegel, attachment research demonstrates that "the best predictor of a child's security of attachment is not what happened to his parents as children, but rather how his parents made sense of those childhood experiences." The key to "making sense" of one's life experiences is to write a coherent narrative, which helps them understand how their childhood experiences are still affecting them in their life today. In PsychAlive's online course with Drs. Dan Siegel and Lisa Firestone, they will walk individuals through the process of creating a coherent narrative to help them to build healthier, more secure attachments and strengthen their own personal sense of emotional resilience.When one creates a coherent narrative, they actually rewire their brain to cultivate more security within themselves and their relationships.

In couples' therapy, both partners can go through the process of Voice Therapy, which will help them identify and challenge the critical inner voices that promote expectations of rejection and that fuel their feelings of anger. In their sessions, partners can "give away," that is, expose their self-criticisms as well as their hostile, cynical attitudes toward the other person. Generally speaking, in an effective couples' therapy, both partners expose and challenge their critical inner voices and come to understand the source of their destructive thoughts and attitudes in the context of their earliest attachments. This approach provides the impetus for exploring new, more positive ways of relating, and frees people to experience genuine loving feelings and real security in their intimate relationships.