CHAPTER 4

1:15 – 2:15pm

Basics of Attachment Theory

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PowerPoint distributed at the program and also available for download in electronic format:
1. The Internal Forces that Compel Us: The Centrality of Attachment

Electronic format only:
1. Attachment Styles and Their Impact on Divorce and Parenting

Electronic versions of these documents are available on the KCBA website:
The Internal Forces That Compel Us
The Centrality of Attachment

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Typical Isolation Wards of the Early 20th Century
Rene Spitz' Film of Hospitalized Children

Harry Bakwin, M.D. ~ Pediatric Unit, Bellevue Hospital (1931)

Do not enter this nursery without picking up a baby!

John Bowlby

- British Psychoanalyst active 1940's – 1980's
- Early research with “Affectionless Children”
- U.N. post-war study of homeless children
Two Environmental Factors
Paramount to Bowlby
1. The death or prolonged separation from the mother

2. The mother’s emotional attitude toward the child, an attitude that becomes apparent in how she handles feeding, weaning, toilet training and other mundane aspects of maternal care.

When the child experiences the absence of this caretaker – 3 Stages
1. Protest (Crying, clinging, screaming after parents left)

2. Despair (The child becomes listless, losing interest in surroundings)

3. Detachment (The child emerges from despair – is no longer listless – but is a different child – he doesn’t respond to his mother when she comes)

ATTACHMENT
› The development of an attuned, secure emotional relationship with a primary caretaker
  › Seeking proximity
  › Safe haven
  › Secure base

› As biologically driven as the need for nourishment
Further Developments

- The Ethologists

Further Developments

Harry Harlowe’s Monkeys
When relationships between parent and child are attuned, a child is able to feel felt by a caregiver and has a sense of stability in the present moment. During that here-and-now interaction, the child feels good, connected, and loved. The child’s internal world is seen with clarity by the parent, and the parent comes to resonate with the child’s state.

This is attunement

The Importance of Attunement

http://www.youtube.com/watch?v=apzXGEbZht0&feature=related

Mary Ainsworth
The Strange Situation

- One year old with mother in a room with toys (at the university...away from home)
- A stranger enters the room and sits with mother and child – very warm to child.
Mary Ainsworth
The Strange Situation

- One year old with mother in a room with toys (at the university...away from home)
- A stranger enters the room and sits with mother and child – very warm to child.
- Then mother leaves.
- After a few minutes, mother returns.
- Stranger leaves.
- Mother leaves.
- After a few minutes, mother returns.

How does the child react?

- Securely Attached
- Anxiously Ambivalently Attached
- Anxiously Avoidantly Attached

Secure Attachment

- Shows distress when parent leaves
- Obvious preference for parent over stranger
- Greets parent actively, usually initiating physical contact
- Easy to comfort
- Returns to play
Ambivalent Attachment

- May be wary or distressed, even pre–separation, with little exploration
- Extremely distressed upon parent’s absence
- Fails to settle and take comfort in parent upon reunion
- Fails to return to exploration after reunion

Avoidant Attachment

- Fails to cry upon separation from parent
- Actively avoids or ignores parent upon reunion
- Response to parent seems unemotional
- Focuses on toys and environment throughout process

Disorganized Attachment

- Mary Main’s subsequent contribution
- Reactions to mother’s return: Freeze, Approach backward, Fall prone and huddled on floor
General Distribution

- **Securely** Attached (70% +/-)
- **Anxiously Ambivalently** Attached (10% +/-)
- **Anxiously Avoidantly** Attached (20% +/-)
- **Disorganized Attachment** (+/-)

Dan Siegel, M.D. & Allan Schore, M.D.

Undeveloped at Birth
The Seat of Empathy
Attuned Relationship with Primary Caregiver
Promotes Development

Attachment and Neurophysiologic Development
Prefrontal Cortex

Attunement/Secure Attachment Throughout Early Childhood

To be understood instead of punished, to express anger and not be rejected, to complain and be taken seriously, to be frightened and not have one’s fear trivialized, to be depressed or unhappy and feel taken care of, to express a self-doubt and feel listened to and not judged – such experiences may be for later childhood what sensitive responsiveness to the baby’s cries and other distress signals are to infancy.

– Robert Karen, *Becoming Attached*
Freud – *The Child is Father to the Man* (or Mother to the Woman)

- Peter Fonagy found that correlation between Strange Situation Classification and Adult Attachment Style was 68–75%
- Mary Main found a correlation of 80%

Mary Main’s Further Contributions Tracing into Adulthood

- Correlations
  - Secure – Secure Adult Attachment Style
  - Ambivalent – Preoccupied Adult Attachment Style
  - Avoidant – Dismissive Adult Attachment Style
  - Disorganized – Disorganized Adult Attachment Style
**Secure Adult Attachment Style**

- Easy access to wide range of feelings and memories, both positive and negative
- Possesses emotional flexibility
- Ability to combine self-reliance and healthy mutual dependence
- Will still be completely undone by the loss of an attachment relationship

**Preoccupied Adult Attachment Style**

- Dreads abandonment
- Hyper-aroused attachment system – vigilant and sensitive to slights
- Difficult to acknowledge own responsibility in relationships
- Can be extremely emotionally reactive at loss of attachment relationship

**Dismissive Adult Attachment Style**

- Dismissing of importance of love and connection
- Can be preoccupied with things and work
- Can be seen as competent, emotionally disengaged
- *Appears* to be unaffected by loss of attachment relationship
Mary Main’s Adult Attachment Interview

› I’d like you to try to describe your relationship with your parents as a young child, starting as far back as you can remember.

› Could you give me five adjectives or phrases that describe your relationship with your mother/father during childhood?

› Could you give me a memory or experience that led you to choose each one?

Philip Shaver and Cindy Hazan run “love quiz” …..

Asking readers to identify with 1 of these 3 statements:

Secure

“I find it relatively easy to get close to others and am comfortable depending on them and having them depend on me. I don’t often worry about being abandoned or about someone getting too close to me.”
Avoidant / Dismissive

“I am somewhat uncomfortable being close to others; I find it difficult to trust them completely, difficult to allow myself to depend on them. I am nervous when anyone gets too close, and often, love partners want me to be more intimate than I feel comfortable being.”

Ambivalent / Preoccupied

“I find that others are reluctant to get as close as I would like. I often worry that my partner doesn’t really love me or won’t want to stay with me. I want to merge completely with another person, and this desire sometimes scares people away.”

Follow-Up Interviews

- Conclusions about “attachment styles” and intimate relationships.
  - Secure – Longer relationships/fewer divorces
  - Avoidant – Didn’t believe in romance – didn’t think “romantic love” may even exist
  - Ambivalent – Intense roller coaster romances
Attachment Themes in Marital Conflict

- Described in early 90’s by Drs. Susan Johnson and Les Greenberg
- A common pattern of pursuit and withdraw
- The Pursuer causes the Withdrawer to withdraw and the Withdrawer causes the Pursuer to pursue in a cycle of increasing intensity
- As they exist in the marriage – they persist in the divorce

Johnson’s Pursuer–Distancer Dynamic

- Typically Gender-Based:
  - Woman: Emotional Pursuer
  - Man: Emotional Distancer
- Experience of Attachment Anxieties Differ
  - Pursuer: “Don’t abandon me!”
  - Distancer: “I’m not enough. I am being overwhelmed.”

Johnson’s Terms: “Pursuer” and “Withdrawer”

- Rejected
  - Inadequate
  - Afraid of failure
  - Overwhelmed
  - Numb–frozen
  - Afraid–scared
  - Judged–criticized
  - Shame
  - Empty
- Hurt
  - Alone
  - Not wanted
  - Invisible
  - Isolated
  - Not important
  - Abandoned
  - Desperate
  - Deprived

Withdrawers often feel
Pursuers often feel
Why Do We Care?

› Children and Divorce

› Adults and Divorce

Why Do We Care?

› Attachment anxieties fuel the intensity of intimate partners’ conflict, thus……………….

› The greater the anxiety ——> The greater the emotional reactivity of each partner

Why Do We Care?

› Regardless of Attachment Style – The loss of an attachment figure – no matter how compromised – is profoundly disorienting and requires psychic reorganization

› Stress on an intimate interpersonal relationship triggers intense attachment anxieties
ATTACHMENT STYLES AND THEIR IMPACT ON DIVORCE AND PARENTING

INTRODUCTION

In her classic description of the divorce process, *Crazy Time*, journalist and essayist Abigail Trafford calls it a “savage emotional experience.” Those of us who work in the field would roundly concur. Yet what makes it so? We take as axiomatic that people often react intensely to the experience of dissolving an intimate personal relationship – indeed it seems foreordained. For the professional who is struggling to resolve the myriad legal questions facing their clients, the highly charged emotional environment is experienced as a lot of distracting and disabling static. High emotion is an impedance.

Yet, the emotions that accompany the end of an intimate relationship are as endemic to the world of legal divorce as revised child support guidelines or principles for tracing separate property. We dismiss and disdain the emotionality of the process or (even more problematically) judge those who are struggling, at our own peril, because this will close our eyes to a central piece of the puzzle we are trying to fit together.

To gain an understanding and appreciation for the divorce client’s emotional world only strengthens the lawyer’s ability to counsel and guide this person who they are charged to support through this “savage emotional experience.” In order to get a handle on the emotional divorce, it is essential to understand the principle of attachment.

It is the biological need for attachment that drives us into adult intimate relationships and it is the thwarting of this need that informs the intensity of the anguish upon its dissolution. Attachment theory has been at the core of understanding parent/child bonding, child development, adult personality and intimate relationships for more than 60 years. Indeed, it can be argued that it is impossible to really understand what is going on emotionally with a divorcing person without understanding attachment. That is the purpose of this chapter. What follows is a brief history of attachment, highlighting its essential elements. Then we will explore the three basic “attachment styles” and how they appear in intimate relationships. Finally, we will look at how this information may be pertinent to the work of the family lawyer assisting a person negotiating through this ragged, often threatening, emotional landscape.

THE TRAUMA OF EARLY SEPARATION

Attachment theory arose out of the observations of child care professionals in the early part of the 20th century. It was, in some way, a product of the then-current revolutionary developments in health care spawned by the discoveries of Louis Pasteur decades before. As physicians embraced the “miracle” of antisepsis, those who were hospitalized were, for decades, isolated from any source of infection. They were, to the extent then possible, encased in a cocoon of sterility. Policies which would prevent contact between hospitalized children and their parents (often read: mother) for weeks, or even months, at a time for the child’s protection were rampant. In the 1930’s and 1940’s, observations of babies during and after their prolonged hospital stays revealed a troubling pattern of behavior with these babies. During periods of separation lasting a week or more the children would cycle through intense protest – to despair –
and finally to a listless detachment. At term was coined for this condition: “hospitalism.” Their parents would describe them as profoundly different upon their return. What most struck their parents was the failure of these children to seek or provide any personal warmth or connection in their interpersonal relations. The alarm that was expressed by this segment of the child-care community was, for the most part, dismissed by the health care establishment, which believed that protection of children from infection trumped any other concern – and that observations of the alarmists were a overly dramatic. In his wonderful book, Becoming Attached, Robert Karen, Ph.D. describes the dramatic impact of a little film made by psychiatrist Rene Spitz,

“...in 1947, an unusual film, which would eventually be seen by thousands and thousands of health care workers and student trainees, was shown to a group of physicians and psychoanalysts at the New York Academy of Medicine. It was made by Rene Spitz...

The film was called Grief: a Peril of Infancy. It was silent, crude, black-and-white, with occasional title cards to explain what was being seen. We are in an unnamed institution. In grainy, flickering images, we are shown Jane, a little black baby, just after her mother had been forced to leave her for what would turn out to be a three-month period. She’s a happy, approachable baby, smiling and giggling as an adult observer plays with her. We are then shown Jane one week later. It is painful to recognize that this is the same child – depressed eyes searching, completely unresponsive except, finally, for a tremendous, hopeless, frowning wail. A kindly male observer (actually Spitz himself) cannot soothe the child. She kicks and sobs in terrible agony. A title card tells us that the despairing expression, the tears, the moaning are unusual at this age and that they lasted the entire three months her mother was gone. Looking at this child, we feel we are experiencing sadness at its ultimate depth, the most profound grief imaginable.

[A number of other similarly pained children are shown and described by Karen.]

A title card explains that if mother returns in less than three months, the recovery is rapid. But if the separation lasts much longer, the baby continues to display “a frozen, passive, apathetic attitude.” Such children, we are told, no longer weep, just wail thinly. They cannot sit or stand. They cannot be engaged. They do not explore. We are now presented with the evidence.

[More babies are described]

Now a fifteen-month-old who is the size of a three month old. She seems to have a skin disease. She smiles at Spitz’ approach and then becomes fretful. She just lies there now, as if sick, crying and gnawing her hand.

Title card: “The cure: Give mother back to baby.”

These observations were in conformance with those who ran orphanages in Europe after the First World War. Oftentimes the dormitories would be filled with cribs of babies whose numbers swamped the abilities of the care workers to provide more than food and shelter. Warm, human interaction was virtually absent. These babies, who had everything but a mother’s love, wasted away and died in alarming numbers. It was not confined to Europe. In 1915, infants admitted to ten asylums in the eastern United States had mortality rates of from 31.7% to 75% by the end of their second year.

Karen describes the observations – and responses – of New York Pediatrician Harry Bakwin thus: Bakwin was intensely interested why children with a good diet in hospitals failed
to gain weight—why they didn’t coo and smile—why they were so listless and unhappy. When Bakwin took over the pediatric unit at Bellevue in 1931, he changed the routines. He took down the old signs emphasizing antisepsis (“Wash your hands twice before entering this ward”) and put up new ones: “Do not enter this nursery without picking up a baby.” Nurses were instructed to fondle babies periodically and to sit them on their laps. Infection rates went down.”

JOHN BOWLBY AND THE BIRTH OF ATTACHMENT THEORY

This also marked the entry into the field of the man considered the father of attachment theory, British psychoanalyst John Bowlby. Bowlby had developed an interest in working with disturbed children. He began to take special note over time of a procession of 44 youngsters who demonstrated severe anti-social behaviors and seemed to be unable to form any kind of human bond. They were termed “affectless children” and he commenced one of the first intensive studies into the relationship between parenting and eventual behavior of children. The only conclusion he was able to arrive at with any confidence was that prolonged separation from the mother was associated strongly with the emotional vacuity of these unhappy young people. Thus, the first step in attachment theory—studying the impact of parental separation—had been taken.

Commissioned by the World Health Organization after World War Two to conduct a study of the psychological aspects of the problem of children made homeless, Bowlby honed his theory, focusing increasingly on the relationship not just between children and their homes but between children and their mothers—their primary caretakers. As his work progressed, Bowlby became increasingly convinced that this primary bond was critical to the physical and emotional health of the infant and that separations of any sort, for almost any duration, would be experienced by the child as excruciatingly painful. As Bowlby noted, “The mothering of a child is not something which can be arranged by roster; it is a live human relationship which alters the character of both partners. The provision of a proper diet calls for more than calories and vitamins: we need to enjoy our food if it is to do us good. In the same way the provisions of mothering cannot be considered in terms of hours per day but only in terms of the enjoyment of each other’s company which mother and child obtain…. [Describing the child, Bowlby concluded] He may be ill-fed and ill-sheltered, he may be very dirty and suffering from disease, he may be ill treated, but, unless his parents have wholly rejected him, he is secure in the knowledge that there is someone to whom he is of value and who will strive, even though inadequately, to provide for him until such time as he can fend for himself.”

As Bowlby’s ideas evolved, he still sought an explanation about why this connection was so important and how it operated. The ethologists provided him the answer. Ethology is the science of animal behavior. It addresses questions like: How is this particular pattern of behavior adaptive for this species? What is the purpose of this behavior in terms of survival? This orientation to mother-infant interaction provided Bowlby the key he needed. Ethologically, this behavior was seen as essential to the survival of the species. This “attachment system” as Bowlby now termed it, is a complex series of interactions which ensured proximity between the care-giver and infant and (as contemporary researchers have shown) promotes the development of critical sections of the baby’s pre-frontal cortex (the part of the brain involved with many essential social functions, including empathy and interpersonal bonding). The baby, Bowlby
noted, engages in an increasingly complex series of behaviors (cooing, smiling, crawling towards, etc.) which causes a response in the primary caretaker, thus ensuring proximity, thus increasing the chances of survival. Bowlby continued to describe an “attachment behavioral system” which is innate and biologically driven. When an infant (on up to adulthood) experiences threat, this attachment behavioral system is immediately and automatically engaged. Anxiety spikes, often intolerably, and can only be alleviated through proximity with an “attachment figure.” In the cases of the infant, this will almost always be the mother. (Note, that other adults can serve this function, to be sure, but there is a hierarchy in which usually a single person will be a primary “attachment figure” and this is most commonly the child’s mother.)

Bowlby was able to identify three essential elements of this attachment behavioral system. They were:

1. **Proximity Seeking:** The baby naturally seeks proximity with the attachment figure. This is seen in the multiple strategies devised by the baby for keeping mother close, be it smiling, cooing or crying in distress.

2. **Secure Base:** This is a term coined by Mary Ainsworth and describes the secure place from which the baby can explore strange and different things.

3. **Protection from Threat:** The attachment figure is a place to which the baby will retreat for protection when there is threat.

As the baby may be unsuccessful in achieving proximity through his/her innate strategies, the baby will become frustrated, dispirited, angry and/or socially withdrawn. To the extent there is no perceived “secure base” the baby will not explore. If there is no attachment figure to seek out for protection (or if that person does not offer protection but dismissal or even threat) then there is no way for the baby to quell his/her anxiety and it will continue, unabated as a chronic condition.

Thus, John Bowlby introduced us to the notion that humans experience a need for a deep interpersonal connection which is crucial to their sense of personal well-being and is visceral (almost cellular) in its experience. It is more than helpful or pleasant or even wonderful. It is a biologically driven necessity no less than food or sleep. In the 1950’s Mary Ainsworth made the next indispensable contribution to our understanding of attachment (Bowlby and Ainsworth are often thought of together as the founders of attachment theory as we understand it today).

**MARY AINSWORTH AND THE STRANGE SITUATION**

Ainsworth was deeply interested in the kinds of infant-child interactions which comprise this attachment relationship. What does a mother do to promote this bond? What happens in the absence of such behavior? To that end, she spent many years living with villagers in Uganda and came away with the appreciation that it wasn’t the quantity of time a parent spent with their infant that would seem to insure security, it was the quality; and to that end she concluded that the single variable she was able to observe that seemed to foster this connection between mother and infant in this Ugandan village was the pleasure the mother took in breast-feeding their baby.
Eventually, Ainsworth returned to this country, setting up her research shop at Johns Hopkins University in Baltimore. On a meager research grant, she devised a study that changed the face of attachment theory and our understanding of interpersonal relationships forever. She and four assistants enlisted into their study 26 families with babies. During the first year of the baby’s life, members of the research team would visit each family 18 times for four hours each visit. They would be active with the family – helping out, engaging everyone – becoming a comfortable presence in the home. It was Ainsworth’s intent to observe the attachment behaviors of the infants when faced with a threat of some kind – and she determined this really couldn’t be accomplished in the home. So she set up an elegant research model – which she termed the Strange Situation Study. The protocol was as follows:

The mother and baby enter an inviting room with many fascinating baby toys on the floor. The mother sets the baby down to play. After a few minutes, a stranger enters the room and sits next to the mother (a pleasant, non-threatening presence). After a few minutes the mother leaves. After a few minutes absence, the mother returns. Then the stranger leaves. Then after a few minutes, the mother leaves. After a brief period of absence the mother returns. The study focused on observations of the child’s behavior upon the leave-taking of the mother and her return. How did the child respond to the leave-taking? What did the child do upon the mother’s return? What Ainsworth and her team found was that the babies reacted in one of three characteristic ways. They were described in terms of the quality of attachment as: Securely Attached; Anxiously Ambivalently Attached and Anxiously Avoidantly Attached.

Essentially, the securely attached one-year olds would get on the ground at the beginning and play with the toys, occasionally checking with their mother to assure her presence and connection. The baby’s attention was directed primarily toward the toys. When the mother would leave, the baby would become distressed and cry. Upon the mother’s return, the baby would approach her to be picked up and comforted. After a brief time, the baby would be set down and return to the toys. The ambivalently attached babies would act quite differently. While initially playing with the toys, they would be continually preoccupied with mother’s presence – needing the continued assurance she was there. When she would leave, the baby would protest intensely with their cries. However, upon her return, the baby could not be comforted by the mom. The baby, while held by the mother, would move close to her and then might stiffen or kick her – still fussing and crying. It was as if their emotional systems were hyper-activated and they couldn’t settle down – and they certainly were unable to easily return to play as the securely attached babies had been. The avoidantly attached babies would be very happy with the toys – actually paying less attention to the mother and her presence. Upon mom’s leave-taking, the baby would seem to be unaffected and continue playing with the toys. When the mother returned, the baby would not go to her, but would continue to attend to his/her play. While one might presume the baby was unaffected by the mother’s absence, physiological markers (heart rate among others) indicated that the baby was as distressed as the others. It was just that he/she had learned to suppress these feelings. It was from Ainsworth’s landmark study, that the understanding of differing attachment styles arose.

Another crucial element to Ainsworth’s findings was her observations of the kind of parenting style that seemed to be associated with each infant attachment style. Parents of the securely attached infants were observed to be more consistently “attuned” to the expression of
feelings and needs of their babies. They tended to enjoy the physical contact and would seek to soothe their baby’s distress. The mothers of the avoidantly attached children tended to discourage the expression of need. Cries would not receive immediate attention and distress would not be soothed. The baby’s protest at this, through heightened affect (expression of emotion) would be strongly discouraged, leading to a decision to shut down these expressions of attachment need altogether. This was seen as entirely consistent with the baby’s preoccupation with toys and things outside the field of mother-baby contact. The ambivalently attached children experienced a very different style of parenting. The mothers of these children tended to be quite inconsistent in their responses to the baby’s expression of need. Sometimes they comforted. Sometimes they ignored. Sometimes they expressed distaste for the expression of these needs. There was no consistent, reliable attachment figure. Thus, these babies had concluded that they needed to ramp up their expression of attachment needs in order to get the attention of their mothers. Yet, they were also angry and frustrated because they knew (viscerally) that they could not rely on this parent. Therefore, these babies would be preoccupied with their mother’s presence and availability, never sure that the security they craved – that they needed to quell their existential anxiety – was there for them.

“THE CHILD IS THE FATHER TO THE MAN” – MARY MAIN AND ADULT ATTACHMENT STYLES

Mary Main of U.C. Berkeley is often considered the third principle figure of the development of attachment theory. In the 1970’s, and thereafter, Main and her colleagues concerned themselves with the persistence of these attachment styles over time. Some of her initial work was with six year old children who had experienced the Strange Situation at one year of age. She found a striking consistency between their earlier attachment classification and their responses to various stimuli five years later. She showed these children photographs of an imminent 2-week adult/child separation and asked “What would a child do?” (Note the adult’s response to the children in italics)


The Avoidant Child: “I don’t know. What could he do? I don’t know! Any ideas? Ow. Ow. [High voice through a toy horse.] No, I don’t. No? Whewww. Sit up lion.”

The Ambivalent Child: “Chase them. Chase who? Their dad and mom in his new toy car – he’s psssshh – run right off. Then what’s gonna happen? An then he’s gonna, then he’s gonna…toss a bow and arrow and shoot them. Shoot his mom and dad? Yeah. If he want to, maybe.” (Wallin, Attachment in Psychotherapy, p. 31)

As further described by Wallin (at p. 23), “Children with a history of secure attachment show substantially greater self-esteem, emotional health and ego resilience, positive affect, initiative, social competence, and concentration in play than do their insecure peers. In school, children secure in infancy are treated warmly and age appropriately by teachers, whereas the avoidant (often seen as sullen, arrogant, or oppositional) tend to elicit angrily controlling
responses and the ambivalent (often seen as clingy and immature) tend to be indulged or infantilized. Avoidant children have frequently been shown to victimize others, while ambivalent children are often victimized; secure children are neither victims nor victimizers.”

Main later developed an instrument called the Adult Attachment Interview. It is a series of questions which explore many elements of an individual’s early life experience. The interviews would be transcribed and specially coded. Many people participating had been Strange Situation babies, so they had some information about their infant attachment styles. Main noted three basic approaches to responding to the questions posed. These response approaches tended to be consistent with the infant attachment style which had been observed years before. (A sampling of the questions can be found in the slides which are included in these materials.)

Those with a history of secure attachment tended to answer the questions directly, reflecting appropriate relationship to the emotional content of what they were discussing. They had been able to put their parents’ difficult, at time hurtful, behaviors into context of the parents’ own lives and showed a certain emotional flexibility. The adults with a history of ambivalent attachment had great difficulty keeping their past experiences in the past. The hurts and frustrations with their parents in the past seemed to invade their current experience. Their responses tended to be tangential at times and disorganized in structure. There was a good deal of extraneous material not really related to the inquiry made. The transcripts of these people were generally much longer than those of the securely attached individuals. The adults with a history of avoidant attachment responded in a very different fashion. These people often would describe their upbringing in very idealized terms. Yet, when asked for some specifics which would illustrate the glowing description of their home, they were incapable of bringing up details. Often the details would belie, dramatically, the idealized view. Their mother was very “loving,” though they would severely and often brutally punish them for misbehavior – but that was all right because “I deserved it.” The transcripts of their interview were often very short, as facts of their childhood were inaccessible to them.

Research supports the proposition that there is between a 65 – 80% consistency between a person’s infant attachment style and their eventual adult attachment style. Further, considerable research suggests that approximately 60-70% of the population operate within the secure attachment description; 20-25% tend toward avoidant attachment and 10-15% would be described as ambivalently attached.

Those who chronically turned up the volume of their attachment system as infants seem to persist in this behavior into adulthood. There tends to be an increased vigilance among those with an ambivalent attachment history and an intense sensitivity to slight or perceived threats to the attachment relationship. Some have suggested a consistency between this over-activated attachment anxiety and borderline or histrionic DSM-IV Axis II character disorders. Their adult attachment style is described as Preoccupied.

Individuals who have learned to quell their overt attachment anxieties – even to the point of recognizing their presence internally – have put a lot of energy in their adult lives into left brain activity. There is often a relative lack of awareness of bodily sensations or emotions. Such
people can be quite focused on the external environment of things (rather than interpersonal relations), echoing their focus on toys when mother re-entered the Strange Situation room. These people may be described in DSM-IV terms as being narcissistic or antisocial. Their adult attachment style is described as Dismissive.

It is critical at this point to discourage any effort to simply categorize people or pathologize either adaptive approach to mis-attuned parenting. Virtually all psychological constructs – from self esteem to obsessive-compulsiveness must be seen on a continuum. The person who is blessed with healthy self-regard is on the same continuum as the emotionally isolated person struggling with narcissism and its concomitant grandiosity and tendency to exploit others. The person who, on the farthest end of the continuum of compulsive behavior, may wash their hands scores of times each day, is cousin to the person who uses this tendency to remain well organized and focused. In addition, we are touched and influenced by a vast myriad of events and people in our lives – not to mention our own genetic heritage. To reduce the astounding complexity of human experience to a single influence is obviously dangerous folly. Thus any tendency to brand, categorize or pathologize from this information should be strongly cautioned against. At the same time, this information does provide us with an invaluable window into the motivations, needs and emotional lives of our clients (and ourselves).

The theme which threads its way throughout the entire history of attachment research is that the exquisite, biological need for a close, attuned, secure relationship with one primary figure commences with infancy and persists throughout the entire lifespan. It is biological in nature and, insofar as interpersonal relationships are concerned, it is truly the heart of the matter. Many observers, chief among whom is Susan Johnson of University of Ottawa, believe that the one place we turn as adults to have these fundamental attachment needs met is our intimate partner – our husband – our wife. No other relationship in our adult life – not the deepest friendship – nor the relationships we maintain with our parents or children can in any way provide what we seek from our partner. This is the person to whom we direct our bids for deep connection; he/she is our secure base from which we can explore and they are the sanctuary which we seek out in times of threat. Despite the conflict and discord that may exist in an intimate relationship, this is our deepest expectation from this bond. It forms our fundamental psychic foundation and when it is threatened an enormous flood of anxiety is unleashed within each of us. If it is ruptured, our internal lives are threatened. As noted by Dr. Johnson, “Dependency, which has been pathologized in our culture is an innate part of being human, rather that a childhood trait we outgrow.”

DR. SUSAN JOHNSON – ATTACHMENT IN ADULT INTIMATE RELATIONSHIPS

In the early 1990’s Susan Johnson with Dr. Les Greenberg, developed a powerful and efficacious form of marital therapy founded upon attachment theory. She termed it Emotionally Focused Couples Therapy and studies have indicated its ability to help even extremely distressed couples (like those who end up in the divorce attorney’s office) find reconnection and resolution. The foundation of this approach is adult attachment. As noted by Dr. Johnson,

“The Due to our cultural focus on the individual and valuing of self sufficiency, it is difficult for…some couples to think of adult relationships in attachment terms. John Bowlby always
believed that attachment was a lifelong affair, and it is perhaps worth pausing and explicitly noting the basic similarities in the features of infant/child-caregiver and adult love relationships.

In both kinds of relationships, there is a deep desire for attention, emotional responsiveness, and reciprocal interest. A child or an adult lover feels more confident and secure, and therefore more able to cope with stressful events, when the other is perceived as on hand and dependable. In both relationships, people are happier and more outgoing and show a greater threshold for distress and tolerance of ambiguous or negative relationship events. When an attachment figure is distant or rejecting, both infants and adult lovers become anxious, preoccupied, and unable to concentrate or explore their environment…At all ages there is distress at separation from and loss of an attachment figure, and fear of this loss…

There can be more than one attachment figure, but for both child and adult there is usually one key primary person who represents a safe haven and secure base…

Given the above, it is also useful to note that the most often accepted model of marital distress and divorce, a model where negative emotion, conflict, and negative interactions lead to a decrease in positive feelings like love, trust and affection, is probably incorrect. An alternative model, and one that fits with the attachment perspective, is that it is the absence of disclosing and responsive interactions that begins the process of relationship distress. Individual attachment needs are then left unsatisfied, and it is this deprivation and distance that eventually lead to conflict and distress. Once responsiveness to attachment cues is established in a relationship and bonding becomes more secure, couples can resolve many long-standing arguments and can also argue without such disagreements threatening the relationship…

Seeking and maintaining contact with significant others is an innate, primary motivating principle in human beings across the life span.” (Johnson, Creating Connection – The Practice of Emotionally Focused Couples Therapy, (pp. 32-35)

THE IMPACT OF DIVORCE

Returning to the evocative description of Abigail Trafford’s which began this chapter, it is small wonder, then, that divorce is a “savage emotional experience.” Even for those who, to the outside observer, would seem essentially unaffected by marital rupture, tumultuous internal storms are suppressed from personal acknowledgment. What does all this tell us about how attorneys can better understand, and support, those experiencing divorce? Some thoughts follow:

* Be aware that the rupture of an attachment relationship subjects an individual to extreme anxiety. Whatever one’s attachment style, the increase in anxiety will activate characteristic behavior - with vigor.
* The preoccupied person will protest loudly the deprival of the attachment figure. The sense of ancient injustice and a tendency to inconsolability is natural. As in the Adult Attachment Interview, old strong emotions invade the present, this can be expected to occur again with the enormous stress of divorce.
* The dismissive person may well act in a manner that is, upon first glance, odd and even disingenuous. This person may have been very uninvolved in his/her
marriage on an emotional level. They may even have been threatened with divorce for a long period of time by their “emotionally starved” spouse. They may even answer objectively that they knew there were problems with the marriage. However, as a person with a long history of tamped-down attachment need (initiated as an infant for protection and carried through life) this would be their natural way of experiencing a relationship with a primary attachment figure. (Indeed, to expect them to display or share a certain emotional quality would entail entirely too great a risk of vulnerability.) When this relationship is suddenly ended – and the attachment figure cuts off the relationship – the internal upheaval may be enormous – and surprising. It shouldn’t be surprising to us, however. It is consistent with an attachment perspective.

- Because the loss of an attachment figure is such an intensely painful and disorienting experience, one or both people will be extremely fragile. This will often be the couple that find themselves standing before the commissioner at a temporary order hearing. Paradoxically, and poignantly, these are the people who are most vulnerable to deep scarring over the machinations of the family law litigation process. It should come as no surprise that a client is struck down by what would seem to the professional to be a fairly innocuous allegation in a declaration. One of the greatest conundrums for the family lawyer is to, on one hand, seek to “protect” the interests of an individual divorcing their spouse, while on the other hand dealing with the virtual guarantee that such an approach will come as a shattering blow to the other person…with the concomitant probability that the recipient of this blow will strike out in self protection. This is because….

- People going through divorce – who may often engage in bad behavior are not bad people. The vast, vast, majority of legal divorce clients are frightened, wounded, profoundly disoriented people. If one partner does not appear to be thus, the other one will likely be…and even for the partner who seems more put together – be ever-mindful of the currents beneath that may be hidden from the client him/herself.

- Parenting can be severely compromised in an adversarial divorce. A baby (and even young child) desperately needs a consistent and attuned attachment figure (and a well connected second attachment figure/parent). If the stress from aggressive adversarial divorce strategies overwhelm a parent, we will be sewing the seeds of insecure attachment in the child. Subsequent therapist will thank you. The child won’t!

- Above all – Even amidst that sturm und drang of divorce litigation, seek to cultivate a sense of compassion for the injuries suffered by your clients – and their spouse – both in their earliest childhood experiences and in their hearts today. Balancing legal representation and compassion will permit you to offer the highest, best service to your clients.