

Attachment theory is a theory of the close affectional bonds that remain with us throughout life. A primary motivation in all people is the need to seek and maintain contact with others. Since our well-being and survival depends on securing the protection of attachment figures, that relationship is our central concern throughout childhood, and its unresolved insecurities linger into adult life, including marriage. John Bowlby wrote in *Attachment and Loss* (1973, p.369):

No variables have more far-reaching effects on personality development than a child's experiences within the family. Starting during his first months in his relation to both parents, he builds up working models of how attachment figures are likely to behave towards him in any of a variety of situations, and on all those models are based all his expectations, and therefore all his plans, for the rest of his life.

There is a direct link between childhood attachment patterns, adult attachment styles, and functioning in intimate and romantic relationships. Confidence in the availability of attachment figures develops during childhood. The expectations and belief systems ("working models") that develop during these early years tend to persist throughout life. These beliefs guide our perceptions of others and behaviors, and we often recreate patterns of attachment previously experienced. That is, early childhood patterns are unknowingly recreated in our adult relationships (e.g., marriage).

- Consistent, sensitive and loving parenting leads to secure attachment and positive beliefs. Others are viewed as dependable and supportive, and the self is viewed as worthy of love and support.
- Adverse care giving experiences (e.g., abuse and neglect) lead to insecure attachment and negative beliefs. Others are viewed as unavailable, threatening and rejecting, and the self is viewed as unworthy of love and support.

The absence of secure attachment creates considerable distress, resulting in vulnerability to a variety of physical, emotional, social and moral problems. Attachment experiences and patterns extend into adult life, and influence: 1. feelings of security, 2. personal meaning given to experiences and relationships, 3. the ability to develop and maintain close affectional bonds, and 4. conflict and feelings of isolation commonly experienced by couples.

Attachment and Couples

1. Adult intimate relationships are often defined by emotional responsiveness - when needs for closeness, support and security are either met or not met. Attachment security occurs when partners can provide comfort and support to one another during emotionally difficult times.
2. Attachment injuries can occur when needs for comfort, closeness and security are not met. These injuries or traumas create barriers to the ongoing security of the relationship, and result in negative emotions and a cycle of distressing interactions.
3. Partners commonly have differences in their attachment styles and internal working models (belief systems). These working models, based on past relationships, guide their current perceptions and construction of reality.
4. Attachment styles and working models, learned in our early years, can be changed. Such change can redefine the couple relationship in significant ways.

5. Adults with a history of trauma (e.g., abuse, neglect, severe loss) typically have a greater need for safe and secure relationships. However, they also have difficulty trusting their partners. Learning to create a healthy relationship provides an arena to heal old wounds and establish a meaningful bond for the future.

Patterns of Adult Attachment

1. Compulsive Self Reliance:

These individuals place a priority on self sufficiency. There is a defensive aspect to "switching off" attachment feelings; closeness is avoided to prevent awareness of underlying attachment needs and the experience of vulnerability.

- Avoids turning to attachment figure for help.
- Avoids giving attachment figure affection or closeness.
- Uncomfortable with attachment figure needing him or her.

2. Compulsive Care Giving:

Close relationships are established with the person always in the giving role, not allowing him or herself to receive care. Typically the result of being forced into caring for parent and/or sibling during childhood, and losing their self for another.

- Places highest priority on needs of others.
- Feelings of self-sacrifice and martyrdom.
- Provides care whether or not requested.

3. Compulsive Care Seeking:

Also called "anxious attachment"; constant anxiety about losing the attachment figure. Display urgent and frequent care-seeking behaviors in an attempt to confirm security. This pattern results from early life experiences of doubting the availability and responsiveness of attachment figures.

- Defines life in terms of problems requiring assistance to solve.
- Defines attachment relationships in terms of receiving care.
- Expects attachment figure to assume responsibility for major areas of life.

4. Angry Withdrawal:

Anxiety and anger are responses to perceived inaccessibility of attachment figure. Even when the individual attempts to withdraw, it is angry or spiteful withdrawal.

- Negative reactions to perceived unavailability of attachment figure.
- Negative reactions to perceived lack of responsiveness of attachment figure.
- Generalized anger toward attachment figure.

The Berkeley Adult Attachment Interview was used to assess parents' patterns of attachments [Main et al., 1985]. This interview procedure elicits details of early family life, relationships with parents, and unresolved emotional issues. It assesses the adult's early attachment experiences and their current "state of mind" about attachment. Based on their responses, adults are assigned to one of four categories, each equivalent to and predictive of infant/childhood attachment patterns.

1. Secure-autonomous

- coherent view of attachment.
- secure base provided by at least one of their parents.
- do not portray their childhood as trouble free; objective regarding the positive and negative qualities of their parents.
- able to reflect on selves and relationships (little self-deception); comfortable talking about attachment issues; communicate in a clear, direct and honest manner.
- worked through painful issues from childhood and can discuss these issues without much anxiety or stress; insight into the effects of early negative emotional and family experiences; understanding and some level of forgiveness towards their parents.
- able to depend on others; accept the importance of relationships in their lives.
- most of their own children were rated as securely attached.

2. Dismissing

- unable or unwilling to address attachment issues in coherent and serious way; dismiss the value and importance of attachment relationships.
- guarded and defensive answers; often not able to accurately remember their childhood; do not want to reflect on their past.
- idealized their parents; deny true facts and feelings associated with negative parental behavior (e.g., abuse and neglect).
- avoid the pain of early rejection and their need for love and affection through various defensive strategies.
- three-fourths of their own children were avoidantly attached.

3. Preoccupied

- confused and incoherent regarding memories; unresolved about early hurt and anger in family relationships.
- childhood characterized by disappointment, frustrating efforts to please their parents, and role reversals ("parentification").
- remain emotionally enmeshed with parents and family-of-origin issues; unaware of own responsibility in current relationship problems.
- most of their own children have ambivalent attachments.

4. Unresolved

- experienced severe trauma and early losses; have not mourned lost attachment figures and not integrated those losses into their lives.
- frightened by memories and emotions associated by early trauma; may dissociate to avoid pain; confused and incoherent regarding past events.
- extremely negative and dysfunctional relationships with their own children, including abuse and neglect; script their children into past unresolved emotional patterns and dramas.
- produce disorganized-disoriented attachments in their children.