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Exploring Attachment Styles in Various Clinical Settings and Practical Interventions to Engage Youth to Foster Healthy Relationships

Tina Mueni, Alethia Cadore, Gary Treasure and Akomaye Undie

Abstract

This literature review of clinical research on topics of healthy relationships, clinician experience, and self-regulation examines clinicians' narratives to explore attachment styles in various clinical settings and practical interventions to engage youth to foster healthy relationships. Methods of various clinical styles include, but are not limited to, interventions to engage youth in positive relationships fostering a positive outcome in their health and well-being.

One's attachment style is a considerable predictor of the kind of relationship we will have with our children. Clinicians from the diaspora reviewed attachment styles within the context of their practice, using the literature from Bowlby/Ainsworth on attachment styles and strange situations (Bowlby, 1998; Ainsworth et al., 1978; Bretherton, 1982; 1995). Clinicians apply the theory in their education, home, and social settings and offer interventions that promote social behaviour and secure attachment.

The methodology used explored qualitative research that focused on experiences of the Clinician's activities or events in which a change was occurring. Such research enabled the exploration of complex experiences. In these contexts, clinician experience was captured in terms of self-reported information about interventions of engagement with youth activity or event, their perceptions of its value, the lived impacts they experienced, and the specific behaviours they displayed concerning the activity or event. Moreover, clinician's experience has been identified to have a paucity of measurement tools.

The purpose of this review is to examine attachment styles between Clinicians and their clients and applying interventions in a holistic environment that fosters healthy engagement and relationships.

Key Words

Attachment Styles, Healthy Relationships, Youth Engagement, Clinician Experience, Clinician Interventions, Psychotherapy

Introduction

Attachment style is a concept that derives from John Bowlby's attachment theory and refers to a person's characteristic ways of relating in intimate caregiving and receiving relationships with attachment figures, - often one's parents, children, and romantic partners. The concept involves one's confidence in the availability of the attachment figure for use as a secure base from which one can freely explore the world when not in distress and a haven from which one can seek support, protection, and comfort in times of distress. Exploration of the world is not limited to the physical world but also relationships with other people and reflection on one's internal experience.

From inception, Bowlby (1982) conceptualized attachment theory as guiding clinical practice. Consistent with this idea, there has been increased interest in the application of an attachment theory perspective to psychotherapy (see George, 1985; Fonagy, 1996; Berant & Obegi, 2009; Levy & Kelly, 2009). Bowlby not only suggested that the

psychotherapist can become an attachment figure for the client but also thought it was important for the therapist to become a reliable and trustworthy companion in the patient's exploration of their experiences.

Secure attachment behaviours in psychotherapy include the therapist as a secure base from which the individual can freely reflect on their experience, reflect on the possible contents of the minds of their significant other, and explore the possibility of trying new experiences and engaging in novel behaviours. Additionally, Bowlby discussed patients turning to the therapist as a haven for comfort and support in times of distress. Several clinical theorists have elaborated upon Bowlby's ideas about the function of attachment within the therapeutic relationship (e.g., Farber, Lippert, & Nevas, 1995; Farber & Metzger, 2009; Obegi, 2008).

The process of attachment formation has its origins in childhood. However, as the growth process continues, individuals may form new attachments based on their childhood projections. According to a study by Karen (1994) the establishment of, maintenance, and renewal of proximity brings feelings of love, security, and joy, while lasting or untimely disruption brings anxiety, grief, and depression. Conversely, the attachment process creates brain structures that remain stable in identifying and responding to new attachments in life. Another study by Levy & Kelly (2009) shows that Bowlby's conceptualization of external events in the child's family and environment was significant thrived in making the attachment theory clinical. The response of the smile and babbling noises showed a happy and content child in her external environment (Diehl et al, 1998). In agreement, Mohammadi, Samavi & Ghazavi (2016) referred to conscious and unconscious planning of responses by mothers to their children as a pure measure of how attachments are measured.

Definition of Key Terms

Attachment is defined as a "lasting psychological connectedness between human beings" (Bowlby, 1969, p. 194) and may be considered interchangeable with concepts such as "affectional bond" and "emotional bond." Bowlby believed that the earliest bonds formed between caregivers and children have a tremendous impact throughout

life. He suggested that the attachment keeps the infant close to the mother, thus improving the child's chances of survival. Bowlby viewed attachment as a product of evolutionary processes. While behavioural theories suggested that attachment was a learned process, Bowlby and others proposed that children are born with an innate drive to form attachments with caregivers.

Throughout history, children who maintained proximity to an attachment figure were more likely to receive comfort and protection and more likely to survive to adulthood. Through natural selection, a motivational system designed to regulate attachment emerged.

So, what determines successful attachment? Those who are behaviourists suggest that it was food that led to forming this attachment behaviour, but Bowlby and others demonstrated that nurturance and responsiveness were the primary determinants of attachment.

Based on Bowlby's attachment theory (Levy, Blatt & Shaver, 1998; Brennan, Clark & Shaver, 1998), Ainsworth developed an observational research paradigm (called the 'Strange Situation') for assessing attachment security. Ainsworth identified three major behavioural patterns of attachment in infancy (1) secure, (2) avoidant, and (3) anxious-ambivalent—and traced these attachment patterns to parenting behaviour. Babies that approached their mother for comfort, soothing, and emotional refuelling securely attached. Infants who avoided, ignored, or were difficult to console following a three-minute separation from their mother were insecurely attached.

According to (Karen) in 1954, Ainsworth followed her husband to Uganda, where she launched one of the pioneering studies in modern infant research. With no lab, meager institutional support, with no help in collecting or analyzing the data, accompanied only by her interpreter, she recruited twenty-eight unweaned babies from several villages near Kampala and began observing them in their homes. Our belief is that attachments formed in our early relationships with caretakers impact our feelings of insecurity, anxiety, fear, avoidance, and satisfaction in our closest relationships. Ainsworth confirms that one way to confirm a secure or insecure attachment is to pay attention to patterns that demonstrate the attachment style by observation. This intervention is significant as

we aim to support families who want to thrive and do well. We must pay attention to youth development in social, educational and community settings and this requires that we become creative with interventions to engage youth in meaningful conversations.

In this research we (Cadore) reached out to others across the Diaspora, United Kingdom, Kenya, and Nigeria to find out what type of interventions they use to engage youth and encourage healthy dialogue in order to build secure attachments.

Clinicians that provide direct care for Youth who are facing challenges recognize the benefits of a secure attachment by providing corrective emotional experiences that support their health and well-being (Diener, Hilsenroth & Weinberger, 2009).

Markiewicz stated that the ability to give care and be

... a source of support and comfort to others involves being available, capable of recognizing others' needs, and being able to offer help. Effective care-giving promotes trust, openness, and closeness. The type of care the child received serves as a model for the care they learn to give. Thus, those more securely attached are more likely to be supportive and caring with partners, whereas those with avoidant attachment tend to remain more aloof and withdrawn, dismissing the emotional content of the problems. The latter are likely threatened by the sense of vulnerability which the others' distress evokes in themselves. Those with anxious-ambivalent attachment are often too preoccupied with their own emotions to be able to recognize the others' needs, and have difficulty experiencing the others' emotions as separate from their own. They are likely to become too overwhelmed by these merged feelings to be useful to the other. (2005, p. 99)

So, we ask, what is the best therapeutic approach when it comes to promoting healthy close relationships in adolescents with different attachment styles?

Therapeutic Approaches to Promoting Healthy Close Relationships in Adolescents with Different Attachment Styles

Secure attachments are the healthiest type of bond with parents. It involves children who can depend on their caregivers to show distress when separated and joy when reunited because they are confident that the caregiver will return (Karen, 1994). Securely attached individuals thrive in their relationships but don't fear being alone. They do not depend on the responsiveness or approval of their partners and tend to have an optimistic view of themselves and others.

In general, the partners of secure people tend to be more satisfied with their relationship. Secure parental attachment leads to higher academic results, a positive attitude during romantic relations, and an enhanced overall self-esteem level (Hanzan & Shaver, 1987; Davila, 2017). Simply knowing about one's attachment style can help people become more secure if they aspire. According to Ayenew (2016), the awareness of the interconnection between attachment, style, and romantic relationships, could be used to uncover underlying issues, so clients can understand and work out their relationship issues.

Levy & Kelly (2009) clarified the role of psychotherapy and attachment. From its inception, Bowlby believed that attachment theory was central to normative and psychopathological development, and he regarded the 'attachment theory as a particular relevance for psychotherapy. This shift to an attachment perspective was towards a view of the therapist, providing the patient with a secure base, exploring himself and his relationship with all those he has made or might make an affectional bond. A therapist's role is to provide the patient with a temporary attachment figure which serves many functions in the treatment process. In this role, the therapist helps the patient explore past and present attachments, including their expectations, feelings, and behaviours. The therapist accomplishes this goal by helping the patient examine the relationship with the therapist and how it may relate to relationships or experiences outside of therapy. The therapist creates links between past and present experiences, encouraging awareness of current relationship experiences related to past ones.

When a caregiver themselves has an anxious attachment style, if they are unpredictable in how well they meet the child's needs, or if the environment is chaotic or unpredictable, an anxious attachment can develop, Ayenew (2016). For example, perhaps your primary caregiver was inconsistent with their affection toward you. Sometimes, they might have provided a lot of attention, while at other times, they might have pushed you away. This is an example of a reason why a youth with anxious attachment would react due to fear of being in a new environment with a new caregiver.

Insecure attachment happens when the child does not experience consistent parenting from their significant caregiver. There can be several different reasons for the consistency. The mother may experience postpartum depression and feel incapable of interacting with her child and meeting their physical and emotional needs. In ever-demanding Western societies, professional mothers often return to work after a short maternity leave and may continue this trend because of an insecure attachment to their mothers (Bakermans-Kranenburg, Juffer & van IJzendoorn, 1998). Children with anxious attachments to their parents will struggle with emotion management. They express distress when their caregiver leaves and are difficult to soothe when they return. Behaving as if they are not sure they can rely upon the caregiver and the resentment of being abandoned.

The child's insecurity will manifest in trying to control interactions with their caregivers as they are uncertain how long the caregiver will be around. This child grows up to be an anxious adult with a poor self-image and low self-esteem. They fear abandonment and are overly sensitive to criticism. As an adult, this individual craves intimacy and closeness, becoming clingy and excessively possessive. In our interactions with youth that display anxious attachment styles we have observed that individuals already had complex mental health issues before engagement.

Supporting Disorganized Attached Students in School

For anxious attachment, working one-on-one with youth who may have an anxious attachment style, which may be inconsistent with attendance, and it may take some time for them to build trust.

1. Support the child to feel safe

It is essential to recognize the fear and anxiety beneath the behaviour for the child to be appropriately supported. Until children feel safe, they will not be able to derive positive benefits from being in an educational environment. Clear structure, boundaries, and routine in a relaxed environment are best, but this can be tricky in school. Providing opportunities to co-regulate the child's escalating arousal, adults need to set the emotional tone (Ayenew, 2016). Support during times of transition is crucial as times of change will escalate anxiety during the school day, and therefore the child's disorganized tendencies may escalate.

2. Build a key relationship with the child

Children need relationships to feel safe and will significantly benefit from the allocation of a key person who gets to know and understand the child and begins engaging the child in the relationship, helping the child to feel safe enough to trust and respond. The key person will know the child well enough to notice distorted and direct requests for help and be aware of conditions that might confuse the child, stepping in early to prevent escalating arousal. This vital can provide emotional support and help the child when feelings of shame or anger threaten to overwhelm them. The key person can also be an advocate or champion for the child.

3. Support their emotional development

We need to meet the emotional needs of children when meeting social and learning needs. Children with attachment difficulties are likely to be emotionally immature and to have only fragile control of emotional arousal, whether caused by excitement or anxiety. We need to attune to the child to recognize and support feelings however these are displayed. When things get tricky, we need to step in and provide co-regulation of emotion as required. Children will not learn to recognize their own feelings or the feelings of others until they have experienced sensitive, regulating relationships. Experience of emotional regulation comes before understanding (Ayenew, 2016).

4. Provide empathy and discipline

Empathy is a significant precursor to discipline. We need to discipline with empathy rather than anger (e.g., “I can see you were upset when he knocked down your tower”). Learning to follow guidelines and understanding what acceptable and unacceptable behaviour is arises from the experience of an emphatic, attuned relationship and as the adult comforts and helps the child regulate the feelings of shame the child is learning what is socially acceptable. Children need limited, simplified choices and consequences, and help to understand cause and effect. We need to provide explicit rules with predictable, logical and consistent consequences for unacceptable behaviour in a calm and non-confrontational way (e.g., noticing and wondering aloud). Children will need support with their understanding of behaviour and its consequences of the impact of themselves on others and others on themselves. (DaVila et al., 2017). The child will be supported by providing an appropriate time to feel in control to trust and enjoy the adult person in charge (Ayenew, 2016).

Strategies for Practitioners to support transition to a secure attachment style

Secure attachment behaviours in psychotherapy include the therapist as a secure base from which the individual can freely reflect on their experience, reflect on the possible contents of the minds of their significant other, and explore the possibility of trying new experiences and engaging in novel behaviours.

1. Improve your nonverbal communication skills

Similarly, to the first relationship you have with your primary caregiver, one of the most crucial lessons gathered from attachment theory is that adult relationships depend on their success in nonverbal communication. Even though you may not be aware of it, when you interact with others, you continuously give and receive wordless signals through gestures you make, your posture, how much eye contact you make and the like. These nonverbal cues send strong messages about what you feel. Developing how well you read, interpret, and communicate nonverbally can help improve and deepen your relationships with people at any age. You can learn to improve these skills by being

present in the moment, learning to manage stress, and developing your emotional awareness.

2. Boost your emotional intelligence

Emotional intelligence (otherwise known as emotional quotient or EQ) is the ability to understand, use, and manage your emotions positively, empathize with your partner, communicate more effectively, and deal with conflict. As well as helping to improve how well you read and use nonverbal communication, building emotional intelligence can help strengthen a romantic relationship. By understanding your emotions and how to control them, you'll be better able to express your needs and feelings to your partner and understand how your partner is feeling.

3. Develop relationships with people who are securely attached

When you are in a relationship with another person with an insecure attachment style, this can make for a union that's out of sync at best, rocky, confusing, or even painful. While you can work through your insecurities together as a couple, if you're single, it can help to look for a partner with a secure attachment style to help shift you away from the negative patterns of thinking and behaving. A strong supportive relationship with someone who makes you feel loved can play a significant part in building your sense of security. Estimates vary, but research suggests that 50 to 60 percent of people have a secure attachment style, so there's a good chance of finding a romantic partner who can help you overcome your insecurities. Similarly, developing firm friendships with these individuals can also help you recognize and adopt new patterns of behaviour.

4. Resolve any childhood trauma

As discussed above, experiencing trauma as an infant or young child can interrupt the attachment and bonding process with a parent. Childhood trauma can result from anything that impacts your sense of safety, such as an unsafe or unstable home

environment, separation from your primary caregiver, serious illness, neglect, or abuse. When trauma in childhood does not get resolved, feelings of insecurity, fear, and helplessness can continue into adulthood. Even if your trauma happened many years ago, there are steps you can take to overcome the pain, regain your emotional balance, and learn to trust and connect in relationships again.

Conclusion

Youths' frequent spaces that provide a sense of belonging; When creative interventions foster healthy engagement. They will engage consistently, which is a significant part of building their sense of security. Being present, learning to manage stress, and developing emotional awareness are skills that are essential to building a sense of security within children/youth.

Adult relationships are influenced by early attachment formations, knowledge of attachment styles in adulthood will help one to learn how to challenge their insecurities, develop a more securely attached way of relating to others, and build stronger, healthier fulfilling relationships (Bartholomew & Horowitz, 1991; Dozier, 1990; Dozier et al., 2001).

Finally, it is important to be mindful of the clinical interventions we use within clinical settings. Maintaining a secure attachment is a predictive indicator of the relationship clinicians will have with youths.

Clinicians who maintain sturdy and supportive relationships assist in regulating social/emotional responses by modelling how to manage emotions through emotional regulation. Through this we have hope that youth regain emotional balance and learn how to trust and connect in relationships again.

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Tina Mueni

works in the Department of Psychology at St. Paul's University in Nairobi Kenya and may be reached at tinahm2013@gmail.com

Alethia Cadore, CYC-P, MA

is a psychotherapist at Mindslike in Ontario, Canada and may be reached at caconsultants4@gmail.com

Gary Treasure

is a Family and Mindset Coach at Manifest Coaching and may be reached at gtreasure41@gmail.com

Dr. Akomaye Undie

works in the Department of Department of Guidance and Counselling at the University of Calabar, in Nigeria and may be reached at akomayeundie@unical.edu.ng



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