

Early Attachment



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“In particular, it is the experience of loving and being loved that most closely predicts how we react to the hardships of life; human attachments are the ultimate source of resilience.

— Jonah Lehrer, [A Book About Love](#)

“The views expressed are those of the author and do not reflect the official policy of the Department of the Army, the Department of Defense, or the U.S. Government.”

Early Attachment



- Attachment is a really big deal and has lifelong implications for all of us. Safe and secure attachment are absolutely necessary for developing healthy and secure relationships, emotional health, and the ability to regulate our emotions.
- Two early pioneers in this field, **Dr. John Bowlby** (1969) and **Dr. Mary Ainsworth** (1973) carved the way to our understanding of attachment and child development theory.
- They **defined attachment** as a deep and enduring emotional bond that leads to connections between us across time and space.
- This attachment is not always mutual and can travel in only one direction. For example, a child can attach to a parent, but the parent does not always attach to the child or vice versa (Kain & Terrell, 2018).

Attachment – Dr. John Bowlby



- By way of background on Dr. Bowlby, in an interview with Dr. Milton Stenn , Bowlby shared that his career started off in the medical direction. He noted that he was following in his surgeon father's footsteps. His father was a well-known **surgeon in London** and Bowlby explained that his father encouraged him to study medicine at Cambridge.
- Bowlby ended up following his father's suggestion but was not terribly interested in anatomy and natural sciences. However, during his time at **Trinity College**, he became particularly interested in developmental psychology which led him to give up medicine by his third year. When Bowlby left medicine, he accepted a teaching opportunity at a school called **Priory Gates** for six months where he worked with maladjusted children.
- Bowlby stated that the experience at Priory Gates was extremely important to his career in research as he learned that the problems of today should be understood and dealt with at a developmental level (Kanter, 2007).

Attachment – Dr. Mary Ainsworth

- Bowlby was not the only act in town as he collaborated extensively with Dr. Mary Ainsworth.
- Mary was born in **Glendale Ohio**. When she was 15, she read William McDougall's book, **Character and the Conduct of Life**, which inspired her to pursue psychology.
- While she was teaching at **John Hopkins**, Mary began working on creating a means to measure attachments between mothers and their children.
- It was this that led her to develop her famous **"Strange Situation"** assessment, in which a researcher observes a child's reactions after a mother briefly leaves her child alone in an unfamiliar room.
- The child's reaction after the separation and upon the mother's return, revealed important information about attachment. Based on her observations and research,
- Mary determined that there were **three main styles of attachment**: **secure**, **anxious-avoidant**, and **anxious-resistant**. Since these initial findings, her work has spawned numerous studies into the nature of attachment and the different attachment styles that exist between children and their caregivers (VeryWellMind, 2019)

Mary Ainsworth: ATTACHMENT AND THE GROWTH OF LOVE



Four Phases of Attachment

- Rudolph Schaffer and Peggy Emerson (1964) analyzed the number of attachment relationships that infants form in a [longitudinal study](#) with 60 infants.
- In their study, infants were observed every four weeks during the first year of life, and then once again at 18 months.
- Schaffer and Emerson determined that four distinct phases of attachment emerged:

Stages of Attachment



Pre-attachment: Birth to 6 Weeks
Baby shows no particular attachment to specific caregiver



Indiscriminate: 6 Weeks to 7 Months
Infant begins to show preference for primary and secondary caregivers



Discriminate: 7+ Months
Infant shows strong attachment to one specific caregiver



Multiple: 10+ Months
Growing bonds with other caregivers

well

Four Phases of Attachment

Rudolph Schaffer and Peggy Emerson (1964)



- **Pre-attachment stage:** From birth to three months, infants do not show any particular attachment to a specific caregiver. The infant's signals, such as crying and fussing, naturally attract the attention of the caregiver and the baby's positive responses encourage the caregiver to remain close" (Schaffer & Emerson, 1964).
- **Indiscriminate attachment:** From around six weeks of age to seven months, infants begin to show preferences for primary and secondary caregivers. During this phase, infants begin to develop a feeling of trust that the caregiver will respond to their needs. While they will still accept care from other people, they become better at distinguishing between familiar and unfamiliar people as they approach seven months of age. They also respond more positively to the primary caregiver" (Schaffer & Emerson, 1964).
- **Discriminate attachment:** At this point, from about seven to eleven months of age, infants show a strong attachment and preference for one specific individual. They will protest when separated from the primary attachment figure (separation anxiety) and begin to display anxiety around strangers (stranger anxiety)" (Schaffer & Emerson, 1964).
- **Multiple attachments:** After approximately nine months of age, children begin to form strong emotional bonds with other caregivers beyond the primary attachment figure. This often includes the father, older siblings, and grandparents" (Schaffer & Emerson, 1964).

Attachment Styles



As nicely summarized by Lyons-Ruth (1996), the basic attachment styles culminating from John Bowlby's and Mary Ainsworth's research and the fourth by Drs. Mary Main's and Judith Solomon's (Main & Solomon, 1986) work include:

- Secure
- Avoidant
- Ambivalent
- Disordered

Attachment Styles Explained



- **Secure attachment:** Secure attachment is marked by **distress when separated from caregivers and joy when the caregiver returns**. Remember, these children feel secure and are able to depend on their adult caregivers. When the adult leaves, the child may be upset but he or she feels assured that the parent or caregiver will return. When frightened, securely attached children will seek comfort from caregivers. These children know their parent or caregiver will provide comfort and reassurance, so they are comfortable seeking them out in times of need” (Lyons-Ruth, 1996).
- **Ambivalent attachment:** Ambivalently attached **children usually don't appear too distressed by the separation, and, upon reunion, actively avoid seeking contact** with their parent, sometimes turning their attention to play objects on the laboratory floor. This attachment style is considered relatively uncommon, affecting an estimated 7 percent to 15 percent of U.S. children. Ambivalent attachment maybe a result of poor parental availability. These children cannot depend on their mother (or caregiver) to be there when the child is in need” (Lyons-Ruth, 1996).
- **Avoidant attachment:** Children with an avoidant attachment tend to **avoid parents or caregivers. When offered a choice, these children will show no preference between a caregiver and a complete stranger**. Research has suggested that this attachment style might be a result of abusive or neglectful caregivers. Children who are punished for relying on a caregiver will learn to avoid seeking help in the future” (Lyons-Ruth, 1996).
- **Disorganized attachment:** Children with a disorganized attachment often display a **confusing mix of behavior and may seem disoriented, dazed, or confused**. Children may both avoid or resist the parent. Some researchers believe that the lack of a clear attachment pattern is likely linked to inconsistent behavior from caregivers. In such cases, parents may serve as both a source of comfort and a source of fear, leading to disorganized behavior” (Lyons-Ruth, 1996).

Attachment Style Percentages

Mary Ainsworth and her colleagues reported in 1978 that studies on the three initial attachment classifications revealed:

- 70 percent of American infants have been classified as secure
- 20 percent as avoidant-insecure
- 10 percent as resistant-insecure (Ainsworth et al., 1978).

Kain and Terrell (2018) warn that there are worrying declines in secure attachment and that in more recent research populations, the percentages of secure attachment have declined by **10 percent** (Andreassen et al., 2007).



Attachment Takeaways

- Studies reveal that Interactions during the **first three years of life can affect cognitive development** and will impact physical, emotional, and mental health of children as they age and develop (Colmer et al., 2011).
- Typically, a **parent's emotional response will serve as a template** for helping their child learn about emotion. As parents model appropriate emotion regulation through conversations or actions, children learn to control/regulate their emotions.
- On the other hand, **insecurely attached children** may learn to mask their emotional distress or exaggerate them in order to gain the parent's attention; therefore, making up for a parent who is not consistently responsive (Laible, 2010).
- This type of maladaptive behavior has devastating consequences, resulting in **poor social skills, emotional dysregulation, depression, anxiety, peer exclusion, social rejection, and/or low self-esteem** (Lewis et al, 2015; Newman, 2017).
- So, it behooves any of us who are young parents to ensure that we are spending lots and lots of time with our infants and children in healthy, safe, and connected ways, particularly early in life to develop secure attachment so they will be able to have joy, fulfilling relationships, and emotional stability.