Secure Attachment

Primary Caregiver Behavior

Consistent Responsiveness and Warmth



Secure attachment develops in childhood when:

The primary attachment figure is consistently available, responsive, and warm.

Parents/caregivers of securely attached children can see their child's internal mind and respond appropriately to the emotion at hand. They often mirror the infant's emotion, teaching self-regulation and helping the child to identify and feel comfortable with their feelings. Infants feel safe and trust their caregiver will attend to their needs, protect them, and comfort them. This allows them to focus on exploration. Their parents will often delight in the infant and support their exploration.

Internalized Attachment Related Beliefs and Attitudes

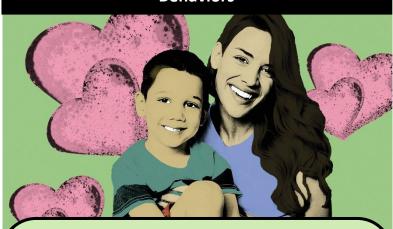
Free to Connect, Explore, and Reflect



Adolescents with a secure attachment hold a healthy balance between attachment and autonomous exploration. They can acknowledge the need to depend on others at times but are also comfortable being alone. They are open about their emotions and have positive thoughts regarding relationships. They feel free to seek emotional closeness and intimacy with others whilst remaining comfortable with mutual dependence. They have a coherent, strong sense of self (identity) and are secure acknowledging their limitations and imperfections. They show good self-reflection skills and are able to trust others.

Impact on Child's Attachment System

Appropriate Activation of Attachment Behaviors



Children with a secure attachment feel confident to try new things, safe in the knowledge they have a secure base to return to (their parent/caregiver). Should they require comfort and/or support, they freely seek the warmth of their available and consistent caregiver. Securely attached children are comfortable with closeness (both friends and family) and feel accepted and calm with parents/caregivers. They have good self-esteem and show a balance of emotions (not too little or too much).

Manifestation in Adult Relationships

Comfortable with Closeness, Able to Depend on Others. Has a Clear Sense of Self.

"I Can See Me, I Can see You. It's Ok to Feel Differently."



Securely attached adults often demonstrate longevity, trust, and commitment in romantic relationships. They are relaxed with closeness and depending on others. When distressed they will seek emotional support from their partner and offer support to their partner when it is required. They can accept criticism without significant distress and generally view themselves and others as positive and 'good'. Given their coherent and integrated self-structure (clear identity and ability to readily recognize their emotions and those of others) they are able to link with their romantic partner and yet maintain interdependence and differentiation. They can regulate

with their partner and self-regulate when on their own. www.openheartassets.com@

Anxious-Preoccupied Attachment

Primary Caregiver Behaviour

Inconsistent and Intrusive



Anxious attachment may develop in childhood when:

 The primary attachment figure is inconsistently available or responsive and involves the infant in their own (distressed) state of mind.

Parents of anxiously attached children struggle to emotionally attune to their child because they are confused by their child's inner mind. They may detect that their child is in emotional distress but may respond with intrusive or overprotective (anxious) parenting. Parents struggle to regulate themselves and may be insufficiently responsive due to their own suffering or project their own concerns onto the child. Self-initiative and self-exploration are often discouraged.

Internalised Attachment Related Beliefs and Attitudes

Others Could Leave/Be Unavailable at Any Moment and I Can't Do It Alone.



Anxious-preoccupied adolescents struggle to regulate their distress (a by-product of their parent/s not being able to clearly identify the origins of their upset as a child and respond and/or teach appropriate self-regulation). They are over-dependent on others to soothe them and show exaggerated autonomic arousal when there is separation or physical distance from a partner/close friend. They are hypersensitive to any information that may signify potential separation often misinterpreting innocent signs as danger. Anxiously attached youth often hold strong unconscious beliefs that self-sufficiency and autonomy may lead to abandonment (i.e., independence will erase attention).

Impact on Child's Attachment System

Hyperactivate Attachment Behaviours



If a child learns that their primary caregiver is not consistently available to soothe their distress, or often responds in a way that is incongruent with their internal experience, they will 'turn up' their attachment behaviours. They may amplify their distress, or cling to their parent, attempting to guarantee their parents attention and support. They fear the unavailability of their parent and experience great pain at separation, never fully trusting their parent can be available to attend to their needs. They consistently focus on the availability of their parent, leaving no space to explore their environment. This impacts on the development of their self-identity, sense of competence and self-esteem.

Manifestation in Relationships

Excessively Seek Reassurance and Constantly Monitor for Possible Neglect or Rejection.

"There Is No Room for A Mind of My Own."



Anxious-preoccupied adults are so fearful of rejection or abandonment they will often use controlling and coercive strategies to minimize separation from a partner. Intrusive and aggressive attempts to prevent distance can lead to dissatisfaction within their relationships and can create that which they fear the most – rejection. Others can experience their amplified attachment behaviors as clingy, overwhelming, and intrusive. Consistent expressions of high emotional reactivity to secure availability often becomes a part of their identity, preventing further personal development. They may ruminate on past hurts, fearing 'unlovability'.

www.openheartassets.com@

Anxious Preoccupied Attachment: Hyperactivation Strategies

Below are examples of behaviors people with an anxious-preoccupied attachment may exhibit in adult romantic relationships. Given their fear of emotional and physical unavailability, separation, loss, and being alone, anxious preoccupied individuals will unconsciously 'turn up' their attachment responses to illicit their partners attention and secure their availability ("Don't leave me!", "I can't rely on myself"). They may become especially triggered if they sense any form of unresponsiveness from their partner. This can ignite a painful internal experience akin to that of a toddler losing their parent in a busy shopping center. Remember, not being 'seen' (e.g., understanding the needs of the person and responding appropriately when they are in distress) creates intense pain and anger for the anxious-preoccupied. It is an unconscious reminder that their source of human survival (their primary attachment figure) was unable to make them feel safe in this world. This is an early infant/childhood wound that permeates most relationships. Their responses are inbuilt safety strategies to try and establish a feeling of safety. They rely on others to soothe and not feel helpless.





Show heightened displays of anger when partner is not available. Attempts to demand and coerce partner to secure constant availability. Anger is often the result of consistently feeling there is a danger of being abandoned.

Anxious Attempts to Please

Hold unrealistic expectations of partner and demonstrate excessive helplessness when partner is not available. Desire intense intimacy always, hold self-perceived weakness, and fear their partner won't care as much as they do. Their preoccupation with their partner's availability can interfere with their ability to remain present and enjoy and/or truly feel closeness within the relationship.



Angry and Demanding

Act clingy and dependent. Neglect other relationships (even family) to secure partner. Fear separation and show excessive worry. Preoccupied adults fear developing independence and confidence because these traits may have been discouraged in early childhood. The only way they learnt how to secure availability was through vulnerability and distress. They struggle to know that closeness can coexist with autonomy and separateness

Increased Helplessness



Use emotion-focused coping and can struggle to see rational explanations for partner absences (e.g., cannot understand that spending time with friends outside of the relationship is healthy and not an indication of rejection). Often (unconsciously), overwhelming feelings, mistrust, chaos, and insecurity become a form of identity, a sense of who they are.

Choose the Relationship Over Independence



Make exaggerated judgements about perceived threats.
Consistently scan the environment for signs of potential rejection and may use angry withdrawal. The preoccupied adult can sometimes 'push' others away angrily in fear. If their caregiver was sometimes angry and unavailable, they may have internalized a persecutory self which can be expelled onto others or be turned upon themselves (e.g., self-harm).

Amplify Distress

Jealousy and Suspicion

Dismissing Avoidant Attachment

Primary Caregiver Behavior

Unavailable



Avoidant attachment may develop in childhood when:

• The primary attachment figure consistently and repetitively rejects the child's attachment behaviors. Parents of avoidantly attached children do not attune well to their child because either they do not recognize, they deny, or they minimize their child's inner mind and emotional experience. Parents tend to hold their infant less and attend to their child's cries less often.

Internalized Attachment Related Beliefs and Attitudes

Never Depend on Anyone Because Others are Untrustworthy and Unavailable.



Dismissing adolescents may deny any vulnerability and avoid closeness and emotional intimacy. They may pull away when someone gets too close and show little emotion. Their goal is to maintain distance, control and self-reliance whilst avoiding emotional states that may trigger attachment activation. They may emphasize their strengths and minimize or reject any notion of past or present unpleasant experience, showing a lack of emotional expressiveness. Caring for someone is to risk allowing themselves to feel the powerlessness, shame, sadness, and vulnerability they experienced when their earlier attachment figures were unable or unwilling to do so. Maintaining a belief that others are not ok protects from letting others matter.

Impact on Child's Attachment System

Deactivate (Suppress) Attachment Behaviors



If a child is punished, neglected, or distanced when seeking proximity and comfort from their primary attachment figure (particularly when they are distressed), the child learns to suppress attachment behaviors. They learn to 'shut down' their outward expressions of anguish and hurt and begin to rely on non-attachment-related systems of coping such as exaggerated independence ("I don't need anybody"). Avoidantly attached children essentially grow up in an emotional desert where their own internal minds (emotions and thoughts) are not seen or witnessed by their caregiver or anybody else.

Manifestation in Adult Relationships

Maintain Independence, and Control Because Dependence and Clossness are Dangerous.

"I'm Shut Down to Mine and Others Internal Mind/States."



Dismissing adults tend to view dependence on others as dangerous. They lack trust and turn away from anything that is uncomfortable in relationships. Often, they can be viewed as aloof, cold, or distant. Their deactivation of attachment behaviors allows them to deflect from attachment related thoughts and assists them to 'turn off' autonomic arousal (distress) associated with relationship disharmony. They essentially are disconnected from their internal states and have numbed out their feelings.

www.openheartassets.com@

Dismissing Avoidant Attachment: Deactivating Strategies

Below is a list of behaviors people with a dismissive avoidant attachment may use in adult romantic relationships. Given their fear of closeness ("People don't matter"), dismissive avoidant individuals will unconsciously deactivate their attachment strategies when they feel dependent on/or controlled by another, or if they feel someone is getting too close emotionally. Remember, relying on others is too painful for someone with an avoidant attachment and signifies a dangerous threat! They have internalized an internal working model of themselves as valued and strong and others as weak and dependent. This has been constructed to conceal a feared unconscious model in which the self is helpless and vulnerable while others are rejecting, controlling or punitive. To acknowledge dependency would bring about great sadness (and possibly anger) at the realization their parent/s or primary caregiver was unable or unwilling to care for their feelings and needs. They have learnt to keep these insights (their caregivers were rejecting) unconscious (an inbuilt safety strategy to reduce distress).



Can Deal but Can't Feel

Pull away and use physical distance to ensure independence.

Shut out people when things feel uncomfortable. Devalue others to keep a distance. Anger can also ensure distance.

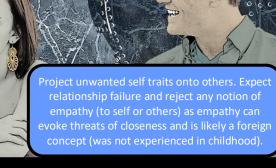
Ghost or Abandon

Protective Hostility and Contempt – Devalue Others

Minimize any suggestion they may need help from others, (protecting from internal feelings of shame). Overestimating their own value assists them to remain distant from any thoughts or feelings that may provoke them to seek care from others. Interestingly, people with a dismissing attachment system tend to idealize their upbringing and caregivers, shielding them from conscious acknowledgment of their unmet needs and angry frustration. Vulnerability is weak.



I'm OK You're Not OK



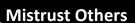
Act Overly Confident or Self-sufficient

Act Excessively Cold and Lack Empathy



Withhold intimate disclosures. Dismiss the importance of connection protecting from internal feelings of shame which developed when any demonstration of longing for caregiver affection was not tolerated as a child.

Remain suspicious of others motives. Maximize all thoughts and emotions that keep self distanced from others.



Keep people at a Distance

intimacy and manage distress by cutting off feelings. To love someone is risky as it challenges the notion that others are ok. Realizing that others are ok may test the notion that people can matter. This potentially triggers unconsciously held internal shame and sadness at not feeling valued (or that they mattered) by their parents.



May dislike physical contact and reject bids for connection (or view others as intrusive.) By controlling the relationship, they may be unconsciously attempting to control their own internal struggle against powerlessness resultant from childhood experiences of excessive parental control. Interestingly, another control strategy may be to idealize or work hard to make others feel special. They may have learnt to satisfy their parents overtly self-absorbed or covert insecurity by idealizing them, thus allowing themselves to feel special whilst avoiding the risk of dependence.



Disorganized Fearful Attachment

Primary Caregiver Behavior

Frightening or Frightened



Disorganized fearful attachment may develop in childhood when:

 The primary attachment figure has unresolved trauma or loss. They are perceived as scary by the infant or may be frightened when with the child.

Infants with a disorganized attachment system, are faced with the difficult dilemma of needing their parent for safety and survival (to be fed and clothed), but also find their parent to be the source of their fear. They feel frightened but are unable to do anything about it.

Internalized Attachment Related Beliefs and Attitudes

I Am Unlovable and Unworthy of Care.



Disorganized fearful adolescents often demonstrate a lack of coherence in their sense of self (as a result of unresolved childhood trauma). They may show symptoms of dissociation (feeling numb or 'out of it') and may rapidly shift in their mood states. Their attachment systems do not show a consistent pattern. At times they may isolate and fully disconnect from others, while at other times they may desperately cling in fear or rage in anger. Finding a balance between closeness and distance appears to be a consistent struggle. They show low selfworth and can be preoccupied with past hurts.

Impact on Child's Attachment System

Deactivating and Hyperactivating Attachment Behaviors



Disorganized fearful adults often report that a parent had a drinking problem when they were young or may cite incidents of childhood physical and/or sexual abuse. Long parental separations are also common. Children raised in a disconnected, unresponsive environment that was frightening and overwhelming and lacked a safe place to cope, may develop inhibitive and unassertive behaviors. Enduring abuse or having a helpless terrified parent/caregiver does not provide the child any opportunities to express their personal, internal experience (disruption without repair). Unable to interpret their caregivers' intentions, the child may blame themselves.

Manifestation in Relationships

Confused and Chaotic.

"I Am Confused About Others Internal States.
Relationships are triggering."



Disorganized fearful adults tend to consistently show instability in their relationships. Often vacillating from one extreme to the other, they become extremely dysregulated in adult romantic relationships as they struggle to manage their conflicting and confusing internal self-states (thinking, emotional and physical). They tend to avoid intimacy, self-disclosure and reliance on others and can be passive, unassertive or socially inhibited in relationships. They may dissociate frequently ('zone out') and show little emotional expression. At other times their feelings of perpetual threat and unbearable internal pain may be projected outwards.

www.openheartassets.com©

Disorganized Fearful Attachment: Hyperactivation and Deactivation Strategies

People with a disorganized fearful attachment may exhibit defensive behaviors that are quite chaotic in adult romantic relationships. Given their incoherent sense of self and disorganized internal working model of 'how to do relationships', they may become triggered very easily in relationships, and react in abrupt, unpredictable ways. Their attachment system will alternate between being hyperactivated and being deactivated. This can often be very difficult for their partners who struggle to understand the strong and varied reactions exhibited within the relationship. Given the trauma they experienced as a young person (experiencing overwhelming distress with no place/context to cope) they have developed primitive mechanisms of self-protection (e.g., dissociation and projecting their internal distress onto others). They have not had the opportunities to develop more adaptive relationship strategies. Remember, people with a disorganized attachment are faced with the reminder of their trauma in relationships. For them, relationships are the source of their terror. Their defenses are learnt strategies to protect them from the impact of their trauma.

Unresolved feelings of anger, fear, helplessness, anxiety, defectiveness, and confusion may result in overwhelming states of mind at times. People with trauma may struggle to translate their physiological feelings of pain into words. The unresolved adult may struggle to realize the present experience is different from the past. Letting someone in close may create a great sense of fear. Their partner's attempt to attune to their distress may not be trusted.



Victim Strategy or Reject Security

Dissociation refers to an autonomic response in which the body activates a freeze reaction (to blunt the distress they are feeling). This response occurs when someone's fear becomes overwhelming or when somebody feels as though they cannot fight or flee a threat ('escape when there is no escape'). The threat or danger can be the memory of a trauma that is activated during an interaction. This memory may be a physiological sensation or facial expression (it is not always the recollection of a specific event).

During dissociation both hyperactivating and deactivating systems are running simultaneously creating a 'numbed out', 'trance-like' state. If people remain cut-off from their bodies for too long, they may panic, resorting to drastic methods to reconnect with their body (e.g., self-harm).

Projection Identification

Projection Identification refers to seeing others' and accusing others' of being that which we possess ourselves. This response appears to resemble the traumatized person reliving a memory. Having experienced their attachment figure as abusive, neglectful, or absent, people with a disorganized fearful attachment will form an identity as the victim. In addition, complex experiences of feeling angry and responsible for what has happened can lead them to identify with the persecutor role. Being a rescuer is another model they may hold of themselves having used caring strategies to fight off further abuse. These unintegrated and unconscious roles can be defensively projected onto another when it is too difficult to psychologically accept within the self. They may blame their partner for being 'the persecutor' and/or tormentor.

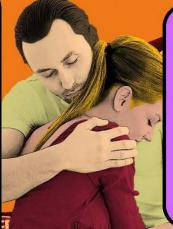
Dissociation

Splitting



dissociation in which a person 'splits off' from an unbearable state of mind (e.g., my father was a horrific alcoholic abuser) to an alternative state of mind that is more tolerable. Such compartmentalization of mind states tends to be oversimplified and unrealistic. For example, people may be viewed as either good or evil, or persecutors or victims. When triggered, someone with a disorganized attachment may rapidly swing to opposing points of views (e.g., someone is viewed as perfect one moment, and disgusting the next.)

Splitting refers to a type of



Caring for others may be used as a control strategy. "If you need me, you can't leave me." Disorganized children may learn to care for their parents to avoid some of the rage and abuse they may otherwise be subjected to. The caretaker role may become a source of identity in an environment of chaos.

Caring As a Control Strategy

So, What Attachment Behaviors Do You Notice in Your Relationships?

Quick Adult Attachment Questionnaire

Do You Highly Endorse a Particular Attachment Style?

Make a mark against statements you agree with. To be used as a guide only.

Dismissing Avoidant Attachment Traits

People are never there when you need them

I find it difficult to allow myself to depend on others

I find it difficult to trust others completely

I am somewhat uncomfortable being close to others

I am nervous when anyone gets too close

Often, love partners want me to be more intimate than I feel comfortable being

Preoccupied Anxious Attachment Traits

I am not sure that I can always depend on others to be there when I need them

I often worry that my partner does not really love me

I find others are reluctant to get as close as I would like

I often worry my partner will not want to stay with me

I want to merge completely with another person

My desire to merge sometimes scares people away

Secure Attachment Traits

I am comfortable depending on others

I know that others will be there when I need them

I find it relatively easy to get close to others

I do not often worry about being abandoned

I do not often worry about someone getting close to me

I am comfortable having others depend on me

Attachment behaviors are primarily developed in the first two years of life before we have language. As a result, our attachment behaviors are largely unconscious. Based on our earliest relationships, we internalize a 'blueprint' or internal working model of 'how to do relationships'. This shapes what we expect from others and how we interpret their behaviors. We unconsciously will be attracted to partners who recreate the same familiar feelings we experienced in our early relationships. It can feel familiar and 'like home' despite perpetuating distress

and pain at times. Bringing

unconscious patterns into

conscious awareness is the

first step.

Think about your romantic relationship history. Can you identify a pattern that is repeated in your relationships? Why did your relationships end? What have your partners said about how you behave within romantic relationships?

What triggers you in romantic relationships? What worries or upsets you the most?

How do you respond or behave when you are distressed or triggered by your romantic partners? How do your partners typically respond to these reactions?

Note! Interestingly, despite attachment being considered a stable trait, we can show different attachment strategies with different people.

Reflecting on the previous handouts and considering your earliest relationships with your primary caregiver/s, why do you think you connect and/or disengage the way you do in romantic relationships?

What would have to change to improve your romantic relationships?