

Podcast #16- Attachment in Human Development (9
minutes)

When I was a young child in the mid-1950s, I had a tonsillectomy. My parents were advised against visiting me for too long in the hospital because of the belief — then widely held — that such attention would make me **less** able to tolerate the distress of being in the hospital. Today, we know better, and parents are not only encouraged to visit their hospitalized children, but are often given the option of spending the night in their rooms. In a similar vein, parents of my mother's generation were encouraged to let their babies and young children cry, and to substitute formula for breast feeding while we now know that it's much better to comfort a baby who is in distress and also that breast feeding is usually good for both parties.

This shift in our thinking reflects our increased awareness of the importance of attachment in human development. It is now axiomatic that the security of children's bonds with their caretakers provides the most crucial building block of healthy development and of later emotional maturity.

But what IS a healthy attachment exactly? Well, we know a lot about how it comes about. What we know is that it is based on a caretaker's willingness and ability to

(1) remain emotionally available to the child,

(2) to feel empathy for that child, and

(3) to be dependable in attempting to comfort the child, especially through providing ready and frequent tactile contact.

It important to say here that parents don't need to be perfect. They don't need to have 100% success in comforting their child. But they need to be able to do it the majority of the time; One psychoanalyst said that the mother doesn't have to be perfect, but needs to be "good enough."

And finally, I want to add that usually we're talking here about the child's attachment to the mother, not the father—NOT because fathers aren't vitally important sources of secure attachment, but because even today, in this culture (in most cultures, actually), it's mothers who are the primary caretakers of babies and young children.

If these conditions –empathy, emotional reliability and availability—good enough mothering—if these things prevail, we think of the child as then having a secure base. And from a secure base, the child is then free to explore and play without any inordinate worry about his or her safety or without worry about the connection to the caretaker. The child can then come and go, can separate, can grow up if you will, without fear of losing his or her parent.

Research has shown that children who grow up feeling secure in their attachments are then usually able to provide this same type of security to their own children when they become parents. In addition, such children grow up to be able to form healthier romantic relationships as adults. On the other hand, those kids who grow up feeling insecure about a caretaker's availability and empathy usually repeat this insecure and unhealthy form of attachment with their own children as well as in their most intimate adult relationships.

It's surprising that such a common sense understanding about the importance of a secure attachment was once unknown to experts in the field of child

development (although, I will say, that parents' common sense often anticipated later research by so-called "experts"). It took rigorous studies by psychological researchers like John Bowlby, Mary Ainsworth, and Mary Main to convince the scientific community that the systems of attachment found in our brains and psyches explained a wide range of behavior in both children and the adults they later become.

When a primary caretaker (in most of the post-WWII era, this was the mother) is unduly physically or psychologically absent, or emotionally inconsistent and unreliable, that caretaker's children usually developed some form of insecure attachment. So, let's think about what we mean by Insecure attachment: this might manifest in either clinging **OR** avoidant behavior, patterns that often continue into adult life. So, let's take the first type and consider for a moment the notion of "Anxious clinging" — What seems to be going on here with Anxious clinging is that it is an attempt to control an unreliable parent or, later, partner. Makes sense, right? Now, consider another type of insecure attachment, namely, what is known as the "Avoidant" type — avoidant behavior can be understood as

an effort to be connected but **armored against** anticipated rejection.

Such findings were confirmed not only by studies in research settings, but also by studies of children in orphanages and those separated from their primary caretakers by war or other disasters. Without a physical intimacy with caretaking adults, young children developed insecure states that made them unable to comfort themselves or show initiative and pleasure in independently playing and exploring.

In extreme forms of parental neglect or instability, researchers found a syndrome they called “failure to thrive,” a severe state of psychological and physical underdevelopment and malnourishment which included, in some cases, inexplicable illnesses and even death.

This was an interesting and important finding when psychologists studied the young children who were sent out of London in the 40s during the Blitz to what were called “foundling homes” — large orphanages, really, where there were enough staff and resources to feed and cloth the children, but not enough staff or awareness to pick them up,

provide physical comfort, make eye contact and rock them—all the things that a good enough caretaker does instinctively. What happened? Well, they found that the children began getting sick; some died...and it was only after studying the situation that they found out why. It was the failures of attachment.

A secure attachment, in other words, was and is necessary not only for health but for life itself.

This is why the stories of infants and young children being forcibly separated from their caretakers at the southern border stir up such outrage. We all intuitively know that such separations will invariably traumatize innocent children who will have to deal with these painful consequences for a lifetime. It was and is an outrage and, as a society, we should let our government hear, loudly and clearly, that we object to this heinous practice.

Patterns of insecure attachment that so often continue into adult life are most evident in romantic relationships. Here we can see the wide range of behaviors and attitudes that trouble so many couples. One or both partners may be so needy, so dependent on the reassurance of the partner, that

the object of their neediness feels suffocated or trapped. The insecure adult has trouble regulating feelings and impulses and boundaries. They cling because they chronically fear that their loved one won't be there when they need him or her. Or for those afflicted with avoidant forms of insecure attachment, we often see an inability to depend on or open up to a partner, and a corresponding inability to offer comfort in return. Both the anxious-needy or the anxious-avoidant patterns reflect fundamental problems in basic attachment systems.

Research tells us that there is a high incidence of attachment disorders in our society. The chain of passing on to others what was done to us can be broken with help. It's important, vitally important, for new parents to be supported by high-quality childcare and given economic support for long maternity and paternity leave. So, for example,--as opposed to its absence in the U.S., every European country gives women between 10 to 47 weeks of paid maternity leave per year. Parents also need to have high quality parent-education available, and psychotherapy if necessary.

Secure attachment is the lifeblood of human development. We have to make it our collective as well as our personal priority.