

Defining attachment

Defining attachment. Attachment is the bond between a person who needs protection and the person(s) he or she depends on for protection and comfort. It is also the reciprocal bond of the caregiver to the protected person. Each attachment is unique and person-specific. Children's attachment forms at 9-12 months of age. Before that age, their brain is organizing on the basis of information from interaction with the caregiver; after that age, disruption of attachment is always painful. New attachments are possible, but they take time to develop, with older children forming new attachments more slowly (for an overview of attachment see Karen, 1998; for the neuroscience see Gerhardt, 2004).

Attachment and other evaluative approaches. The Dynamic-Maturational Model of Attachment and Adaptation (DMM) is focused on survival and successful reproduction. Unlike a medical model of mental illness (expressed as psychiatric diagnoses), legal model of criminal behavior (expressed as culpable behavior), humanistic model of explanatory and extenuating circumstances (expressed in exonerating terms), or religious model of good and evil (expressed as prescriptive ideals), the DMM evaluates the adaptiveness of behavior in response to danger and threat of danger (expressed as self-, partner-, and child-protective strategies when threatened by danger).

When the same set of concerning behaviors are viewed through the DMM, the questions become:

- What threatens each person?
- What does each person do to protect herself or himself (what is their protective attachment strategy?)
- How successful was that strategy in the past when it was developed?
- Does use of the strategy create new problems or threats in present circumstance (of age and conditions)?

Safety & adaptation. Attachment addresses (a) children's safety, (b) the adaptiveness of their behavior in promoting their safety and comfort and (c) the basis upon which they learn about how to stay safe and comfortable in their caregiving relationships. Attachment has profound influence throughout life because:

- it promotes the survival (both physically and emotionally) of the child;
- it shapes the child's developing brain.

Maslow's hierarchy of needs. Maslow developed a hierarchy of human needs (Maslow & Lewis, 1987). Essential needs (the purple section in the figure below) include having a specific and known attachment figure. Infants and young children cannot be safe without an attachment figure; indeed, with adequate physical care and no person to whom they can attach, infants are at risk of dying, with death rates of hospitalized and institutionalized infants between 30-75% in the first year of life (Spitz, 1945). Infants can also suffer severe depression and limited brain growth (Spitz & Wolf, 1946). Although the effect is reduced at later ages, being without any attachment figure is always a threat to survival and functioning (Hakulinen, et al. 2018; Henriksen, et al.,

2019; MacLean, 2003; Tizzard, 1977). Notably, this essential need is fulfilled by having any attachment figure, even a neglectfully or abusively dangerous attachment figure.

Other essential needs include shelter, food, warmth, etc.

Safety, is a basic need, but it is not essential because even infants can adapt to various kinds of danger. For infants and young children, safety (the green section in the figure) includes having a *protective* attachment figure. It is at the second level in Maslow's hierarchy.

Having a *comforting* attachment figure is at the third level (yellow in the figure above) and having a *supportive* attachment figure is at the fourth level.

When essential and basic needs, in the lower levels of Maslow's Hierarchy, are not met, one can expect individuals, of all ages, to develop extreme strategies to try to meet their needs. The strategies include extremely anxious attachment, behaviors associated with psychiatric diagnoses, and criminal behavior.

Strikingly, many services to troubled families do not address essential needs and often focus on self-esteem and self-actualization – which are not the most important needs in such families.

References

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