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## Attachment Theory as it relates to Growth and Development of young children with Developmental Disabilities

Understanding human psychology has played an important role not only for health professionals in diagnosing and treating people with health concerns, but also has helped parents among other people to detect and determine as early as possible any problem or issues that might affect those close to them. This paper has first presented an over view of attachment theory and later analyzed literature on the subject where it discusses four patterns of attachment that exist. It has also presented the stages that children undergo through in realization of a complete attachment in their infant lives. Finally it has presented discussion on attachment relating to children with developmental disabilities, and concluded by a summary of stated points while giving recommendations on how to better improve service delivery. Attachment theory is described and noted to focus on the relationship and bonds between people particularly that are long term, especially those between a parent or caregiver and a child. Attachment as a term is described as emotional bond to another person. John Bowlby a psychologist was the first attachment theorist who believed that the earliest bonds formed by children with their caregivers have a tremendous impact that it is said to continue throughout their life. Bowldy illustrated attachment as a “ lasting psychological connectedness between human beings”.   
Many scholars and professionals in human psychology and behavior have since then conducted many research and studies to explain and justify the reasons and understanding of Bolwdy’s description in relation to the attachment theory (Bowlby & Winnicott Clinic of Psychotherapy, 2004). Bowldy work therefore has formed the framework and foundation that most of the studies have been based upon and guided by. In attachment theory, the main ideology behind it is the sense of security that is developed by infants and children from caregivers who are available, and are responsive to their needs. After the infant has been assured of safety, exploration of the surrounding environment is done, and the distance grows further as the child develops and grows. Experts have cautioned out that there is a difference between attachment and bonding, and the two terms should not be confused as it is often witnessed and observed by many, and therefore, its use in relation to psychology has to be done cautiously even though in other disciplines it has been observed to be used interchangeably (Obegi & Berant, 2010). Research has indicated that any normal child develops attachment to their caregivers who provide emotional and physical care even in abusive relationships whereby a child is treated unfairly and neglected, and the quality of the infant-parent attachment it is asserted determines child’s future social and emotional outcome.   
There is numerous research and studies that have been conducted to further elaborate and enhance the comprehension of attachment theory. According to Maroney (2010), he notes that when an infant primary care giver repeatedly responds to her infant cues in a nurturing way, neurochemicals are released that assist in building and reinforcing neurological pathways that lead to self-regulation, and a sense of safety in the world, and the social-emotional well-being of the child in the world, as it leads to a secure attachment that. Maroney further asserts that infants and toddlers seek out their primary care givers and want to be close to them for both comforts, both physically and emotionally. The parent or care giver helps the child calm down, feel safe and protected when the child is distressed. A similar researcher Gerhardt (2004) in his book Why Love Matters: How Affection Shapes a Baby’s Brain pointed out that there are attachment patterns that differ , which lead to different outcomes in life in the future of an individual. Gerhardt noted that children who are securely attached as children and infants tend to develop a stronger self-esteem and better self -reliance as they grow older. Burack (2012) also noted and emphasized that every parent should try and provide the best of their abilities to their infants and children since researched evidence has shown and proved that infants who are securely attached tend to be more independent, perform better in schools and other institutions of learning, develop and nurture successful social relationships. It is also pointed out that such infants experience less depression and anxiety and therefore they develop and grow as healthy and secure people.   
Gillberg and O'Brien (2010) in their piece Developmental disability and behavior noted that there are four patterns and types of attachments that researchers have distinguished to exist that results from the relationship between an infant and a caregiver or parent. The four patterns include secure attachment, ambivalent attachment, avoidant attachment, and disorganized attachment. In secure attachment, when children are frightened they seek comfort from their care givers. The children are assured of comfort and reassurance from their care givers and therefore in times of need they go out for their help. Research indicates that secure attachment is marked by distress when care givers leave and are separated, but on their return it is marked with happiness and pride (Benson & Haith, 2009). Even when the parent leaves the child is assured that the parent will return and the sense of security is maintained even in their absence.   
Ambivalent attachment is rarely common and it is characterized by a child becoming very distressed when the care giver leaves. It has been attributed to result from poor maternal availability and presence. Further research notes that in this type of attachment the child cannot depend of their care giver especially the mother to be there in times of need. Obegi and Berant (2010) emphasized that Avoidant attachment presents adifferent view from the earlier described ones. It is observed that they tend to avoid parents and care givers. Research indicates that such kind of attachment arises as a result of abuse and neglect from the parents and caregivers. Such kind of children when offered a choice between a stranger and the care giver, they will show no preference between the two parties. They further asserted that it is also noted that such kind of children from avoidant attachment when they get punished for relying on the caregiver for help, in the future they avoid completely to seek help from such caregivers and they develop a negative attitude towards them and the society at large that in some instances it has resulted to behavioral disorders, and discipline problem in general.   
Lastly, disorganized attachment is noted to carry a mixed observation in the sense that caregivers and parents serve as a source for both comfort and a source of fear that leads to disorganized behavior. It is noted that children of disorganized attachment may display a confusing mix of behavior and the children may seem dazed and confused being not sure of the steps and actions to take in the event of any happening (Adler-Tapia, 2012). Researchers and experts points out that such kind of attachment arises due to the inconsistent behaviors from the caregivers. It is noted as well such kind of care givers in most of the occasions are normally under a lot of stress resulting them to change their moods and emotions frequently and a result presents confusing interpretations to the children, thus affecting them and defining their attachment patterns.   
Shemmings and Shemmings (2011) in their book Understanding Disorganized Attachment: Theory and Practice of Working with Children and Adultsias affirmed that experts and scholars in child development and psychology matters have outlined four distinct phases of attachment that include pre- attachment stage, indiscriminate attachment, Discriminate attachment, and multiple attachment. In the pre-attachment stage, it is observed that the period takes about three months from the time of birth of the child. In the stage, infants do not show any attachment to a specific caregiver. The infants signal such as fusing and crying attracts the attention of the caregiver and the baby’s’ positive response it is said encourages the care giver to remain close and stay. The next stage occurs between the third month and the sixth month of a child’s life. In Indiscriminate attachment, infants begin to show preferences for primary and secondary care givers. The infants develop trust and a feeling that caregivers will respond to their needs. It is affirmed that at this stage the infant responds positively to primary care giver even though they accept care from other people as well. However, the infants become much better at distinguishing between common and uncommon people. From seven to eleventh month it results in the discriminate stage. The infants in this stage have strong attachment for few specific people. When they come around strangers, they become anxious and curious to try to know the strangers are and it is noted that when an attempt is made to separate them from their primary care givers, the infants protest. Multiple attachments happen after completion of the earlier stated three stages and in this stage, children begin to form strong emotional bonds with other care givers beyond primary attachment figures. It is noted and cautioned out that the process and stages of attachment might seem straight forward but in most situations that is not the case.   
There are a number of factors that shape and determine how the child will develop from one stage to the next. Availability for opportunity for attachment is critical in developing sense of trust and the security attributed to attachment in general. It is pointed out that children who have developed and are raised from orphanage homes might fail to develop sense of trust needed to form an attachment (Bowlby & Winnicott Clinic of Psychotherapy, 2004 ). It is also asserted that the quality of care given to a child will either encourage faster development and attachment or discourage faster attachment with the care givers. Studies indicate that when care givers respond quickly and consistently to their children needs and attention, the children learn that they can depend on them, and it is noted that this is an essential part that builds the foundation for attachment.   
It is proved that attachment for children is of great relevance because failure to form a secure attachment early in life can have a negative behavior later in childhood life and throughout life even when one is an adult. Research has indicated that children behavior and discipline challenges in most situations have displayed and shown attachment problems, and the reason given to such acts is a possible abuse and neglect during their infants and early childhood life. It is for this reason that experts point out those children who are adopted from the age of seven months and beyond have a possibility of increased risk in terms of attachment problems (Berlin, 2005).   
Attachment theory and concepts is also applied to those children with developmental disability challenges. However, it is important to note that the way children with developmental disability responds to attachment is slightly different in terms of time taken to go through the states and patterns observed in attachment development and progress. According to Dianna Manorey (2010) in her article Attachment and the Special Needs Child, she notes that attachment is so critical to a child’s well being , and attachment can be so difficult when a child has special needs. She further notes that parents needs to take extra effort to understand their special child. Manorey cautions out that Parents must watch carefully and learns what each behavior means through patterns, body, and verbal language. The caregivers and family of children with developmental challenges have to learn and try their best to give and show attachment to their children even though it might appear challenging in the first and early stages because the child might not give clear messages that communicate any problem or need. Parents have to believe in their children and empower them by believing in them (Prior, Glaser, & FOCUS (Project), 2006). Professional expertise advice and care need to be consulted as early as possible so that the specific developmental challenges can be detected earlier and diagnosed if possible and necessary measures and steps taken that will enhance and promote attachment of the disadvantaged child. Children with the stated challenges have to get equal measure in terms of attachment like other children so that they can grow and develop to fully exploit their potential and abilities and succeed in life.   
In conclusion, attachment theory and concepts has proved to be critical in the growth and development of children not only in their childhood life and growth but also in adult life. Critical life skills such as self esteem and confidence are shaped early in life that arises from attachment especially secure attachment and has led to success in education and nurturing social relationship. There are four attachment patterns that exist and are shaped by external factors resulting mostly from the care givers characters and attitudes in fulfilling their responsibilities. The guides include secure, avoidant, disorganized, and ambivalent. In attachment development, it undergoes through various stages that include pre-attachment stage, indiscriminate, discriminate and multiple attachment stages. Attachment provided depends of the opportunity available and the quality of the care given to a child. Children with developmental disabilities need to get attached too, and parents as well as care givers of such children need to try their best and seek professional help as soon as they can in the vent they meet challenges. Attachment to such kind of children is very important and it has to dine with a lot caution and care because of the likely possibility of communication challenges realized from such kind of children. From the presentation, attachment has proved to be relevant in successful upbringing of a child; therefore health practitioners should teach and include attachment lessons as part of post maternal health care services so that besides observing health care for the infants babies, their parents toned to be informed that importance of attachment in raising their children.

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