

Bowlby and ainsworth's views on attachment theory



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Attachment is an emotional bond to another person. Psychologist John Bowlby was the first attachment theorist, describing four characteristics of attachment observed in developing children between the ages of six months and two years old. Bowlby believed that the bonds formed as a result of these observed characteristics continued throughout life, becoming a blueprint used in the development of subsequent relationships. Mary Ainsworth, initially conducted research into attachment theory with Bowlby, and later on her own. She expanded the theory to include three styles of attachment (with a fourth being added later). By being responsive to an infant's needs, a caregiver (usually the mother) establishes a sense of security for the infant. Once the infant establishes this feeling of security, it develops a secure base to explore the world.

The definition of attachment, according to Merriam-Webster is "the state of being personally attached: fidelity, affectionate regard" (Attachment-Definition from the Merriam-Webster Dictionary). The basic idea of attachment theory is that if a caregiver (usually the caregiver) is attentive and dependable, then that caregiver's child will be secure in their environment and will use the security of this relationship with the caregiver as a base from which to explore their world. Once a child has established this primary relationship, it uses it as a template for other relationships.

Attachment theory is the result of joint and individual research by John Bowlby and Mary Ainsworth (Ainsworth, 2009). Drawing on concepts from psychoanalysts, developmental psychologists, psychology, and others, Bowlby formulated the basic theory. He introduced a revolutionary way of thinking about how a mother and child bond, and the repercussions of the <https://assignbuster.com/bowlby-and-ainsworths-views-on-attachment-theory/>

disruption of that bond. Mary Ainsworth's methodology with her "strange situation" experiments made it possible to test Bowlby's ideas and ultimately expanded the theory itself (Bretherton, I. 1992). Bowlby believed that the earliest bonds formed by children with their caregivers have a tremendous impact that continues throughout life (Cherry, K. n. d.).

Bowlby and Ainsworth

John Bowlby's work defines attachment theory as "lasting psychological connectedness between human beings" (Bowlby, J. 1969). Bowlby formulated the theory that an infant's attachment to its caregiver came about as an evolutionary mechanism. He theorized that by being closer to its caregiver, an infant is more likely to survive. He also theorized that not only is the infant innately programmed to form attachments, but the caregiver is also programmed to respond (Flanagan, C. 1999). Bowlby believed that the emotional bond formed between a child and caregiver is both powerful and lifelong in their nature, forming when the child is between six months and two years of age (Hayes, n. d.).

Mary Ainsworth expanded on Bowlby's research with her series of "strange situation" experiments (Ainsworth, 2009). In its simplest form, the strange situation occurs while a child is observed playing in a room for 20 minutes as caregivers and strangers enter and exit the room. The idea was to recreate the familiar and unfamiliar circumstances that are present in any child's life. The situation is alternately stressful and calming, and the child's reactions categorize him or her into four groups (Ainsworth, 2009).

Based upon the responses she observed, Ainsworth described three major styles of attachment: secure attachment, ambivalent-insecure attachment, and avoidant-insecure attachment (Brittany, 2010). A fourth category was added later based upon additional research, which is explained later in this paper.

Bowlby's Characteristics of Attachment

Attachment theory defines four characteristics: proximity maintenance, safe haven, secure base, and separation distress (Bowlby, 1969). Proximity Maintenance is demonstrated by how a child will stay near the caregiver, thus keeping the child safe. This is evidenced by what Bowlby termed as attachment behaviors. Clinging, smiling, crying, and following are evolved behaviors meant to increase the bond between caregiver and child, by keeping them in close proximity to one another (Hayes, n. d.). Notice that these behaviors work to draw the caregiver to the child and not the other way around! Separation or threatened separation of the child from the caregiver is what triggers these behaviors. This is termed as separation distress by Bowlby. Once the child feels that the caregiver is close by, he is encouraged to explore his territory. The constant proximity of the caregiver causes the child to regard the caregiver as a safe haven (because the caregiver has been a constant and responsive presence to them). The caregiver, by providing the safe haven to the child becomes a secure base from which the child can begin to explore its world. When the child feels that there is danger nearby he can return to his caregiver. Bowlby defined this behavioral system of moving between 'exploring behavior' and 'safe haven

behavior' as a homoeostatic control system (Bowlby, 1969). Figure 1 is a graphical representation of the characteristics of attachment.

Mary Ainsworth and the “ Strange Situation”

During the 1970's, psychologist Mary Ainsworth conducted further research into John Bowlby's attachment theory in a study that came to be known as “ the strange situation”. The study involved observing children between the ages of 12 to 18 months responding to a situation in which they were briefly left alone and then reunited with their caregiver (Hutchinson, 2009).

Based on these observations, Ainsworth concluded that there were three major styles of attachment: secure attachment, ambivalent-insecure attachment, and avoidant-insecure attachment (Ainsworth, 2009). A fourth style was added later by Ainsworth's colleague Mary Main with Ainsworth's approval.

The first style is “ secure attachment”. A child in this category will explore freely while the caregiver is present. This includes engaging strangers. However, when the caregiver leaves the child, it becomes visibly upset and stops interacting with the stranger. When the caregiver comes back, the child calms down and starts interacting again.

The second style is “ anxious-resistant insecure attachment.” This category is more dramatic. Even when the caregiver is present, the child is anxious when a stranger is around, and becomes upset when the caregiver leaves. When the caregiver returns, the child is resentful and resistant to attention.

The third style is “anxious-avoidant insecure attachment”. A child who exhibits the behavior associated with this style acts indifferent to anyone present. The strangers and the caregiver alike are ignored and receive little attention. This represents a disengaged relationship between the child and caregiver (Ainsworth, 2009).

The last style is “disorganized/disoriented attachment.” Children exhibiting this style often have caregivers that experienced something traumatic after the birth that left them suffering from depression. The disorganized/disoriented child will usually cry when the caregiver leaves, and then freeze or fall to the floor when the caregiver returns. When strangers are present, the child is slightly upset and confused.

Attachment Disorder

What happens when proximity maintenance, safe haven, and secure base aren't present for a child? A child can develop Reactive Attachment Disorder because of neglect, abuse, or just inconsistent response by the caregiver (Leavens, T., & Orlans, M. n. d.). Because of this a child may be unable to attach to a primary caregiver and go through the normal development necessary to function in relationships. Instead of learning to trust as an infant experiencing normal attachment characteristics, an infant subjected to the above responses learns that the world is an unsafe place, and that he can trust no one. He learns that he cannot depend on adults. Children with reactive attachment disorder feel the need to always be in control.

Treatment

Treatment for reactive attachment disorder can involve therapy, counseling, and parenting education. The treatment is tailored to ensure the child has a safe environment, develops positive relationships with their caregivers, and peers. Sometimes medication may be used to treat conditions associated with attachment disorder, like depression, anxiety, or hyperactivity.

Additionally, Family therapy, individual psychological counseling, play therapy, or special education may be used in varying combinations (Smith, M., Saisan, J., & Segal, J. n. d.).

Conclusion

John Bowlby is considered the father of attachment theory. His research into the relationship developed between a caregiver and an infant as an evolutionary homeostatic function produced four characteristics of attachment. Ainsworth built upon the foundation of attachment theory built by Bowlby. Like Bowlby, Ainsworth also believed in the homeostatic systems but took the research further with the strange situation, which splits attachment up into three types: secure, avoidant, and resistant. A failure of this initial relationship/attachment to form can have long term effects on a child's development, resulting in issues such as reactive attachment disorder, in which a child develops a general mistrust of others and has a need to be in control at all times. Treatment can involve the use of medication, counseling, and family oriented therapy to reinforce a feeling of safety and security in the affected person.