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Preface

The 1991 biennial meeting of the Society for Research in Child Development (SRCD) in Seattle, Washington, featured a symposium on the clinical applications of attachment theory. Mary Ainsworth, along with Mary Main and additional speakers, addressed a room filled with attentive participants who were eager to learn how to begin to address attachment concerns in clinical practice. The ideas were fascinating but also challenging: While it was clear that advances in attachment theory and research could have tremendous potential value for clinicians, there was also a clear message of caution regarding the complexities and pitfalls of applying research-based theories and methods in the clinical setting. The field was confronted once again with the perennial sciencepractice gap: High-quality and clinically pertinent knowledge was being accumulated in university laboratories, but this knowledge was not reaching the frontline clinician. This was not only a matter of disseminating research findings. There was the more profound issue of adapting research concepts and methods to clinical work in a way that would maintain their integrity while also being sufficiently flexible and meaningful to meet the complexity of the individual case-be it child, parent, or family.

We were both very familiar with this tension from our everyday work, particularly from our experience teaching attachment theory and research to clinicians. The research papers were filled with information that we felt was extremely valuable and addressed many lacunae in clinical theories, but the leap from these papers to the clinical case was usually left for the reader to venture. The pivotal SRCD symposium and our

belief in the clinical value of attachment research spurred us to organize a series of conferences focused on "bridging the gap" between attachment research and clinical application. The conference series, sponsored by the Children's Center in Salt Lake City, Utah, began in 1999 and has been taking place annually since then. We invited leading researchers/clinicians to talk about how they took the research concepts and methods they were developing when "wearing the researcher hat" and applied them clinically when "wearing the clinician hat." This book is a result of this conference series as well as additional meetings where, as a group, we attempted to tackle the issues inherent in the clinical application of a complex theory (see also the special issue of Infant Mental Health Journal [Vol. 25, No. 4, July-August 2004] devoted to clinical applications of attachment theory in which prior publications emanating from our group were published). Each chapter lays out original ideas, concepts, and methods that represent the state of the art in attachment research, and the authors describe not only the implications of the research for clinical work but also, using clinical case material, how the attachment perspective is actually applied. In other words, the reader is escorted across the science-practice divide by experienced guides familiar with both territories.

It is of course no coincidence that attachment research has yielded so much clinically relevant knowledge. After all, attachment theory has deep roots in the clinical world. It was developed by John Bowlby with the aim of offering clinicians a powerful and scientifically based theory that would replace outdated notions and guide clinical practice. The theory offered hypotheses regarding the origins of psychopathology in early separation experiences as well as other adverse emotional experiences, particularly those embedded in the parent-child relationship. It also offered many insights regarding the appropriate treatment for such psychopathology. These innovative ideas were not met with much enthusiasm by the clinical community, however. In fact, many of Bowlby's colleagues shunned his theory and saw it as irrelevant for their work. The community of academic psychology, however, showed more openness to attachment theory, particularly after the research of Mary Ainsworth, a clinical and developmental psychologist, supported many of Bowlby's notions. Ainsworth's painstaking observations of early interactions between mothers and their infants provided powerful confirmation of Bowlby's hypotheses regarding the function and significance of early attachments. The acceptance of attachment theory grew even more following the publication of Ainsworth's studies of the Strange Situation procedure, an observational paradigm

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designed to assess the security of the affectional bond between infant and parent. This observational procedure opened the way to the reliable assessment of individual differences in attachment and helped define and conceptualize the expression of security and anxiety in early relationships. During the 1980s and 1990s attachment theory became increasingly accepted and influential within the field of developmental psychology, to the point that it is considered by many as the most persuasive theory of early emotional development. Moreover, the influence of attachment theory expanded gradually beyond developmental psychology to include social and clinical psychology as well.

Based on its solid grounding in normative research, the interest in clinical applications of attachment theory began to grow around the mid-1980s. A particularly important additional impetus for these applications was the expansion of attachment research into the representational domain. Marked primarily by the development of the Adult Attachment Interview by Mary Main and her colleagues, attachment research was beginning to address not only attachment bonds as behavioral patterns of the child vis-à-vis the parent, but also the evolution of these patterns into representational models in the mind of the developing child. Attachment research was now tackling the issue of how parents' past relationship experiences, as well as the interaction between them and their children, are reflected in meaning structures in the mind of the child-an issue of great interest and relevance for clinical work. These developments as well as additional influences led to a growing number of clinical attachment studies, with researchers using the concepts and methods developed in normative studies in order to address clinical questions and develop attachment-based interventions. Thus, three or four decades after Bowlby's publication of the first volume of his Attachment trilogy and the nonacceptance of his ideas by the clinical community, attachment research had returned to addressing clinical issues, and the present volume is part of this body of work. But this book tries to take clinical application one step further. The authors of all chapters were asked not only to conceptually apply attachment ideas and methods to clinical issues. In addition, they share with readers how these concepts and methods can be used in the actual clinical encounter, and they illustrate, using case material, the unique contributions of an attachment perspective.

We envision the main audience for the book as clinicians working with children and their families who are interested in deepening their understanding of the clinical application of attachment concepts and the added value of an attachment perspective for both assessment and intervention. While the chapters all provide theoretical and research

background, the book assumes familiarity with the basic concepts and methods of attachment and does not provide an overview of the theory. With the immense advances made in attachment over the past decades, covering the basics of attachment would require a volume in and of itself! Moreover, excellent introductions and reviews of attachment research are available (e.g., Cassidy and Shaver's *Handbook of Attachment* [1999]), and the reader is invited to consult these resources.

The book is also intended for a research audience. Researchers less familiar with the clinical world may find much excitement and satisfaction in the usefulness of research-based methods and ideas for clinicians, and ultimately for the families and children seeking help. In addition, researchers are likely to discover in the pages of this book how clinical applications stretch accepted theories to their limit, expose areas that require additional investigation, and raise new questions for future studies. Bridging the gap between science and practice is not a one-sided effort focused on translating science to practice—it is a two-way street that can benefit the researcher as much as it does the clinician.

OVERVIEW OF THE BOOK

The book is divided into two parts. The first includes five chapters that describe the clinical application of research-based methods, particularly those that focus on assessing various aspects of parenting, and the second includes four chapters that describe psychotherapeutic interventions with children and parents based on attachment principles.

The first chapter, by Charles Zeanah, describes how the author uses an interview designed to assess parents' representations of their children, the Working Model of the Child Interview, as part of the assessment and treatment of a mother–infant dyad presenting with significant relationship difficulties. The chapter provides extended excerpts from the interview, with the clinician's thoughts, observations, and hypotheses presented following the mother's responses. Thus, the reader is provided with an opportunity to "sit on the shoulder" of the clinician and follow the development of his impressions and hypotheses as he uses the interview to better understand the mother's experience of her infant and herself as a mother. The chapter also includes the formulation of the case, how it was shared with the mother, and information about the treatment.

Nina Koren-Karie and colleagues also focus on the representation of the child by the parent, specifically on the capacity for *insightfulness*, that is, seeing the world from the child's point of view. The chapter

describes two mothers of preschoolers referred for treatment that involved their children and themselves, and discusses their pre- and posttreatment Insightfulness Assessments. Using examples from the pre- and posttreatment interviews, the chapter illustrates the specific markers of difficulties in insightfulness, and the gains in insightfulness made by both mothers. The chapter also highlights how, even in the noninsightful pretreatment interviews, positive signs forecasting the gains made by these mothers could be detected—information crucial for developing a balanced view of parents who show significant difficulties being empathic to their children and planning therapeutic work with them.

In the next chapter, Miriam Steele and colleagues apply an attachment perspective to the assessment and treatment of maltreated children who were later adopted. The chapter stresses that careful observations of play interactions between parents and their recently adopted children can identify parental "attachment-facilitative behaviors" that are crucial for the development of the attachment relationships of these severely traumatized children. It also describes how reflecting the insights gleaned from these observations back to the parents can help them gain new and more positive perspectives regarding their children, and overcome their natural tendency to withdraw in response to the seemingly rejecting behavior of these children.

In the fourth chapter, Mary Dozier and colleagues discuss the implications of the commitment foster parents feel toward the children they are fostering for the development of these children. The chapter introduces the This Is My Baby interview, designed to assess the thoughts and feelings of foster parents regarding their foster children. Parents' responses in this interview can be used to assess their level of commitment toward the children they foster, and the chapter provides extensive examples of high, medium, and low commitment. The chapter also reports on child and parent characteristics that may explain why some foster parents are more committed than others, and provides an attachment-based theoretical account of why lack of commitment can have such devastating effects on the development of children in foster care.

David Oppenheim and colleagues discuss in the fifth chapter the emotional processes parents go through after they receive a significant developmental diagnosis for their child, and the powerful impact these processes can have for children's development. Using an attachment framework regarding loss and its resolution, the chapter discusses why lack of acceptance and resolution of the child's diagnosis may have adverse implications for the parent–child relationship. Examples from the Reaction to Diagnosis Interview illustrate the expression of resolution

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in parental interviews, with an emphasis on how both resolution and lack of resolution can be expressed in multiple ways. The chapter also reviews research findings regarding resolution and discusses their implications for clinical work with parents of children who have received a developmental diagnosis.

The second section of the book opens with a chapter by Amy Busch and Alicia Lieberman, who bring together two important lines of research: trauma research, which delineates the harmful impact of traumatic stress on young children, and attachment research, which discusses the importance of secure attachment for moderating the impact of trauma and helping children recover. They stress that a "dual lens" based on attachment and trauma theories is needed for treating young children who have been exposed to trauma. The chapter includes an extensive mother-child case involving two young children who have been exposed to domestic violence and shows how child-parent psychotherapy can be used to disentangle the reciprocal impact of attachment and trauma and return children to a healthier developmental course.

The next chapter, by Bert Powell and colleagues, presents the Circle of Security model, an early intervention program based on attachment theory and research and designed to help caregivers reevaluate their internal representations of the child and the self to match the emotional needs of their children. The intervention is provided in a group format for mothers of young children and makes extensive use of carefully selected and edited video recordings of the child and the mother that are used to enhance maternal reflectiveness. The chapter begins with a review of the intervention model. This is followed by a detailed case that illustrates the implementation of the model, with the authors going back and forth between theory and clinical case material to provide the theoretical rationale for the intervention and to discuss the responses of the mother. The significance of role reversal in parents particularly sensitive to separation is highlighted, as is the therapeutic necessity to help parents experience an "empathic shift" regarding their child's emotional world.

The penultimate chapter, by Douglas Goldsmith, describes a therapeutic preschool program based on attachment principles. The core idea is that the intervention, which combines parent-child work with the therapeutic preschool program, challenges the negative internal working models the young children have formed based on their histories of rejection, maltreatment, and trauma. The chapter explains how these internal working models act as self-fulfilling prophecies and often perpetuate additional negative cycles, even when children encounter new

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and positive social partners. Next, the chapter describes in detail the strategies used in the preschool in order to challenge children's negative expectations and help them experience peers, therapists, and themselves in a new and more positive light. The relationship focus of the intervention is exemplified using the detailed case of a 2-year-old adopted child and her mother. The case illustrates how the child's negative internal working models underlay her fear, extreme aggression, and desperate need for protection. The case also illustrates how the preschool program helped the child feel safe and rely on others, and how parent-child sessions helped the mother appreciate the emotional needs underlying the child's difficult and rejecting behavior.

The book closes with a chapter by Arietta Slade that illustrates the usefulness of "keeping the child in mind" while doing long-term individual work with adults. Slade introduces the concept of disorganized attachment and presents the theorizing regarding its roots in frightened and/or frightening parental behavior as well as in helpless and/or hostile parental states of mind. Next, hypotheses are presented regarding the implication of such experiences for adults' fragmented awareness of painful mental states involving trauma, and these provide the background for the case presentation. The case illustrates disorganization both at the level of the client's relationships with her parents and in her own caregiving. In addition, these difficulties are played out in the relationship with the therapist, leading her to experience much of the emotional dysregulation, fear, and dissociation experienced by the client. Slade finds attachment theorizing and behavioral descriptions regarding the origins of disorganization particularly useful in helping the therapist imagine the client's experience, put it into words that are experience near, and increase empathy for the fear underlying attempts to seek care.

In closing, we hope the readers of this book will share our excitement about the diverse applications of advances in attachment research for clinical work. It is our belief that these chapters elucidate the usefulness of an attachment approach for enhancing our empathic understanding of children, parents, and individuals seeking help to overcome emotional difficulties and relational barriers rooted in their past and current attachment relationships.

REFERENCE

Cassidy, J., & Shaver, P. R. (Eds.). (1999). Handbook of attachment: Theory, research, and clinical applications. New York: Guilford Press.

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