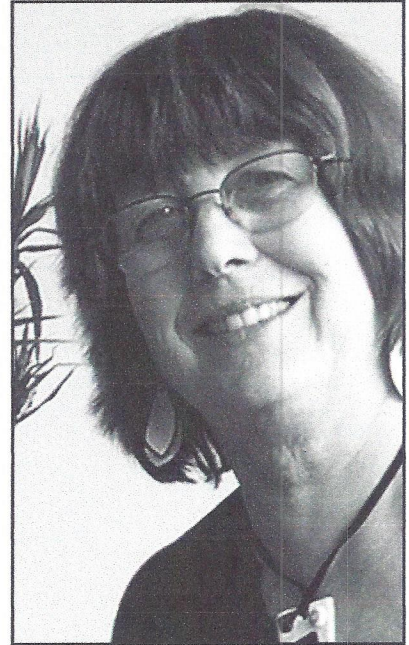


# On ATTACHMENT by Marilyn Morgan



During her lifetime, amongst many things, the late **MARILYN MORGAN** was quite prolific in terms of writing. The following is an article on "Attachment", an area of much study and discussion of more recent times and equally an area so paramount to our work as therapists ...

HEALTHY BABIES ARE BORN TO LOVE, WITH AN INBORN drive towards growth and mental well being. However, the innate genetic inheritance needs the nurture of relationship experience to unfold and to shape the very matter of brain, body and mind. Relationship and attachment experiences are fundamental in human development, and a secure attachment predisposes a person towards a lifetime of mental health, the ability to have fulfilling intimate relationships, and to parent in a way that passes on the secure attachment to their children. Psychotherapy can help repair a brain, mind and body that have not had the advantage of vital supportive, attuned relationships early in life, and can provide missing experiences to reinstate an organic unfolding toward mental wellbeing. The importance of attachment and relationship experiences for development and ongoing mental health is being increasingly supported by research on the brain. Daniel Siegel tells us that mental health is in a tremendously exciting period with a growing consilience among different disciplines including neurobiology, psychotherapy, complexity theory, attachment theory, and research on trauma. Hakomi Psychotherapy is particularly suited to the exploration of attachment experience and the 'earning of a secure attachment'.

## ATTACHMENT THEORY

THERE HAS BEEN A GROWING INTEREST IN ATTACHMENT theory since the pioneering work of John Bowlby, Mary Ainsworth and others. In 1951 Bowlby gave a report to the WHO based on cross-cultural studies of the effects of early deprivation on children. He found that early neglect in a child's life led to a later lack of empathy and behavioural problems, and suggested that these children would likely go on to become poor parents. Developmental psychologists, neuroscientists, psychotherapists, among others, are excited about the continuing research results that are emerging from studies on attachment, and the implications of these for preventative social and mental health, and therapeutic interventions.

ATTACHMENT IS THE DEEP, LASTING BOND BETWEEN a child and those that having a caring, intimate relationship with that child. The nature of the attachment bond, established from the beginning of life, has far-reaching implications for the developing individual over the whole life span. The nature of the attachment experience influences thinking patterns, the body physiology and growth, emotional capacity, life satisfaction, the nature



of relationships, parenting style, and what is held by that individual to be important. Attachment also occurs in animals, between the mother and infant, and animals also become strongly attached to people. People may form powerful attachment bonds to pets, which are sometimes bred to have the characteristics of a baby – flat face, big eyes, small size.

---

**Relationship and attachment experiences are fundamental in human development, and a secure attachment predisposes a person towards a lifetime of mental health, the ability to have fulfilling intimate relationships, and to parent in a way that passes on the secure attachment to their children.**

---

THE BABY IS BORN TO LOVE, AND TO ATTACH. THIS instinct is rooted in thousands of years of evolution, and is based on the need to survive and live as a member of a social group. Dr Peter Cook suggests that humans, like monkeys and apes, are a carrying species who naturally hold their infants and feed them frequently. The mother is the principal caregiver for the baby, supported by other adults who assist. This has been shown to be constant back through time for millions of years, and across cultures. A mother in modern Western-style suburbia might live alone with her baby, unsupported. She pushes the infant around in a pram, the baby often looking out towards the world, out of contact with the mother's body, and not within the orbit of her gaze.

ATTACHMENT THEORY TELLS US THAT BABIES WHO DO not develop a secure bond with the caregiver are far more likely to go on to have a multitude of difficulties that reduce personal life satisfaction, and negatively impact on the health of society as a whole. The human baby is born helpless in so many ways, and much of the neural development in the brain is yet to come. The process of interaction between the mother, and other caregivers, with the baby literally shapes that baby's growth and development. In turn the caregiver is also influenced by the baby; the interaction system being one of mutual regulation.

GENETIC AND ENVIRONMENTAL INFLUENCES ALSO impact on attachment. Some babies, for example, are born more sensitive, or showing a greater degree of shyness. Others are more lively, tough and active. It is important to note, however, that having a secure attachment does not ensure a trouble-free life. Children with a secure attachment history may also experience a range of problems that occur in spite of their positive attachment experiences. These problems may result from a variety of biological, emotional and social influences.

FOR EACH OF US, THE BRAIN, NERVOUS SYSTEM AND body holds the imprints of the truth of our lives. The attachment experience is imprinted into the body; into the cells, the muscles, the neural circuitry. It becomes a profound influence on our life-stories and the way we narrate them, our longings and expectations from others, our limitations along with our habitual patterns and defensive behaviours. Using the mindful, attentive, non-violent techniques of Hakomi we can contact the truth of this history and how it is manifesting in present day life and relationship. Core beliefs formed during those early relationship interactions can be renegotiated making it possible to transform limiting, automatic patterns of being in the world. Reconnection with deep meaning and purpose can occur. The growth of self-esteem and compassion is nurtured, along with the capacity to give and receive love.

***"For the first time in history, we have certain knowledge of the means whereby the capacity for trust, empathy and affection can be shattered in the first three years of life. Quite apart from the question of whether or not trust, empathy and affection are better than mistrust, indifference and hate, the world will not survive many more generations of suspicious, hardened, affectionless individuals. If we are not to die, we are to change."***  
(Michael Mason)

#### **FUNCTIONS OF HEALTHY ATTACHMENT**

THERE ARE MANY PURPOSES BEHIND THE FORMATION of the attachment bond. A secure attachment with caregivers ensures:

- Safety and protection of an immature, vulnerable child
- The development of a feeling of trust in the other which will be a template for future emotional relationships with friends, lovers, partners and children
- That the child feels secure enough to venture out and explore the environment, thus enabling he or she to be curious and to expand cognitive and social abilities

- The development of the ability to regulate emotions and impulses
- A healthy sense of identity and feeling of self-worth
- A balance between being able to depend and be independent
- Development of the capacity to be compassionate, empathic and to self-reflect, and to show 'theory of mind'
- Core beliefs that support a satisfying life that sustains mutually healthy social and intimate relating, and the ability to form and maintain friendships
- Resilience to deal with life stresses and challenges

---

**The attachment experience is imprinted into the body; into the cells, the muscles, the neural circuitry. It becomes a profound influence on our life-stories and the way we narrate them, our longings and expectations from others, our limitations along with our habitual patterns and defensive behaviours.**

---

#### **NECESSARY CONDITIONS FOR SECURE ATTACHMENT**

ATTACHMENT OCCURS IN THE CONTEXT OF relationship. Relationship and connection continues to be the fundamental influence on a person throughout life. A secure attachment style is formed early in life, when the following conditions are present in an attuned, loving way:

- Touch. Touch communicates love and caring, security and containment, and forms the foundation for the appreciation of boundaries.
- Eye contact. The gaze between the baby and the caregiver is of vital importance in the release of hormones and substances that allow feelings of closeness and intimacy, comfort and care, as well as influencing neural development.
- Smiling and positive emotional state. The smile of

the baby rewards the caregiver, stimulating feelings of warmth and care. The smile of the caregiver helps the baby to feel welcome and secure. The positive emotional state is communicated through tone of voice, hand gestures, posture, movement, and is part of the 'limbic resonance' that flows between caregiver and infant. This 'limbic resonance' is a sub-cortical communication that is a vital part of satisfying emotional relating throughout life.

- Responsiveness to needs. When the baby's needs are met arousal and stress remain within manageable levels. The child, who feels 'bad' because of physiological distress, grows to feel 'bad' or 'wrong' as a person.

#### **INSECURE ATTACHMENT**

THE CHILD WHO DOES NOT DEVELOP A SECURE attachment is likely to experience problems in the following areas, showing:

- Low self-esteem
- A tendency to avoid others or be overly clinging to others
- Overwhelm when stressed
- Poor ability to manage impulses or strong emotions
- Problems with friendships
- Feelings of alienation or hostility in regard to family and authority figures
- Antisocial behaviour, aggression and violence
- Mistrust in others
- Depression, despair and hopelessness
- Poor conscience, overblown, or little, sense of entitlement
- Inability to feel compassion or empathy
- Negative parenting behaviour later in life

***"One essential message is that the developing mind uses the states of an attachment figure in order to help organize the functioning of its own states."***

***(Daniel Siegel)***



		DEPENDENCE	
		LOW	HIGH
AVOIDANCE	HIGH	SECURE/ SECURE	AMBIVALENT/ PREOCCUPIED
	LOW	AVOIDANT/ DISMISSING	DISORGANISED/ UNRESOLVED

(Model based on Bartholomew, 1990)

### CHANGING ATTACHMENT STYLE FOR ADULTS

ROBERT KAREN IN HIS BOOK, 'BECOMING ATTACHED' suggests the following ways of addressing and repairing early attachment issues that are now limiting the adult.

- Mourning losses
- Addressing and resolving shame
- Experiencing a new relationship model (in therapy or intimate relationship)
- Reflection on the patterns of relating behaviour, emotions, and re-examining from an adult perspective
- Developing the positive patterns of relationship, and practicing these

KAREN SAYS, "A GROWING BODY OF EVIDENCE INDICATES that these three variables – having had a loving, supportive figure available in early childhood, having undergone in-depth psychotherapy, and/or being in a stable relationship with a supportive spouse – are perhaps the most important elements in breaking the intergenerational cycle of emotional damage" (p405)

#### OTHER WRITERS SUGGEST:

- Having a baby is an opportunity for change. (Selma Fraiberg)
- Experience early wounding, express anger, and give up the illusion of having had a happy childhood. (Alice Miller)
- Use of immersive transference. (Karen Walent)
- Working to change together within a committed marriage (Harville Hendrix)

*We cannot change our childhood. But we can let go of the defensive and obsessive postures formed at that time. We can make sense of what has been repressed and forgotten. We can re-experience dissociated feelings with a new appreciation for ourselves as we were as children, for the situation that existed at that time, for the parents who may have caused us to suffer. And we can successfully mourn our losses ... it seems that in emotional life, much as in history, we are only doomed to repeat what has not been remembered, reflected upon, and worked through."*

(Robert Karen, 1994, p408)

FOR FURTHER INFORMATION ON ATTACHMENT STYLES and therapy I recommend the following reading

- ***Becoming Attached***  
by Robert Karen
- ***The Developing Mind***  
by Daniel Siegel
- ***Creating the Capacity for Attachment***  
by Karen Walant
- ***Attachment, Trauma and Healing***  
by Terry Levy and Michael Orlans ■

—MARILYN MORGAN

MARILYN MORGAN, SRN, B.A.,  
M.A. Psychotherapy, MNZAP  
was a Hakomi trainer and psychotherapist based in Napier, Hawkes Bay, New Zealand. A leading force in establishing Hakomi in New Zealand, Marilyn had a special interest in interpersonal neurobiology. Originally from a nursing background, where she was also a nursing and community education tutor, she began practising psychotherapy in 1981 and developed a particular interest in trauma recovery and in the use of art as a therapeutic tool. Marilyn passed away in July 2008 and is sadly missed by the Hakomi community.