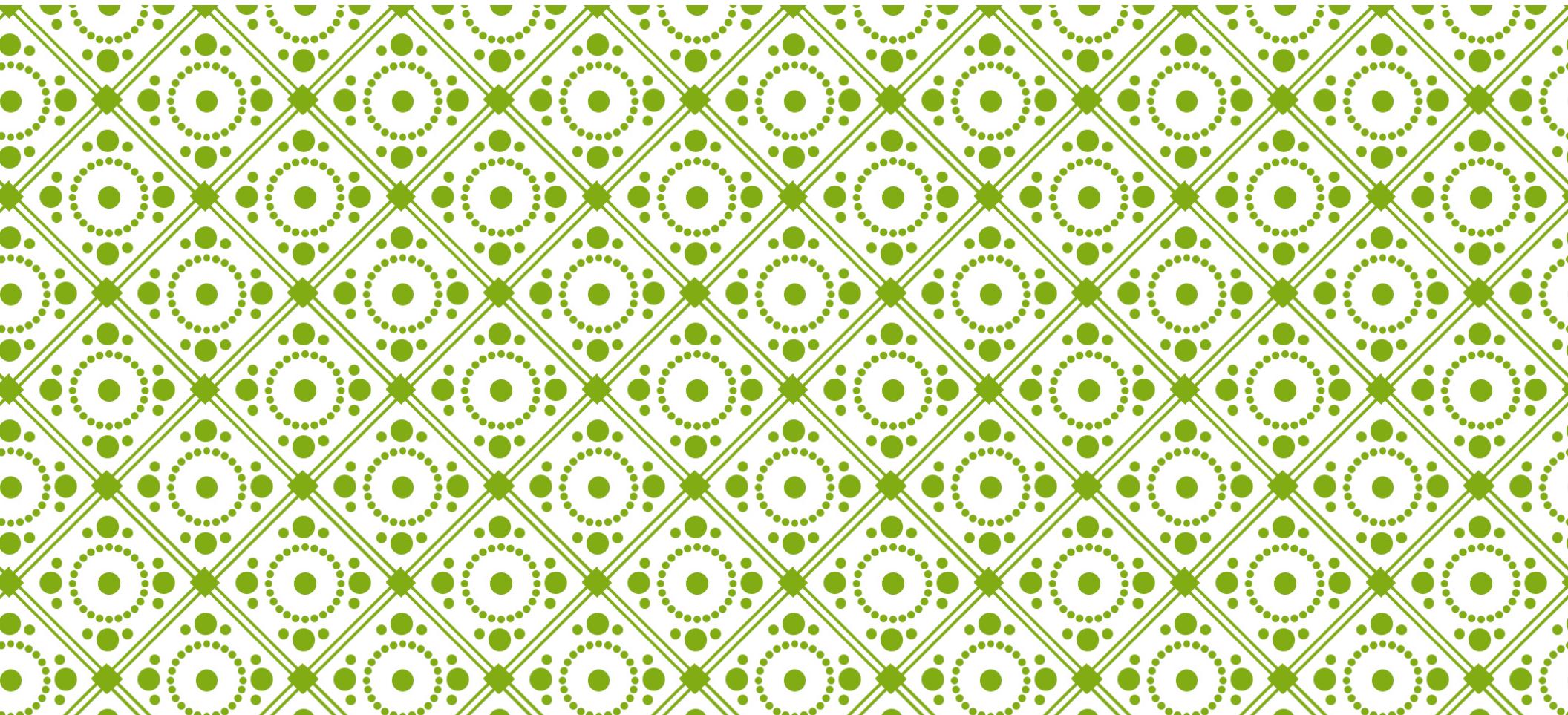




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ATTACHMENT AND VIOLENCE

The association between
insecure attachment and
violent behaviors

THE CREATION OF PRIMARY ATTACHMENT THE INTERNAL WORKING MODEL

Secure attachment begins at birth and is created by consistently responsive interactions with the caregiver.

Secure infant attachment leads to the development of an internal working model of the self as valuable and worthy of love and the environment as a secure and responsive place.

Securely attached infant will develop an internal working model of the self as valuable and worthy of love and the environment as a secure and responsive place. Sense of security based on the proximity and availability of the caregiver.

If the caregiver rejects the infant consistently and is unreliable in care giving, the infant will construct an internal working model of the self as unworthy and others as hostile. Because the infant does not experience a basic sense of security, he or she does not develop the expectation of self-care and nurturing.

ATTACHMENT CLASSIFICATION

sworth (1969) created the strange situation test to classify attachment in children

Secure attachment. A child who exhibits a healthy attachment to a parent is likely to present a representational model of an attachment figures(s) as being available, responsive, and helpful. Briefly upset when mother left the room, but quickly recovered and went on to explore their surroundings. When mother returns, these infants share a happy and positive interaction with her.

Anxious/Avoidant attachment. Caregiver is insensitive and rejecting of their needs. The child does not seek out the parent when distressed. These children, in the strange situation, avoid the mother when she returns, but have clearly been anxious, and look for her when she is gone.

Anxious/Ambivalent attachment. Inconsistent in seeking out mother when she leaves, and experience inconsistent responses to the emotional distress. They appear anxious when the mother leaves, but are hesitant to reciprocate the response of the mother when she returns, and lash- out at mother when she attempts to respond to the infant.

ADULT ATTACHMENT CLASSIFICATION

Adult attachment interview Collins & Read, 1990

measures three dimensions underlying adult attachment styles

Close; the extent to which an individual is comfortable with closeness

Depend; the extent to which one feels that they can depend on others

Anxious; the extent to which one feels anxious or fearful about being abandoned or left alone

also identifies the relationship between these dimensions and cognitive working models of self and others by connecting core components of the internal working model and core components of attachment classifications

What does insecure attachment look like in adults?

INSECURE ATTACHMENT EFFECTS ON THE ADULT

an insecurely attached child becomes an insecurely attached adult, their view of the world as unsafe and unpredictable, along with the view of themselves as unworthy or un-loveable sets the stage for choices and behaviors that can have adverse consequences for themselves and others

Secure attachment has been linked with symptoms of anxiety, emotionality and problematic internalizing behaviors in children, adolescents as well as adults, along with the adult problems of responsive parenting, impulsivity and unsatisfactory relationships (Atkinson & Zucker, 1997)

ability to recognize and regulate one's emotions effectively has also been found to be more prevalent in insecurely attached individuals, resulting in poor decision making and impulsivity

RISK FACTORS FOR INSECURE ATTACHMENT

- Parental anger/lack of responsive mirroring (Fonagy & Target, 1997)
- Maternal mental health(Radke-Yarrow, 1985)
- Environmental Factors - Poverty (Urban, et al., 1991)

REFLECTIVE FUNCTIONING

Insecure attachment disrupts this normal development including the capacity for reflective functioning

Reflective functioning (Taubner, White, Zimmerman, Fonagy & Nolte, 2013) is defined as an individual's ability to understand their own mental states and the mental states of others.

Isasi et al, (2005) examined the relationship between attachment, reflective functioning and impulsive aggressiveness in a sample of 466 outpatient clients at a clinic specializing in personality disorders. Significant association between insecure attachment, deficits in reflective functioning and impulsive aggression leading to violence.

Significant negative relationship between the level of attachment security (i.e. confidence in the relationship) and levels of aggression. Those who rated as preoccupied with relationships, anxious/ambivalent attachment style), also scored high on aggressive personality features.

EFLECTIVE FUNCTIONING AND SOCIAL COMPETENCY

reduced ability to respond appropriately in a social context positively correlates to history of childhood maltreatment (Taubner, 2003). The ability to effectively interpret one's social environment affects how a person responds in a particular situation.

ability to adequately understand another's intentions is critical for;

determining the quality and type of social interaction

esponding appropriately in social exchanges is a social competence critical to maintaining relationships.

THE COST OF VIOLENCE

In 2008, \$74 billion was spent on corrections related costs in federal prisons. (Center for Public Policy research, 2010).

Approximately 54% of these prisoners have committed violent crimes (Bureau of Justice, 2010).

Although it is certainly true that not all people who commit violent crimes have an attachment disorder, it is more likely that a person with an insecure attachment will become violent.

The Bureau of Justice reports that nationally, in 2009, 198 violent crimes were reported per 100,000 people.

During this same year, 54% of prisoners in the nation had been convicted of violent crimes against others. Children who have been in foster care due to removal from abusive homes make up about 70% of the prison population (Bureau of Justice, 2010).

Of this 70%, 40% of those individuals have been diagnosed with attachment related disorders during their time in foster care (Barth, 2005).

Impaired working model due to lack of attachment



Perceptual experience across development



Reflective incapacity/
Violent behaviors

What experiences were most impactful?

What could have made a difference in self perception?

How does a person with a violent criminal history perceive the attachment relationship?

research

Constructivist grounded theory – reflective of the social constructivist paradigm, in which theory is produced through a co-construction of the researcher and the participants world views(rodwell,1998) captures the perceptions that have been created by the distortions of the early cognitive model that formed the filter for perceptions throughout development

Method of study;

Comparative study with 4 groups

Participant a was classified as insecurely attached with a history of violent crime

Participant b was classified as insecurely attached and did not have a history of violent crime

Interviews questions are designed to elicit responses regarding connections between insecure attachment and violence based on the participants perceptions of their childhoods.

RESULTS

Final emergent themes were;

Aggressive and non-responsive environments in childhood including hostile atmosphere, rejection, neglect

A lack of trust in their childhood environments including unpredictability in adult's behaviors, inconsistent discipline, instability

Examples; KS, JG

Further research to include larger sample size

APPLICATIONS

Increased recognition of parents who are risk for ineffective parenting that could result in insecure attachment

Better understanding of long term impact of insecure attachment across development

Education of mental health professionals regarding recognition of thought patterns and patterns in relationships that are consistent with insecure attachment

Targeted and accessible prevention/intervention for parents coping with risk factors such as poverty

Increased understanding of the genesis of criminal violence

Better informed treatment programs for juveniles as well as adults

WHERE IS THE PREVENTION/INTERVENTION?

Attention has been paid to recognizing behaviors demonstrated by a child or potential vulnerabilities within a family that could allow for early intervention to reduce the risk for the long-term effects of insecure attachment.

Winnicott & Orlans (1999), suggest that interventions for helping families with children with attachment difficulties be based on;

Attachment focused assessment and diagnosis

Specialized training and education for caregivers

Treatment for children and caregivers which facilitates secure attachment

Community intervention and prevention programs for high-risk families.

Community intervention and prevention programs are aimed at adoptive parents or teachers that are very costly and would not necessarily be accessible to low income families or those that do not have the ability or resources to access this type of information.

RECOMMENDATIONS ACCESSIBLE PREVENTION/INTERVENTION

In-home prevention programs that address the vulnerabilities for insecure attachment. Prevention of insecure attachment by working with families who;

include a parent with a history of insecure attachment

first time parents

parents who may have a mental illness

parents who are vulnerable due to high environmental stressors such as poverty

Questions or Comments?

THANKS FOR ATTENDING CHEERS!

