The Integration of Art and Science:

A Comparison of Individual Psychology and Attachment Theory:

Theoretical Constructs and Therapeutic Techniques

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Abstract

Adlerian psychology may be distinguished from clinical psychology in several significant ways. Adlerian theorists’ view of human nature is non-pathologizing, their approach to human understanding is socially embedded, and their therapeutic approach focuses primarily upon addressing the contents of individuals’ internal mental models of reality in order to evoke change. Attachment theory and emotionally focused therapy are quite similar to Adlerian theory and therapeutic practice in all of these aspects, but, like clinical psychology, they also benefit from decades of scientific research.

This paper traces the development of attachment theory across the span of a half century. Comparisons between it and Adlerian theory are then made to highlight both similarities and differences. Emotionally focused therapeutic techniques are also compared with those of Adlerian therapeutic techniques in like manner. Future opportunities for integration and collaboration are briefly discussed.
The integration of art and science: A comparison of individual psychology and attachment theory:

Theoretical constructs and therapeutic techniques

Unbeknownst to me, I first became enamored with Adlerian psychological concepts at approximately age 12 when I first began asking myself questions like, “Why do people do what they do?” and “What is going on behind everything that I see?” Attending my first Adler Graduate School class back in the Fall of 2006, I immediately realized I had found others whose basic outlook on the world and theories of human nature were similar to my own.

That being said it has become apparent to me that Adlerian theory has in some ways aged very well, and in other ways not. That is, I have discovered numerous facets of Adlerian theory (acknowledged or not) coursing through many modern therapeutic approaches. I am not alone in this. Prochaska and Norcross (1994, in Sweeney, 2009) have noted:

**Adler was clearly ahead of the learning curve in psychotherapy. His social recasting of Freudian theory predated the evolution of psychodynamic therapy; his task assignments foreshadowed the development of behavioral and other directive therapies; his specific techniques involving imagery “as if” anticipated the cognitive therapies; and his community outreach and psychoeducational programs foreshadowed contemporary community mental health. Many of Adler’s ideas have quietly permeated modern psychological thinking, often without notice. (p. 4)**

On the other hand, however, many Adlerian theoretical constructs, in a field where research is currency, have not been, and are not being, rigorously exposed to scientific inquiry. Sweeney (2009) states:

**There has been inadequate definition of concepts such as social interest, lifestyle, or encouragement, and as a consequence, developmental issues with instrumentation to measure the concepts remain. Research also tends to have had inadequate methodological considerations, including matters such as age, gender, and cultural representations. (p. 25)**
This fact has left me in a dilemma. On the one hand I find myself constitutionally opposed to the psychological approach to therapy that is so well-suited to scientific inquiry, namely, the atomization of psychological disorders into little more than lists of symptoms best represented by the contents of the Diagnostic and Statistical Manual IV-TR. On the other hand, however, I very much desire to base my own practice, at least in part, on a theory and techniques which I know are both grounded solidly in, and still being improved by, modern academic research. I have written this thesis to begin addressing this issue.

During the course of my research I found many parallels between attachment theory and Adlerian theory, especially those that matter to me most, specifically:

1. A theoretical lens that emphasizes the contextual embeddedness of every individual
2. A therapeutic stance that is non-pathologizing, collaborative, curious, and encouraging
3. A therapeutic model that identifies our internal working models/schemas of apperception as the source of many human maladies

The theoretical constructs of attachment theory, however, have been well-researched for decades and continue to provide inspiration today. Therefore, I have devoted my thesis to comparing the tenets of individual psychology with those of attachment theory in order to determine how the two may overlap.

To begin our journey, I will delineate the theoretical constructs of attachment theory by summarizing research spanning from its original formulation in the 1950’s through this present decade.

Chapter 1: Attachment theory: Theoretical foundations and ethological research

John Bowlby, the founder of attachment theory, characterized it, first and foremost, as an ethological approach to human understanding. That is, attachment theory, at its outset, was based primarily upon the systematic observation of human behavior (Bowlby, 1988). Perhaps for this reason it correlates well with other theories based upon the same approach, most notably evolutionary biology.
Attachment theory is based upon the premise that individuals are born with an innate need for attachment, which, it is hypothesized, originally evolved to protect our ancestors from danger in a hostile environment. Infants exhibit a variety of attachment-seeking behaviors when feeling threatened, such as crying, clinging, etc. to which, in an ideal situation, their attachment figures respond by providing comfort and solace until the perceived danger has passed. In so doing, they provide what Bowlby termed a “secure base” – a foundation of physical and emotional security from which infants can venture out to explore their surroundings.

Bowlby’s key contribution to psychological thought lay in his elevation of attachment and attachment-related behavior to the level of psychological construct. Just as Freud had postulated that human beings are motivated largely by unconscious dueling forces, and Adler postulated that human beings are driven largely by the urge to mitigate perceived feelings of inferiority, so Bowlby postulated that human beings are innately driven to attach, first to caregivers in infancy, and later to romantic figures, children, friends, etc.

Attachment and the parent-child bond

Bowlby’s original insights sprang primarily from two sources. His first source of inspiration was a year spent working for the World Health Organization researching “the adverse influences on personality development of inadequate maternal care during early childhood...(and) the acute distress of young children who find themselves separated from those they know and love” (Bowlby, 1988, p. 32).

At first, Bowlby attempted to make sense of what he observed using the lens of object-relations theory (a modernized version of Freudian theory), which stated that children bond to their caregivers primarily because it is they who supply them with food. According to object-relations theory food (and mother’s breasts) were thought to be the objects of the infant’s desires. The dependent (oral) relationship that ensued was assumed to be a secondary offshoot.
This hypothesis was not confirmed by Bowlby’s observation of the facts, however. For instance, object-relations theory, if correct, would predict that an infant would readily bond with whomever was supplying him or her with food. Bowlby and other researchers, however, observed that this was not the case – that infants express a preference for their mothers regardless of food source (Bowlby, 1988).

It was during this period of theoretical discontent that Bowlby stumbled across his second source of inspiration – some research describing the relationships observed between geese and their offspring. Although completely instinctual, Bowlby realized that the parent-offspring bond formed by water fowl closely resembled many of the central characteristics of the parent-child relationships he was studying for the World Health Organization. It was the synthesis of these two experiences that led Bowlby to postulate that attachment, in and of itself, was a fundamental human need independent of other biological needs for food, water, shelter, etc. (Bowlby, 1988)

Theory into research: The role of Mary Ainsworth

Although attachment theory was originally formulated by John Bowlby, it was Mary Ainsworth whose research firmly established attachment theory as an empirical science. Their conversations, over the course of 40 years, served to continually enhance and refine Bowlby’s original theory through empirical observation and research. Regarding their relationship and Ainsworth’s role, Sir Richard Bowlby, John Bowlby’s son, is said to have remarked:

They were the dynamic duo. You couldn’t say who did the theory anymore than you could say of a set of stairs, this one’s part of the staircase, but the one above isn’t. Their relationship was one long conversation. Without Ainsworth my father would have been a shadow...[though] without my father Ainsworth would have been nothing (R. Bowlby, personal communication, 2004 quoted in Wallin, 2007)

Mary Ainsworth and John Bowlby originally met in London after she answered an advertisement Bowlby had placed in the Times seeking a researcher interested in investigating the psychological impact
on children of early separation from their mothers. Her early research confirmed many of Bowlby’s core theoretical tenets. She also made many contributions of her own that proved to be invaluable. (Wallin, 2007)

Ainsworth’s first insight of note is that the inborn, biologically driven attachment system postulated by Bowlby is, in fact, environmentally malleable. That is, parents’ behavior toward their children in infancy is critical to their lifelong development, and that, distinct from gosling offspring, human offspring will develop differently depending upon the way in which they are raised.

Over time, Ainsworth classified the infant bonding behavior she observed into a series of “attachment styles”. She was also able to eventually identify parenting attributes that were closely correlated to the development of each of those styles.

Ainsworth launched her first longitudinal observation of the development of infant attachment patterns in Uganda in 1953 (Wallin, 2007). Over the span of 18 months she observed 26 families with very young children. She determined that attachment develops in a series of stages. Initially an infant’s bids for caregiver attachment are indiscriminate. However, from approximately the age of 6 to 9 months each infant develops a clear preference for his or her mother that, if all goes well, culminates in a powerful parent-child bond.

Unfortunately, all does not always go well. Shortly into her research in Uganda, Ainsworth began observing infants whose attachment mechanisms appeared to be malfunctioning to one extent or another.

Ainsworth observed that infants lacking what she eventually termed a secure attachment style seemed to fall into two groups: those who seemed preoccupied with their mothers’ whereabouts at all times and who largely failed to explore their surroundings, and those who exhibited almost no attachment-related behavior whatsoever (Wallin, 2007).
Ainsworth relocated to the United States in 1963 and established a lab in Baltimore to continue the research she had originally begun in Uganda. She began by replicating her original longitudinal study and achieved similar results: the majority of infants exhibited a secure attachment style characterized by positive emotions and active exploration in their mothers’ presence while two minority groups of children varied from this behavior pattern.

Ainsworth’s Baltimore research results demonstrated the cross-cultural validity of Bowlby’s key theoretical constructs. She next turned her attention to investigating the three distinct attachment styles she had originally identified. To do so she developed the research technique that still bears her name – the Ainsworth Strange Situation. (Wallin, 2007)

In order to study infants’ attachment styles Ainsworth first had to develop a procedure in her laboratory that would trigger attachment-related behavior. She did so by inviting mothers and their infants to participate in a structured assessment lasting roughly 20 minutes. During these 20 minutes both infant and mother were introduced to an unfamiliar (“strange”), but otherwise pleasant toy-filled room. Ainsworth and her colleagues then observed the behavior of each infant while his or her mother was present, his or her behavior during his or her mother’s absence and upon his or her return, and his or her behavior when another caregiver (but not the infant’s mother) entered the room.

As predicted, the Ainsworth Strange Situation proved sufficient to activate attachment-related behavior and helped her further differentiate the three attachment styles she had originally observed in Uganda and Baltimore (Wallin, 2007).

Secure, anxious, and avoidant attachment styles

Ainsworth’s research in Baltimore enabled her to distinguish amongst three distinct infant attachment styles ranging along a spectrum of behavior featuring, at the one end, exploration, and at the other, attachment seeking. She determined that the majority of babies, whom she termed securely attached, were most able of the three groups to flexibly move from pole to pole as the situation
warranted. When immersed in the strange situation they were comfortable exploring while their mothers were present. When their mothers left, however, they quickly began exhibiting attachment-seeking behavior such as scanning the room for her, crying, etc. Upon their mother’s return they briefly sought consolation before soon turning to resume their exploration.

Anxiously attached infants, on the other hand, were unable to explore their surroundings to the same extent as their securely attached peers. Whether their mothers were present or not, they continuously concentrated their attention on her whereabouts at all times. Upon reunion with their mothers after a brief absence, they were the most difficult to soothe and console. Some exhibited extreme anger oscillating between intense attachment seeking behavior one moment while pushing their mothers away and/or throwing a temper tantrum the next. Another group of infants classified in this same category reacted to their mothers’ absence and reunion with extreme passivity. They failed to explore the room full of toys regardless of their mothers’ presence or absence. Reunion with their mothers did little to ameliorate their suffering to terminate their preoccupation with their mother’s whereabouts (Wallin, 2007). To Ainsworth it appeared as if these infants continued to search for consolation from a mother who was not there even as their physical mothers attempted to console them.

Avoidantly attached infants behaved quite the opposite of their anxiously attached peers and represent the other extreme of the spectrum. These babies seemed quite content to explore regardless of their mothers’ presence or absence and exhibited little or no attachment-seeking behavior upon their mothers’ return. Further exploration, however, revealed physiological distress. The heart rates of avoidantly attached infants rose in correlation with those of their more visibly distressed securely attached peers when their mothers were absent. Their cortisol levels also rose during these periods of separation and remained elevated after those of their securely attached peers had returned to normal levels. Ainsworth concluded that avoidant infants experienced the same stress as their peers upon
separation from their mothers but had determined that attachment-seeking behavior failed to provide them with the solace they sought and had thus ceased to seek it (Wallin, 2007).

The impact of parenting on attachment style

Ainsworth’s research on attachment styles and parent-child relationships revealed that communication between mother and infant were key. In particular, she realized that the quality of communication that existed between mother and infant was directly correlated to infants’ attachment styles (Wallin, 2007).

Securely attached infants’ relationships with their mothers are both fluid and collaborative. That is, the mothers of securely attached infants respond appropriately to their children’s needs as they express them. For instance, upon reunion with their mothers in the Ainsworth Strange Situation, securely attached infants often exhibited intense attachment seeking behaviors (crying, moving towards their mothers with upraised arms), pressed into their mothers’ bodies quite closely while being consoled, and then began to exhibit restlessness after their attachment needs had been met. Mothers of these infants responded in kind by swiftly moving towards their infants when they exhibited attachment-seeking behavior, holding their infants securely during a period of solace, and then releasing their infants to continue exploring the room after they started to become restless (Wallin, 2007).

Bowlby coined the phrase _attunement_ to describe such collaborative mother/child behavior and theorized that adult humans are biologically disposed to respond to infants and their needs. For instance, he observed that behavioral exchanges which take place between mother and child when nursing are nearly universal. During phases in which the infant actively draws milk the mother is generally quiet and inactive. Once feeding stops, however, the mother typically begins caressing and/or talking to her infant. Likewise, Bowlby observed that when a mother and infant enter a new environment, the attention to which they pay new and novel objects is highly synchronized. Typically the mother follows the child’s lead. When an infant’s attention alights upon one particular object or
another the mother is likely to comment on it, perhaps by describing it, providing its name, or manipulating it in some way for her child (Bowlby, 1988).

The mother-child relationships possessed by insecurely attached infants stand in stark contrast with those of their synchronously and securely attached peers, however. The mothers of anxious infants, for instance, were observed to attune themselves to their infants’ needs only intermittently. Although they neither abused nor rejected their children outright they were neglectful, making themselves only occasionally available to respond to their infants’ needs (Wallin, 2007). Ainsworth hypothesized this was the reason their infants exhibited more attachment-related behavior. Receiving solace from their mothers only intermittently they learned that they had to make longer and more forceful requests than what did their securely attached peers.

The mothers of avoidant infants were more physically reserved, if not hostile. They were observed to rebuff their infants’ bids for affection, withdraw when their infants appeared sad, avoid significant amounts of physical contact and seemed emotionally self-inhibited (Wallin, 2007). Ainsworth hypothesized it was for this reason that their infants appeared to have abandoned their attachment activation systems, having learned through repeated trial and error that its repeated use brought no comfort or solace.

The fourth attachment style: Disorganized attachment

Mary Ainsworth’s ongoing study of mother-child attachment attracted many researchers talented in their own right. The one whose research would most significantly advance attachment theory and research was Mary Main. Before more specifically discussing her research and its overall impact on attachment theory, we should note at this point, that working in collaboration with Mary Ainsworth, Mary Main discovered a fourth attachment style approximately twenty years after Ainsworth classified her original three.
Mary Main named the fourth attachment style *disorganized* attachment (Wallin, 2007). She discovered it while reviewing 200 hours of videotape of infants whose behavior defied classification in the original styles. Disorganized infants display behavior in the presence of their mothers that is otherwise inexplicable, contradictory or outright bizarre. It appears to contain a combination of both anxious and avoidant attachment styles (Wallin). For instance, a disorganized infant may be observed, upon reunion with their mother, to freeze in place, collapse to the floor, back towards their mother, stifle screams and/or fall into a trance-like state. Main hypothesized that infants form a disorganized attachment style when they perceive their mothers to be both the solace from and the source of danger, and cannot determine whether to obtain safety by either approaching or recoiling. Infants often form disorganized attachment styles when they are being physically abused by one or both parents and/or when they live in a “high risk” home environment featuring such stressors as poverty, psychiatric illness, substance abuse, etc. (Wallin).

Mary Main’s most enduring impact upon attachment theory, however, was her research that shifted focus from the “external world of interpersonal interaction to the internal world of mental representations” (Wallin, 2007, p. 25). Mary Ainsworth’s original research was based upon observable behavior. Infants were classified with one of three attachment styles depending upon their reaction to the Ainsworth Strange Situation. Main’s research, however, was designed to investigate the long-term psychological ramifications of attachment styles – Bowlby’s “internal working models” (Wallin).

*Chapter 2: The transition from the ethological to the psychological*

Internal working models may best be described as mental constructs that permit an individual to recognize patterns of attachment-related behavior that have been observed in the past and thereby predict what will occur in the future. They both influence and are influenced by human interaction. Bowlby theorized that internal working models may be “updated” by new and altered relationships, but that they often resist revision, in no small part because they operate largely outside of conscious
Main, Kaplan, and Cassidy (1985) posited that internal working models possessed the following characteristics:

1. Internal working models are mental representations that include affective as well as cognitive components.

2. They are generalized, mental representations of attachment-related past events (e.g. attempts to access mother during periods of duress.)

3. They have an existence outside of consciousness as well as a propensity for stability.

4. The contents of internal working models are consistent with infants’ attempts to gain proximity to their attachment figures i.e. infants with different attachment styles will develop different internal working models to match.

5. Different internal working models, expressed by differing attachment style behavior, is evident in infants as young as one year old.

6. Internal working models are not exclusively dependent upon the behavior of an infant’s attachment figure per se. They are the result, rather, of the sum total of an infant’s attempts to connect and may change, therefore, over a period of prolonged absence from the attachment figure i.e. multiple failed attempts to connect.

7. Internal working models of relationships provide rules and rule systems for the direction of behavior, attention and memory. These rules shape an individual’s perceptions of self, the attachment figure, and the relationship between them. They are also reflected in the organization of thought and language as it relates directly or indirectly to attachment. Many are unconscious.

8. Prior to the onset of a child’s ability to operate formally (e.g. to think logically and externalize) it is possible that internal working models or relationships can be altered only in response to changes in concrete experience. After the onset of a child’s ability to
operate formally it is possible that the internal working models formed by
relationships earlier may be altered via the power of self-reflection.

9. While internal working models tend towards stability they should not be conceived as
templates. Rather they should be thought of as structured processes that serve to allow
or limit access to information and thereby shape individual perceptions.

Main et al. (1985) stated her beliefs that internal working models could not be witnessed
directly. Given this limitation, and her assumption that internal working models function largely
subconsciously, Main’s first challenge was to develop research techniques that would allow her to
measure that which could not be observed with the naked eye. She did so by developing the Adult
Attachment Interview (AAI), an instrument designed to assess an adult’s internal working model of
attachment.

The AAI is a series of questions designed to be conducted by a trained researcher in a loose
interview format. Questions include:

1. To begin with, could you just help me to get a little bit oriented to your family – for
example, who was in your immediate family, and where you lived?

2. Now I’d like you to try to describe your relationship with your parents as a young child,
starting as far back as you can remember.

3. Could you give me five adjectives or phrases to describe your relationship with your
mother/father during childhood? I’ll write them down, and when we have all five I’ll ask
you to tell me what memories or experiences led you to choose each one.

4. To which parent did you feel closer, and why?

5. When you were upset as a child, what did you do, and what would happen? Could you
give me some specific incidents when you were upset emotionally? Physically hurt? Ill?

6. Could you describe your first separation from your parents?
7. Did you ever feel rejected as a child? What did you do, and do you think your parents realized they were rejecting you?

8. Were your parents ever threatening towards you – for discipline, or jokingly?

9. How do you think your overall early experiences have affected your adult personality?
   Are there any aspects you consider a setback to your development?

10. Why do you think your parents behaved as they did during your childhood?

11. Were there other adult who were close to you – like parents – as a child?

12. Did you experience a loss of a parent or other close loved one as a child, or in adulthood?

13. Were there many changes in your relationship with your parents between childhood and adulthood?

14. What is your relationship with your parents like for you currently? (Main et al., 1985)

Once the AAI interview has been conducted a full transcript is then printed and scored.

Using the AAI and other instruments, Main (1985) conducted a longitudinal study tracking the attachment styles of infants and their caregivers over time. 40 families (mother, father, and child) were used in her original study. Main and her colleagues assessed infants’ relationships with their caregivers between the ages of 12-18 months, using the Ainsworth Strange Situation among other measures. They then re-assessed the same infants and their caregivers approximately 5 years later when the children were approximately 6 years of age.

Main and her colleagues (1985) found a strong correlation ($r = .76$, $p < .001$) between infants’ attachment styles at 12-18 months of age and their attachment styles 5 years later. This finding, replicated in later studies, confirmed Bowlby’s original hypothesis that attachment styles endure over time.
During their second round of interviews, Main and her colleagues (1985) also conducted several other assessments of both children and parents. These assessments were designed to probe the relationship between their attachment style (as classified through observable behavior) and the internal working models of attachment assumed to underlie them.

First, Main and her colleagues (1985) recorded the first three minutes of dialogue that transpired upon the children’s reunion with their parents after an absence of approximately 1 hour. Transcripts were scored along several dimensions of discourse. The first was fluidity. Conversations were considered fluid if the parents and child responded to each other’s comments directly and with little pause. Another dimension was dyadic balance. Conversations were considered balanced if neither the child nor the parent exclusively led the conversation, and if both conversed in a way that invited further comment from the other. Researchers also identified three foci of conversation: focus on objects, activities with objects, and relationships. Conversations with the greatest number of foci were considered the most desirable.

Main and her colleagues (1985) discovered a strong correlation ($r = .63, p < .001$) between parent-child conversational patterns and attachment style, as assessed by behavior the children had exhibited as infants. For instance, children who had been characterized as securely attached scored highly in all conversational categories. Their conversations with their parents were fluid, balanced, and contained the greatest number of foci of all the groups assessed. Conversations between parents and children who had been classified as avoidant in infancy, however, were restricted. They lacked fluidity. Their conversations featured frequent pauses between parent and child. Discussions were also limited to a narrow range of topics (impersonal and inanimate); parents frequently used rhetorical questions or empty conversational turns to which the child was uneasily able to respond.
Conversations between parents and children who had been classified as anxious in infancy were similarly restricted. However, in these instances the foci of conversation centered around relationships and feelings to the detriment of external, inanimate objects.

Next, Main and her colleagues (1985) presented the children with a photograph depicting the separation of parents and child and said, “This little girl’s/boy’s parents are going away on vacation for two weeks; what’s this little girl/boy gonna do?” (Main et al., 1985, p. 87). The children were then scored based upon their answers. The highest scores were given for responses that persuaded the parents not to leave or accomplished the same effect through different means (for example, one little girl stated that she would hide in the back of the car). The lowest scores were given for any response that would result in decreasing the accessibility of the attachment figure such as killing oneself or parents, or locking oneself away in a closet.

Main and her colleagues (1985) discovered a high correlation ($r = .59, p = .001$) between mother-child attachment styles assessed in infancy and the children’s responses approximately 5 years later. Statements included (researchers’ responses in *italics*):

- **Secure in infancy:** Cry [Giggles.] Cry? [nods yes.] *Why’s she gonna cry?* Cause she really loves her mom and dad. *Cause she really loves her mom and dad?* Mm. *What else is she gonna do?* Play a little bit.
- **Avoidant in infancy:** Runaway. *Runaway? Where’s she gonna run to?* I don’t know. *You don’t know.* *What else do you think she might do?* I don’t know. *Don’t know? You have any ideas?* No.
- **Anxious in infancy:** Chase them. *Chase who?* Their dad and mom in his new toy car – he’s pssshh – run right off. *Then what’s gonna happen?* And then he’s gonna, then he is gonna ... toss a bow and arrow and shoot them. *Shoot his mom and dad?* Yeah. If he wants to, maybe.
• Disorganized in infancy: Probably gonna hide away. *Gonna hide away?* Yeah. *Then what’s gonna happen?* He’ll probably get locked up in his closet. [Forced giggle.] *Locked up in his closet?* Yeah, I was locked up in a closet (Main et al., 1985, p. 103-104)

Since each child was presented with only a photograph, and given no other knowledge of any of the individuals pictured, each child’s interpretation of the situation must have been drawn from other sources. The fact that their responses correlated so highly to their attachment styles (classified in infancy) lent strong credence to Bowlby’s hypothesis that individuals form internal working models to help them interpret the world and that the formation of these internal working models is both heavily influenced by individuals’ early attachment-related experiences and relatively stable over time.

Finally, children were shown a picture taken earlier of their family and told, “But here is a photograph of yourself and your family, and you see, you are all together” (Main et al., 1985, p. 89). Children were judged secure if they readily accepted the photograph and reacted to it warmly. They were judged insecure if they refused to take it or actively avoided it when placed near them. These results were also highly correlated to child-mother attachment style (r = .74, p < .001) as rated in infancy. They demonstrate that the operation of internal working models of behavior extend even to the very individuals who first fostered their creation in the first place. Children reacted to the family photograph in a way highly correlated to the ways in which they interacted with their mothers in infancy, even though their actual parents were not physically present in the room and represented only by the photograph.

As stated previously, Main and her colleagues (1985) also investigated the internal working models of parents’ attachment styles during their second round of interviews using the AAI. Once again, she found a strong correlation (r = .562, p < .001) between a mother’s attachment style in adulthood and that of her infant.
Parents rated secure tended to value attachment relationships in general (whether with their parents, children, or others), and were generally able to speak objectively about the impacts any one attachment relationship may have had on them. Interestingly, the absence of negative attachment experiences in parents’ childhood was not positively correlated with insecure offspring (Main et al., 1985). That is, some individuals who were insecurely attached in childhood grew up to parent securely attached offspring. Rather, the common variable shared by all parents of attached children was an ability to coherently discuss their attachment history (good or bad) and its influence. Evidence of prior mental processing was more positively correlated to child attachment styles than the actual content of parent childhood experience.

On the other hand, insecurely rated parents’ responses to the AAI questionnaire often seemed to lack both coherency and consistency, and often contained contradictions. More specifically, parents of avoidant children tended to dismiss the importance of attachment relationships and deny that they had any value or influence. Their descriptions of their overall childhood experiences often stood in stark contrast with their specific episodic memories, for instance, recalling an “excellent” or “pleasant” mother, but then relaying a childhood memory in which the individual was afraid of her. They also frequently expressed an inability to recall the period of childhood. Parents of anxious children seemed preoccupied with dependency on their own parents and working to please them. Finally, parents whose children were characterized as disorganized were most likely to oscillate repeatedly from positive to negative characterizations of their parents/childhood. At times their accounts appeared irrational, and they often refused or seemed unable to remain on track during the course of the interview (Main et al., 1985).

In summary, the impact of Main’s research (1985) cannot be overstated. Her longitudinal research confirmed that early life experiences shape a child’s perception of the world, and that there is a high correlation between attachment styles of both parents and their children. Perhaps most
interestingly, however, her research seemed to indicate that individuals are not necessarily constrained by their past experiences, that at least some of them had found a way to provide to their children what they, themselves, had not been provided in their childhood i.e. secure attachment.

Main’s early research (1985) also raised many interesting questions, such as: “If there is a high correlation to between parent/child attachment systems, what is the mechanism by which they are transmitted?” and “If an individual’s experiences in infancy shape his or her perceptions in childhood, might they also extend into adulthood? To what extent, if at all, are adult perceptions and behavior correlated to their childhood experiences?” It was to these questions that researchers next turned their attention.

Chapter 3: The transmission of attachment styles across generations

Mary Main (1991) continued her earlier research during this time, seeking, in particular, to determine the ways in which attachment styles are transmitted from parents to children. To begin, she differentiated between cognition and meta-cognition. Cognition is the ability to think. The thought, “I know the bus comes at 3:00” is an example of cognition. Meta-cognition, on the other hand, is the ability to think about thought. Therefore, the thought “I am a bad person” is an example of cognition whereas the thought, “I find myself often thinking that I am a bad person” is an example of meta-cognition (Main, 1991).

Main noted that young children’s abilities to meta-cognate are particularly poor. Six-year olds are able to demonstrate limited powers of meta-cognition, whereas three-year olds seem incapable of it, even when provided training (Chandler, 1988 in Main, 1991). Absent these and other mental defenses Main (1991) hypothesized that exposure to parents’ unstable attachment-related behavior and incoherent self-concept during childhood made them particularly susceptible to absorbing the same shortcomings.
Specifically, Main cited research (Watson, 1984 in Main, 1991) demonstrating that young children’s ability to manage multiple concepts simultaneously is limited and that, in particular, they struggle with a process called “dual-coding”, which refers to an individual’s ability to apply separate (sometimes competing) concepts to the same object. For instance, young children struggle to understand that a person can be both a father and a doctor.

Main (1991) also noted that young children lacked the ability to distinguish between perception and reality. The ability to do so is what helps individuals differentiate between the objective, observable world and our perceptions of it. It also helps us distinguish between ourselves and others when we realize that others may perceive the world differently than we do. The ability to distinguish between perception and reality also helps individuals understand the concept of lying – that one person may say they believe one thing when in fact they believe another, or may appear to be feeling one way when in fact he or she may be feeling another.

Given these shortcomings in young children’s cognitive abilities, it is easy to comprehend the ways in which they would be particularly susceptible to their parents’ insecure attachment behavior. Anxious children, in particular, would have trouble processing their parents’ sensitivity one moment and their seeming unavailability the next. Avoidant children exposed to dismissing parents might think, “I’m unlikeable” rather than the more nuanced, “My attachment figure seems to behave in a way that would suggest that I am unlikeable, but she seems to behave that way towards people in general regardless of their particular personality” (Main, 1991). Main concluded it was these interactions, and others like them, which, experienced in childhood, inhibited the formation of a singular uniform attachment style and instead created the incoherency which she had observed in adults.

The exception to the rule

Diamond and Blatt (1994) further elaborated upon Main’s original research by formulating additional concepts that provide additional insight into the data she originally gathered. Specifically,
they identified enactive, imagistic, and lexical modes of representation by which the content of internal working models might be expressed. Enactive attachment representations, they stated, are expressed through movement such as facial expressions, bodily movement, and posture. Imagistic attachment representations are expressed through sensory images e.g. visual, auditory, tactile, etc. Lexical representations are expressed both verbally and symbolically as the child matures and acquires the ability to think and speak formally.

Reinterpreted through this lens, Diamond and Blatt (1994) observed that the children originally rated secure in Main’s (1985) study expressed a range of enactive positive and negative enactive affect during infancy, and 5 years later expressed a similar range of affect – both imagistically and lexically – when handling and discussing their family photograph. For instance, the same secure children who might have (enactively) held themselves tightly against their mothers’ bodies in infancy, 5 years later might have gazed intently (imagistically) at their family photograph and (lexically) stated that they liked it.

In contrast, avoidant children, who (enactively) turned away from their mothers during infancy, expressed the same restriction in affect later when (imagistically) spurning their family photograph and (lexically) insisting that a child would feel little to nothing upon being separated from his or her parents.

The behavior of anxious children can be interpreted similarly. Desperately (enactively) scanning their environments for their mother during infancy, 5 years later they reacted (imagistically) to their family photograph in a manner that was similarly distressed. Disorganized children also responded to their mothers in a similar way during infancy, and to their family photograph 5 years later.

This insight led Diamond and Blatt (1994) to conclude that the expression of insecure children was not only (enactively) constricted in childhood, but also that it failed to develop at more mature levels (i.e. imagistic and lexical) later on in childhood. That is, the avoidant individual who failed to bond with his mother in infancy grew into a child who lacked the ability to enunciate what emotions a child
might experience upon being parted from his parent and later grew into the father who failed to warmly bond with his own children.

Conversely, Diamond and Blatt (1994) were able to conclude that the lexical processing of attachment not only results from the formation of a secure attachment, it also, to some extent, creates it. They stated:

The development of lexical structures thus may serve the function of differentiating and consolidating discrete self- and object representations apart from their interaction, and may permit the capacity to reflect on and thus transform especially maladaptive attachment patterns. Placing partially articulated experiences into words facilitates a greater sense of control over experience. Words convey a sense of structure and direction to previously unarticulated experiences, so that one can begin to think about and understand them. Placing experiences into words leads to a sharper delineation between self and other, helps clarify cause-and-effect sequences, and contributes to and enhances the sense of self as an active and effective agent (Diamond & Blatt, 1994, p. 84).

Of course, using words to “reflect on and thus transform especially maladaptive attachment patterns” (Diamond & Blatt, 1994, p. 84) is the foundation of talk therapy. It was research results such as these that first drew the attention of clinicians, and, eventually, laid the groundwork for the development of emotionally focused therapy. However, before we turn our attention towards the development of therapeutic techniques we must first determine whether research conducted on infants and young children is applicable to adults. That is, we need to investigate whether attachment styles and the ways in which they impact our perception are relatively stable across an individual’s lifespan. Thankfully, numerous longitudinal studies have been conducted since Mary Ainsworth and Mary Main first conducted their seminal research approximately thirty years ago (Waters, Hamilton, & Weinfield, 2000).
Chapter 4: The stability of attachment style across the lifespan: The link between childhood experience and adult perception

Bowlby (1982, in Sharfe, 2003) originally theorized that attachment styles should be relatively stable over time, but he hypothesized that having been formed by events (i.e. attachment-related experiences in infancy), they could also be altered in the same way once established. He also emphasized that attachment styles could adapt in either a positive or a negative direction – that is, they might not only deteriorate in light of traumatic life events but they might also improve in the presence of healthier external circumstances.

Elaine Scharfe (2003) compiled data from 54 longitudinal studies demonstrating the stability of attachment during infancy, childhood, and adulthood. Although more research is needed, these studies shed light on some factors that appear to cause attachment styles to change over time.

The stability of attachment styles in infancy

20 of these studies were conducted on infants. (See Table 4.1.) Overall styles of attachment were the same when measured at two different points in time for 65% of participants (Scharfe, 2003). Waters’ research (1978) stands out for demonstrating particularly high stability (96%). It should be noted, however, that his sample was chosen specifically to demonstrate the stability of attachment in the presence of a stable external environment.

Table 1. Stability of Infant and Childhood Attachment Categories (Scharfe, 2003)

<table>
<thead>
<tr>
<th>Authors (year)</th>
<th>N</th>
<th>Ages¹</th>
<th>% Stable</th>
</tr>
</thead>
<tbody>
<tr>
<td>Atkinson et al. (1999)</td>
<td>40</td>
<td>26 &amp; 42 mos.</td>
<td>62%</td>
</tr>
<tr>
<td>Bar-Haim et al. (2000)</td>
<td>42</td>
<td>14 to 24 mos.</td>
<td>64%</td>
</tr>
<tr>
<td></td>
<td>43</td>
<td>14 to 58 mos.</td>
<td>42%</td>
</tr>
<tr>
<td></td>
<td>45</td>
<td>24 to 58 mos.</td>
<td>38%</td>
</tr>
<tr>
<td></td>
<td>42</td>
<td>14, 24, &amp; 58 mos.</td>
<td>29%</td>
</tr>
</tbody>
</table>

Note: Unless indicated all studies assessed mother-infant attachment, used Ainsworth’s Strange Situation, and score attachment behavior according to Ainsworth’s original three-category model (secure, avoidant, anxious)

¹ Ages represent average age of children during each assessment of attachment.
<table>
<thead>
<tr>
<th>Study</th>
<th>Sample Size</th>
<th>Age Range</th>
<th>Stability</th>
</tr>
</thead>
<tbody>
<tr>
<td>Barnett et al. (1999)</td>
<td>39</td>
<td>12 &amp; 18 mos.</td>
<td>64%</td>
</tr>
<tr>
<td></td>
<td>36</td>
<td>18 &amp; 24 mos.</td>
<td>69%</td>
</tr>
<tr>
<td></td>
<td>36</td>
<td>12 &amp; 24 mos.</td>
<td>69%</td>
</tr>
<tr>
<td>Belsky et al. (1996)</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Mother-infant</td>
<td>125</td>
<td>12 &amp; 18 mos.</td>
<td>52%</td>
</tr>
<tr>
<td>Father-infant</td>
<td>120</td>
<td>13 &amp; 20 mos.</td>
<td>46%</td>
</tr>
<tr>
<td>Depressed mothers</td>
<td>90</td>
<td>12 &amp; 18 mos.</td>
<td>46%</td>
</tr>
<tr>
<td>Egeland &amp; Farber (1984)</td>
<td>189</td>
<td>12 &amp; 18 mos.</td>
<td>60%</td>
</tr>
<tr>
<td>Egeland &amp; Sroufe (1981)</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Excellent care</td>
<td>32</td>
<td>12 &amp; 18 mos.</td>
<td>81%</td>
</tr>
<tr>
<td>Inadequate care</td>
<td>25</td>
<td>12 &amp; 18 mos.</td>
<td>48%</td>
</tr>
<tr>
<td>Goossens et al. (1986)</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Lab-lab</td>
<td>9</td>
<td>17.6 &amp; 18.7 mos.</td>
<td>100%</td>
</tr>
<tr>
<td>Home-home</td>
<td>10</td>
<td>17.5 &amp; 18.6 mos.</td>
<td>90%</td>
</tr>
<tr>
<td>Home-lab</td>
<td>9</td>
<td>18.4 &amp; 19.3 mos.</td>
<td>33%</td>
</tr>
<tr>
<td>Lab-home</td>
<td>11</td>
<td>17.9 &amp; 18.9 mos.</td>
<td>55%</td>
</tr>
<tr>
<td>Howes &amp; Hamilton (1992)</td>
<td>106</td>
<td>12 &amp; 48 mos.</td>
<td>71%</td>
</tr>
<tr>
<td>Main &amp; Cassidy (1988)</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Mother-child</td>
<td>32</td>
<td>12 &amp; 72 mos.</td>
<td>84%</td>
</tr>
<tr>
<td>Father-child</td>
<td>33</td>
<td>12 &amp; 72 mos.</td>
<td>61%</td>
</tr>
<tr>
<td>Test-retest sample</td>
<td>50</td>
<td>72 &amp; 73 mos.</td>
<td>76%</td>
</tr>
<tr>
<td>Main and Weston (1981)</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Mother-infant</td>
<td>15</td>
<td>12 &amp; 20 mos.</td>
<td>73%</td>
</tr>
<tr>
<td>Father-infant</td>
<td>15</td>
<td>12 &amp; 20 mos.</td>
<td>87%</td>
</tr>
<tr>
<td>NICHD Early Child Care</td>
<td>1060</td>
<td>15 &amp; 36 mos.</td>
<td>46%</td>
</tr>
<tr>
<td>Research Network (2001)</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Owen et al. (1984)</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Mother-infant</td>
<td>59</td>
<td>12 &amp; 20 mos.</td>
<td>78%</td>
</tr>
<tr>
<td>Father-child</td>
<td>53</td>
<td>12 &amp; 20 mos.</td>
<td>62%</td>
</tr>
<tr>
<td>Rauh et al. (2000)</td>
<td>70</td>
<td>12 &amp; 21 mos.</td>
<td>64%</td>
</tr>
<tr>
<td>Thompson et al. (1982)</td>
<td>43</td>
<td>12.5 &amp; 19.5 mos.</td>
<td>53%</td>
</tr>
<tr>
<td>Touris et al. (1993)</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

2 Results are based on a four-category system. Stability of three categories was lower (64% vs. 54%).
3 Stability results including the disorganized category were considerably lower (62%).
Several studies demonstrated the deterioration of attachment style in the presence of adverse life circumstances. Egeland and Sroufe (1981) reported that children who received inadequate care tended to become avoidantly attached over time. Vaughn, Egeland, Sroufe, and Waters (1979) reported that mothers of infants who transitioned from securely attached to anxiously attached over time reported more stressful life events over that same period than did mothers whose infants’ attachment styles remained secure. Vondra, Hommerding, and Shaw (1999) reported that mothers of infants whose attachment styles were rated disorganized at 18 months of age were the most likely to self-report feelings of aggression and suspiciousness. Mothers of infants whose attachment styles changed to disorganized over time also reported the most disruption to their lives over the same time period.

In contrast, Egeland and Sroufe (1981) also found that infants tended to move from an insecure to a secure attachment style over time when their caregiving experiences changed to include additional support (e.g. a grandmother), or when their mothers reported a decrease in stressful life events. Egeland and Farber (1984) and Vondra et al. (1999) also determined that mothers whose infants changed from insecure to secure over the first 18 months of their lives were more likely to report that they were living with their romantic partner, that they were enjoying relatively high relationship

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4 Stability results including the disorganized category were similar. (50%)
5 Stability results including the disorganized category were similar. (82%)
satisfaction, and that they had experienced few family disruptions. Egeland and Farber (1984) reported that in almost every instance in which they observed an infant moving towards a secure attachment style, their mothers reported less life stress and increased confidence in caring for their newborn.

The stability of attachment style in childhood

Although numerous studies have investigated the stability of attachment in infancy and adulthood, relatively few have studied the stability of attachment from infancy to childhood. This is due to the fact that original coding systems developed for use in infancy were inadequate for use in childhood (Scharfe, 2003). New coding systems have since been developed; however, they may not overlap with those devised originally e.g. the Ainsworth Strange Situation. For instance, Vondra, Shaw, Swearingen, Cowen, and Owens (2001) assessed the attachment styles of children at 12, 18, and 24 months of age. However, they used a different coding system at 24 months of age than they did at 12 and 18 months of age. Their results indicated that only 16% of children maintained the same classification at each point in time, and 26% of children studied changed classification at each point in time.

Regardless of these setbacks, other studies have been conducted demonstrating general stability of children as they move from infancy into childhood (Scharfe, 2003). For instance, Atkinson et al. (1999) and Barnett, Ganiban, and Cicchetti (1999) reported stability of attachment styles over a period of 16 and 18 months, respectively. Main and Cassidy (1988) and Wartner, Grossman, Fremmer-Bombik, and Seuss (1994) both followed a group of children from infancy to 6 years of age and reported moderate to high stability.

Overall, Scharfe (2003) reviewed seven studies and determined that the attachment style stability of children moving from infancy into childhood is 65%. It should be noted both that stability may be underindicated given differing attachment-style coding systems at different ages, but also that
further research should be conducted to determine whether age and/or stage of development has any impact on attachment security (Scharfe, 2003).

The stability of attachment style in adulthood

The interreliability of various measurement tools becomes of particular concern when attempting to measure the stability of adult attachment styles. However, to address this, Scharfe and Bartholomew (1994) conducted a study demonstrating that even though interviewer ratings tend to be higher than self-report ratings (in terms of measuring stability), the results of both, when compared, are still quite close.

Even when taking this concern into account, studies conducted over the past several decades (ranging in time from 2 months to 27 years) have indicated relatively high levels of stable attachment styles. Scharfe (2003) reviewed 23 studies and determined that 70% of participants’ attachment styles remained stable over time even when researchers set out to demonstrate that attachment was unstable (Baldwin & Fehr, 1995). Studies reviewed included single adult participants as well as those in romantic relationships (Kirkpatrick & Hazan, 1994).

Unfortunately, fewer studies have been conducted to determine what causes attachment styles to change in adulthood. However, Davila, Burge, and Hammen (1997) tested whether stressful life events caused change, and also whether those who changed were also vulnerable in other ways (e.g. personality disturbance, growing up in non-intact family, etc.) They found weak support for the hypothesis that attachment styles changed in reaction to stressful life event; however, they found strong support for their hypothesis that individuals whose attachment styles changed were also vulnerable in other ways.
Table 4.2 Stability of Continuous Ratings of Attachment in Adulthood (Scharfe, 2003)

<table>
<thead>
<tr>
<th>Author(s) (Year)</th>
<th>Time Lapse</th>
<th>Average Stability Coefficient</th>
</tr>
</thead>
<tbody>
<tr>
<td>Brennan &amp; Shaver (1995)</td>
<td>8 mos.</td>
<td>.57</td>
</tr>
<tr>
<td>Collins &amp; Read (1990)</td>
<td>2 mos.</td>
<td>.64⁷</td>
</tr>
<tr>
<td>Davila et al. (1999)</td>
<td>24 mos.⁷</td>
<td>.70 (women), .63 (men)</td>
</tr>
<tr>
<td>Feeney et al. (1994)</td>
<td>9 mos.</td>
<td>.63⁸</td>
</tr>
<tr>
<td>Fuller &amp; Fincham (1995)</td>
<td>24 mos.</td>
<td>.60 (women), .63 (men)</td>
</tr>
<tr>
<td>Hammond &amp; Fletcher (1991)</td>
<td>4 mos.</td>
<td>.47</td>
</tr>
<tr>
<td>Keelan et al. (1994)</td>
<td>4 mos.</td>
<td>.60⁹</td>
</tr>
<tr>
<td>Klohnen &amp; Bera (1998)</td>
<td>9 yrs.</td>
<td>.71</td>
</tr>
<tr>
<td></td>
<td>27 yrs.</td>
<td>.55</td>
</tr>
<tr>
<td>Levy &amp; Davis (1988)</td>
<td>2 wks.</td>
<td>.57</td>
</tr>
</tbody>
</table>
| Scharfe & Bartholomew (1994) | 8 mos.     | .64 (women), .73 (men)  
| Scharfe & Cole (2002)     | 7 mos.     | .68                         |

Scharfe and Cole (2002, in Scharfe, 2003) explored how life transitions may affect change in attachment styles by following a sample of students as they transitioned out of university. They determined that insecure attachment and movement toward insecure attachment were positively correlated with increased stress, insecurity, and loneliness. Likewise, they determined that secure attachment and movement toward secure attachment were positively correlated with higher levels of self-esteem, trust, and life satisfaction. These results, in particular, confirm both of Bowlby’s original

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⁶ Stability of closeness, dependence, and anxiety scales
⁷ Stability coefficients are from time 1 and time 5 only.
⁸ Stability of closeness and anxiety scales
hypotheses – that attachment styles may be influenced by life events overall and also that they may trend in either a positive or negative direction depending upon an individual’s perceived experience.

Table 4.3 Stability of Attachment Categories in Adulthood (Scharfe, 2003)

<table>
<thead>
<tr>
<th>Author(s) (Year)</th>
<th>n</th>
<th>Time Lapse</th>
<th>% reporting same category</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Self – Reports</strong></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Baldwin &amp; Fehr (1995)</td>
<td>517</td>
<td>1-40 wks.</td>
<td>72%</td>
</tr>
<tr>
<td>Davila et al. (1997)</td>
<td>155</td>
<td>6 mos./24 mos.</td>
<td>72%/66%</td>
</tr>
<tr>
<td>Fuller &amp; Fincham (1995)</td>
<td>44</td>
<td>24 mos.</td>
<td>64% (women), 68% (men)</td>
</tr>
<tr>
<td>Iwaniec &amp; Sneddon (2001)</td>
<td>31</td>
<td>20 yrs.</td>
<td>61%</td>
</tr>
<tr>
<td>Keelan et al. (1994)</td>
<td>105</td>
<td>4 mos.</td>
<td>80%</td>
</tr>
<tr>
<td>Kirkpatrick &amp; Hazan (1994)</td>
<td>172</td>
<td>4 yrs.</td>
<td>70%</td>
</tr>
<tr>
<td>Scharfe &amp; Bartholomew (1994)</td>
<td>72</td>
<td>8 mos.</td>
<td>63% (women), 56% (men)</td>
</tr>
<tr>
<td>Scharfe &amp; Cole (2002)</td>
<td>73</td>
<td>7 mos.</td>
<td>47%</td>
</tr>
<tr>
<td><strong>Interviews</strong></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Bakersman-Kranenburg &amp; van Ijzendoorn (1992)</td>
<td>83</td>
<td>2 mos.</td>
<td>78%</td>
</tr>
<tr>
<td>Benoit &amp; Parker (1994)</td>
<td>84</td>
<td>12 mos.</td>
<td>90%</td>
</tr>
<tr>
<td>Hamilton (2000)¹⁰</td>
<td>30</td>
<td>16-18 yrs.</td>
<td>63%</td>
</tr>
<tr>
<td>Lewis et al. (2000)¹⁰</td>
<td>84</td>
<td>17 yrs.</td>
<td>42%</td>
</tr>
<tr>
<td>Sagi et al. (1994)</td>
<td>59</td>
<td>3 mos.</td>
<td>90%</td>
</tr>
<tr>
<td>Scharfe &amp; Bartholomew (1994)</td>
<td>72</td>
<td>8 mos.</td>
<td>75% (women), 80% (men)</td>
</tr>
<tr>
<td>Waters et al. (2000)¹⁰</td>
<td>50</td>
<td>19-21 yrs.</td>
<td>64%</td>
</tr>
<tr>
<td>Weinfield et al. (2000)¹⁰</td>
<td>57</td>
<td>18 yrs.</td>
<td>39%</td>
</tr>
</tbody>
</table>

Several of the longer longitudinal studies deserve extra attention. Waters, Merrick, Treboux, Crowell, and Albersheim (2000) conducted a 20-year study involving 60 white middle-class individuals. Using the Ainsworth Strange Situation, they classified their attachment styles at approximately 12 months of age. 50 of them were successfully contacted 20 years later and interviewed using the AAI. The interviewers were blind to the participants’ original attachment style classification. Overall, 72% of the individuals received the same classification as they had received in infancy. Many of those who experienced change in attachment style had been impacted by negative life events, such as the loss of a parent, life threatening illness, sexual abuse, etc.

¹⁰ First assessment was during infancy using Ainsworth Strange Situation
Hamilton (2000) conducted a similar longitudinal study utilizing a sample of 30 individuals. Individuals’ attachment styles were classified in infancy using the Ainsworth Strange Situation. The participants were then interviewed again approximately 17 years later using the AAI. There was a 77% match between the original Ainsworth classification and that of the AAI. Hamilton (2000) also found that negative life experiences played a significant role in changing an individual’s attachment style over time such that 19 of her participants who experienced one or more negative life events were rated insecure in adolescence. However, Hamilton’s study (2000) found no link between adolescents reared in two parent families vs. other family structures in the distribution of adolescent attachment security classifications, the experience of negative life events, or the continuity of attachment through adolescence.

In contrast, Weinfield, Sroufe, and Egeland (2000) conducted a longitudinal study of 59 individuals identified as “high risk” for poor developmental outcomes in an effort to determine the impact of negative life circumstances upon the continuity of attachment style. Their methods were similar to those of Waters, Merrick, et al. (2000) and Hamilton (2000). Participants were assessed in infancy using the Ainsworth Strange Situation and then again at approximately age 18 using the AAI.

In order to obtain a “high risk” sample, mothers of the study participants were recruited from local clinics while in their third trimester of pregnancy. Most were young (M = 20, range = 12-34), single (62%), and many (40%) had not completed high school. 82% of their collective pregnancies were unplanned. By the time participants had reached approximately 18-19 years of age, 91.2% had experienced a negative life event. Surprisingly, researchers found no correlation between their attachment style assessed in infancy and that assessed in late adolescence. Weinfield et al. (2000) hypothesized several reasons for this including:
1. The “high risk” home environments of these participants were far less stable than those of other participants studied. Less stable long-term relationships are a hallmark of this general instability and may negatively impact the long-term continuity of attachment styles.

2. This sample of participants experienced a much greater number of negative life events than participants in other studies (Waters, Merrick, et al., (2000); Hamilton, (2000)) experienced. Both Waters, Merrick, et al. (2000) and Hamilton (2000) observed that the presence of negative life events was negatively correlated with the long-term continuity of attachment styles. It may be that the large number of negative life events experienced by the participants in Weinfield et al. (2000) simply obliterated the long-term continuity that would otherwise have been detectable (in which case a future study of high risk individuals might boost sample size in order to increase power).

3. Measurement error may also have been partially to blame. (However, as previously noted, any error it may have caused is most likely small.)

Collectively these studies, notable for their length, confirmed Bowlby’s original hypothesis that attachment styles are relatively stable over the course of the lifespan, but are ultimately formed and may be further modified by real life experience (Waters, Weinfield, & Hamilton, 2000).

Chapter 5: The impact of internal working models on adult perception and romantic relationships

Thus far, we have established that attachment styles, observable in infancy, are relatively stable across the lifespan, and also that they play a key role in shaping individuals’ perceptions of the world. Now, let us turn our attention to the ways in which they impact adult perception, behavior, and decision making in particular. Given the scope of our focus, we will pay special attention to the ways in which they impact the formation and function of adult romantic relationships.

Hazan & Shaver (1987) were the first to conduct a major study exploring the relationships between attachment styles, internal working models, and adult romantic relationships. Consistent with
previous research (Campos et al. 1983, in Hazan and Shaver, 1987), their data indicated that attachment pattern distributions in the general adult population are similar to those present in the infant population (56% vs. 62% secure, 24% vs. 23% avoidant, and 20% vs. 15% anxious, respectively).

Respondents’ views of romantic love were also consistent with what was predicted based upon their attachment style. Secure lovers stated that while romantic love might wax and wane, at times it approaches the level of intensity experienced at the beginning of the relationship. They also tended to report that in some relationships, the experience of romantic love never fades. Avoidant lovers, in contrast, reported that romantic love seldom lasts, and that it is rare to find a person with whom one can fall in love. Anxious lovers stated that falling in love is fairly easy, but that they had rarely found what they would call real love (Hazan & Shaver, 1987).

Respondents’ memories of their parents and childhoods also correlated to researchers’ expectations. Secure respondents reported warmer relationships overall between themselves and their parents, and between their two parents, than insecurely attached individuals did. Avoidant participants were more likely to describe their mothers as cold and rejecting, while anxious participants were more likely to view their parents as unfair (Hazan & Shaver, 1987). One slightly unexpected result was that while avoidant respondents’ specific memories of their mothers were harsher than those of secure respondents their overall recollection of their childhoods was just as positive. These responses may be explained however, in light of the fact that they correlate well with the results of Main et al. (1985). Recall that this research indicated that avoidant respondents typically recall generally positive childhoods, but when probed, recall memories of instances that are much more negative.

Respondents’ views of themselves and others also corresponded to what attachment theory would have predicted (Hazan & Shaver, 1987). Secure respondents described themselves as easy to get to know and liked by most people. They also tended to believe that others were generally well-intentioned and good-hearted. Avoidant participants overwhelmingly (80%) agreed with the statement,
“I can get along quite well by myself” while anxious subjects reported having more self-doubts, often feeling misunderstood or unappreciated, and stating that they found others less willing than themselves to commit to a relationship. Anxious participants also achieved the highest scores on a measurement of loneliness.

Since Hazan and Shaver (1987) conducted their original landmark study their results have been replicated and expanded by other researchers. In particular, Brennan and Shaver (1995) determined that avoidantly attached individuals tend to deny their attachment needs, may distract themselves through work (Hazan & Shaver, 1990 in Brennan & Shaver, 1995), and typically fail to focus on their feelings. They also tend to display an inability to self-disclose (Mikulincer & Nachshon, 1991 in Brennan & Shaver, 1995), and typically drink larger quantities of alcohol, more frequently, than individuals with other attachment styles (secure or insecure). They also typically work to avoid emotional dependency and commitment in romantic relationships by frequently fantasizing about having sex with someone other than their current partner, and are far more likely than individuals with other attachment styles (either secure or insecure) to engage in “one night stands”. They also tend to consider the end of romantic relationships relatively inconsequential.

Anxiously attached individuals, on the other hand, view the world and their social relationships quite differently. They tend to have more negative beliefs about themselves and others (Collins & Reed, 1990) and may also readily express both fear and anger as they seek to avoid feelings of abandonment. They tend to express greater anxiety in relationships, which may be correlated to a lower sense of self-worth, social self-confidence, and the feeling of a lack of control in their own lives. They are quite likely to feel unappreciated by both their romantic partners and their co-workers (Hazan & Shaver, 1990 in Brennan & Shaver, 1995), and tend to make inappropriate self-disclosures (Mikulincer & Nachshon, 1991 in Brennan & Shaver, 1995). If they drink, they are likely to do so in order to relieve anxiety. They may binge eat under stress (Brennan & Schmidt, 1993 in Brennan & Shaver, 1995), and are more likely
to fall in love at first sight (Hazan & Shaver, 1987). Once in a relationship, however, they are likely to become jealous, clingy, and overly dependent (Brennan & Shaver, 1995; Feeney & Noller, 1990).

Secure adults, on the other hand, may be characterized by the opposite of the insecure tendencies just listed. They tend to have a high sense of self-worth, high social confidence, and can be quite expressive. They also tend to view others as trustworthy and dependable. They are typically altruistic and willing to stand up for their beliefs. They tend to believe that they have control over the outcomes of their lives (Collins & Reed, 1990). They demonstrate an ability and willingness to trust their romantic partners, and also share ideas and feelings in a manner that is flexible, appropriate, and sensitive to their partners’ needs (Mikulincer & Nachson, 1991; Simpson et al., 1992 in Brennan and Shaver, 1995).

Chapter 6: Attachment styles, perception, emotional experience, and adult behavior

By the early 1990’s researchers had established that adult perceptions of the world, especially those relating to romantic relationships, were both relatively stable across the lifespan and highly influenced by their childhood attachment-related experiences. What they lacked was the “how”, as in, “How do our attachment styles influence our perception?”, “How do our attachment styles influence adult mate selection and overall relationship satisfaction?”, and, perhaps most important for clinicians, “How can this knowledge be used to help people change for the better?” Researchers spent the next decade (and beyond) investigating those very questions.

How attachment styles impact perception

To investigate ways in which our internal working models might subconsciously influence and prime our perception, Baldwin, Fehr, Keedian, Seidel, and Thomson (1993) conducted a study in which they required participants to discriminate between words and non-words flashed on a computer screen as quickly as possible. However, prior to seeing each word/non-word flashed on the screen participants were required to read a sentence fragment, for instance, “The carpenter pounded in the...”. The
word/non-word that followed might either be related to the sentence fragment (i.e. “nail”) or not (i.e. “basket”). It has been previously shown (Gaertner & McLaughlin, 1983 in Baldwin, et al., 1993) that priming participants in such a manner increases response times when the word that follows is something they subconsciously expect to see. Sentence fragments were intentionally designed to prime attachment-related responses to allow researchers to plumb the subconscious contents of participants’ internal working models. Examples included such pairings as, “When I demand something, my partner…withdraws” and “If I depend on my partner, then my partner will…leave”.

As expected, participants’ reaction times were faster congruent with their respective attachment styles, such that an anxiously attached individual correctly identified “leave” as a word, having just read “If I depend on my partner, then my partner will…” faster than securely or avoidantly attached individuals did.

Baldwin & Meunier (1999) demonstrated not only that internal working models could be primed, but that their priming could also be conditioned. They instructed participants to visualize contingent acceptance in a relationship while listening to a series of distinctive tone sequences. The contingency of their acceptance was based upon their attachment style. For instance, an anxiously attached individual might envision a relationship in which he or she were accepted providing that he or she made a lot of money. Later, researchers replayed the tone sequences while participants participated in a series of if-then contingency exercises of interpersonal acceptance and rejection. Their results indicated that the conditioning had different effects dependent upon individuals’ different attachment styles. Specifically, the conditioning elicited rejection contingencies in anxiously attached individuals and acceptance contingencies in securely attached individuals.

Of course, studies such as these, while empirically satisfying, belie the complex relationships that exist among our internal working models of self, others, and world; and the ways in which they
impact and are impacted everyday by our relationships with others. We will now turn our attention to research that has been conducted in this area.

*How attachment styles influence relationship formation*

Attachment styles seem not only to influence our perceptions in relationships, they also seem to influence their formation at the outset (Brennan & Shaver, 1995; Collins & Read, 1990; Feeney, 1994; Feeney, 1996; Senchak & Leonard, 1992), lending support to Bowlby’s original hypothesis that our internal working models are both influenced by and influence our experiences.

Senchak and Leonard (1992) first determined that greater proportions of insecure husbands and wives were married to insecure partners, and greater proportions of secure husbands and wives were married to secure partners. Consistent with other research, they also determined that partners in relationships in which both were securely attached experienced more intimacy and expressed greater relationship satisfaction than other individuals in relationships did in which one or both were insecurely attached.

Collins and Read (1990) determined that adult individuals tended to initiate romantic relationships with those whose attachment styles generally replicated those that they had experienced in childhood. For instance, anxious individuals, exposed to intermittent attention in childhood, tended to partner with avoidant individuals who were uncomfortable with getting too close – a pairing which tended to exacerbate the very same feelings of abandonment they had experienced when younger.

In particular, Collins and Reed (1990) observed that the attachment style of the opposite-sex parent appears to play a significant role in heterosexual mate selection. Descriptions of the opposite-sex parent given by their participants tended to accurately predict the attachment dimensions of their current partner to a significant extent.

Collins and Reed (1990) also reported that gender variables moderated the influence of mate selection and attachment styles. For instance, they determined the best predictor of female
relationship satisfaction is male closeness – that is, a male partner willing to be emotionally intimate. However, female closeness did not also highly predict male relationship satisfaction. They hypothesized that the cause for this was gender stereotyping in the general population. Men are not “supposed” to be unusually warm and expressive; therefore, women may particularly value such traits. Likewise, women are “supposed” to be warm and affectionate. Therefore, men, considering such traits are perceived to be commonplace, may not particularly value them in women.

Other researchers have also made this observation, noting that, despite relatively high dissatisfaction with the pairing, large numbers of anxious women tend to couple with large numbers of avoidant men (Kirkpatrick & Hazan, 1994; Fuller & Fincham, 1995). It may be, they theorize, that the hallmarks of an anxious attachment style (for instance, one who is “emotionally needy”) more easily comport with our stereotypes of women, whereas the traits that characterize an avoidant attachment style (for instance, one who is “cold, aloof, and detached”) are more compatible with our stereotypes for men. Kirkpatrick & Hazan also theorized that these same gender stereotypes may provide a certain amount of socially sanctioned permission for these anxious women to strive all that much harder to elicit attention from their partners without necessarily violating societal norms.

Feeney (1996) investigated the links between attachment style and caregiving and also found that there were gender-related effects at play. She determined that, while both genders endorsed the characteristics of a secure attachment style, when forced to choose between insecure attachment styles, more husbands endorsed the characteristics of an avoidant attachment style, whereas more women endorsed the characteristics of an anxious attachment style. Feeney also reported that securely attached individuals (of both genders) tended to provide the highest amounts of responsive care, whereas anxiously attached individuals tended to provide higher amounts of compulsive care and avoidantly attached individuals tended to provide less care (of either sort) altogether.
How attachment styles impact emotional experience

Simpson’s (1990) research first linked attachment styles not only with subjective perceptions of the world but also with emotional experience. He determined that the relationships experienced by securely attached individuals tended to be characterized by positive emotions, that is, interdependence, trust, commitment, and satisfaction. On the other hand, he found that those with insecure attachment styles, especially those with avoidant attachment styles, tended to experience more negative emotions.

More recent research has validated Simpson’s (1990) original study and linked emotion with levels of intensity. Feeney (1999) reported that individuals with secure attachment styles tend to experience relatively low levels of anxiety in their romantic relationships coupled with relatively high levels of comfort. The experience of those insecurely attached was just the opposite. Specifically, those who were anxiously attached tended to experience more intense negative emotions in their relationships than those who were securely attached.

Feeney (1999) also reported that relationship functioning is more strongly correlated to one’s own attachment style than to one’s partner’s, providing additional evidence to suggest that one’s perceptions of a relationship and partner (which are influenced by one’s internal working models) play a key role in determining relationship satisfaction. In fact, she determined that attachment dimensions reliably predicted relationship satisfaction, a conclusion supported by many other studies (Duemmler & Kobak, 2001; Cobb, Davila, & Bradbury, 2001; Feeney, 1994; Brennan & Shaver, 1995; Meyers & Landsberger, 2002).

Cobb et al. (2001) more specifically investigated the relationships that exist between internal working models, partner perception, and relationship satisfaction. They determined that spouses who were more secure tended to view their partners more positively and that, as a result, they were also generally happier. They also determined that these positive perceptions fostered effective support behavior, which they positively correlated to both husbands’ and wives’ overall relationship satisfaction.
Interestingly, Cobb et al. (2001) discovered that perception (i.e. working models) may, in fact, be more important than reality. That is, they determined that if an individual perceives his or her romantic partner in a positive light, he or she will act accordingly (reaping the correlated benefits), even if his or her partner does not also view him or herself in such a positive way.

The impact of attachment style on emotional experience

Having determined that attachment styles impact not only adult romantic relationships but also the emotions generated within them (Simpson, 1990; Feeney, 1999) researchers next turned their attention to exploring that link.

Pereg and Mikulincer (2004) conducted two studies in which they assessed the cognitive consequences of negative emotional experience and the role which attachment styles play in eliciting it.

After assessing participants’ attachment styles using a self-report they (Pereg & Mikulincer, 2004) randomly assigned them to one of two groups designed to elicit either a negative emotional experience (e.g. reading an article about a car accident) or no impact on emotional experience (reading an article about how to construct something using a hobby kit). In the first study, Pereg and Mikulincer asked participants to begin reading a book of newspaper headlines, during which participants were abruptly interrupted and asked to recall as many headlines as they could. In the second study they asked participants to list the causes of a hypothetical negative relationship event, (for instance, “your partner disclosed something you asked him to keep secret.” (p. 87))

Participants with secure attachment styles demonstrated a cognition pattern that was incongruent with their recent experience. That is, even those exposed to an article designed to elicit a negative emotional experience remembered more positive newspaper headlines than negative newspaper headlines. They also attributed the negative relationship event to less global and less stable causes. Their performance, in light of exposure to an experience designed to elicit a negative emotional experience, demonstrates the internal resiliency afforded to the internal working models of
those with secure attachment styles. Based on these results Pereg and Mikulincer (2004) hypothesized that this internal wellspring of positivity works to “inhibit the spread of negative [experience] throughout working memory and to activate competing positive cognitions (positive headlines, attributions that maintain a positive view of the partner)” (p.88).

Anxiously attached individuals were less fortunate. Exposed to a stimulus designed to elicit a negative emotional experience, they recalled more negative newspaper headlines than positive. They were also more likely to attribute more global and more stable causes to the negative relationship event. These results are most significant because they indicate that negative cognitions about a romantic partner may be triggered in the mind of an anxiously attached individual not only by the behavior of his or her partner, but also by events which elicit negative emotional experiences that are completely unrelated to him or her.

Finally, Pereg and Mikulincer (2004) observed that stimuli designed to elicit negative emotional experiences had no significant impact on individuals who possessed an avoidant attachment style.

Positive emotional experiences, like negative emotional experiences, also have cognitive implications. Isen (1987, in Pereg & Mikulincer, 2004) discovered that positive emotional experiences influenced participants to think more creatively – that is, they made more unusual associations between objects held in cognition and used broader mental categories. Isen, Daubman, and Nowicki (1987, in Pereg & Mikulincer, 2004) also found that inducing positive emotional experiences improved creative problem-solving performance and caused participants to sort items into more inclusive categories.

Seizing on this Mikulincer and Sheffi (2000) investigated the role of attachment styles in the creation of positive emotional experiences in individuals. They determined that exposing individuals with secure, anxious, and avoidant attachment styles to a stimulus designed to elicit positive emotional experiences actually did so only to those individuals who were securely attached. It had no emotional impact on avoidantly attached individuals, while negative emotions were induced in anxiously attached
individuals – that is, their creativity became impaired and they experienced a narrowing of mental categories.

In summary, these results clearly demonstrate the superiority of a secure attachment style. Those who possess them are buffered from negative emotional experiences on the one hand while easily enjoying positive emotional experiences on the other. Those individuals with avoidant attachment styles, however, while they are protected from the consequences of negative emotional experiences, they also seem somewhat immune from experiencing positive emotions. Meanwhile, individuals who are anxiously attached suffer the worst of all positive worlds – their internal working models seem to foster negative reactions regardless of whether they are exposed to experiences designed to elicit emotions that are either positive or negative (Mikulincer, Shaver, & Pereg, 2003).

Investigating correlation and causation

Having determined that attachment styles were closely correlated both with relationship satisfaction as well as emotional experience researchers began to wonder about the causal relationships amongst all three. Were attachment styles correlated with relationship satisfaction because they possessed some innate attribute or were they highly correlated with relationship satisfaction only because they were also highly correlated with emotional experience? Further research was needed to answer these questions. Fortunately, both of them were addressed by Meyers et al. (2002) and Davila, Bradbury, and Fincham (1998).

Davila et al. (1998) found moderate support for their hypothesis that negative emotional experience was more causally related to relationship satisfaction than what were attachment styles. In a later study, Meyers et al. (2002) were able to make some more global conclusions, finding that “psychological distress mediates the association between secure attachment and [relationship] satisfaction” (p. 167) such that the emotional health conferred upon individuals with secure attachment styles (Pereg & Mikulince, 2004) is a more important correlate to relationship satisfaction than the
attachment style itself. Conversely, they also determined that the social isolation associated with individuals possessing avoidant attachment styles is correlated to relationship dissatisfaction more so than its attendant attachment style. They also determined that the addition of psychological distress to any relationship (secure or insecure) increases dissatisfaction regardless of attachment style, indicating that positive and negative emotional experience is indeed the moderating variable. Emotional experience is highly influenced by an individual’s attachment style and also highly impacts relationship (dis)satisfaction. These empirical results, in turn, and others like them, laid the groundwork for the development of emotionally focused therapy (Johnson, 2003).

In summary, attachment theorists and researchers have spent more than 50 years painstakingly studying the formation of infant attachment styles and tracing those implications across the human lifespan. Their discoveries have shed light on the profound coherence of the human psyche – the fact that an individual’s experiences in infancy may be directly correlated to a myriad of choices he or she will make decades later.

Their research has had a direct and positive impact on clinical practice as well. Emotionally focused therapists have significantly exploited the discoveries researchers have made regarding early childhood experiences, attachment styles, internal working models, emotional experience, and their impact on nuanced human relationships.

Before focusing our attention on these clinical ramifications, however, we would be remiss were we not to pause to note that many tenets of attachment theory, painstakingly developed by researchers over the past half century, were intuitively grasped by Alfred Adler decades earlier. As Ellenberger (1970, in Sweeney, 2009) has noted:

Any attempt to assess the influences of Adler’s work brings about a paradox. The impact of individual psychology stands beyond any doubt... [but] it would not be easy to find another
author from which so much has been borrowed from all sides without acknowledgment than

Alfred Adler. (p. 645)

We will therefore devote our next chapter to elucidating the tenets of individual psychological theory before investigating the many theoretical parallels that exist between it and attachment theory.

Chapter 6: The origins and theoretical constructs of Alfred Adler’s individual psychology

Alfred Adler’s theory of human nature was deeply influenced by (and developed largely in juxtaposition to) Sigmund Freud’s theory of psychoanalysis (Ansbacher & Ansbacher, 1956). Therefore, any exposition of Adlerian thought, must begin with this context in mind.

At the outset of Adler’s career both he and Freud were quite close. Freud invited Adler to join his Vienna Circle in 1902. Adler quickly rose through its ranks and soon became a prominent member of the group, eventually being named Freud’s successor as president of the Vienna Psychoanalytical Society and coeditor of the journal Zentralblatt für Psychoanalyse. However, the theoretical tensions that emerged between both of them eventually led Adler to resign from the society. He parted ways with Freud in 1911.

Due to their close association at the outset of Adler’s career, it has often been assumed that Adler was Freud’s disciple and/or that his theory, individual psychology, was simply a repackaging of Freudian thought under the guise of not-so-different terminology. In fact, individual psychology may be more accurately described as the antithesis of Freudian thought, a fact which Adlerian proponents have long proclaimed (Ansbacher & Ansbacher, 1956).

Freudian theory and its implications

The differences between psychoanalysis and individual psychology may be most concisely observed by investigating Freud and Adler’s conception of the self and the role which it plays in their respective theories.
Sigmund Freud’s first inclination was toward the natural sciences, a fact reflected in psychoanalytic theory. Natural scientists work to classify observable phenomena so that they may make generalized assumptions about the world in order to increase their knowledge. For example, “robin” have been identified as a subset of bird such that what a scientist discovers about one of them he or she may safely generalize to all the rest. Freud believed that a similar classification of human experience was the best way to obtain psychological knowledge. Many lay people are familiar with the categories that he devised (i.e. Id, Ego, Superego, etc.).

Freud’s classification of human experience into component parts carried with it several ramifications. First (and most positively), it provided him with a clear and concise theory of human nature amenable to scientific inquiry. Since everyone was presumed to have an Ego, and since they all functioned in the same way, whatever was discovered about any one of them could be easily generalized to all the others.

Unfortunately Freud’s concise theoretical classifications were purchased at the expense of self-concept. Split into separate and dueling spheres of influence the Ego (self) became merely the battleground for Id and Superego — all motivation for human behavior was relegated to various biological drives (Ansbacher & Ansbacher, 1956). Patients’ internal experiences were subjugated to interpretation that reinforced the main tenets of Freudian thought. For instance, the belief that every patient wanted to supplant his father and marry his mother was left unquestioned; the only inquiry left to pursue was the specific way in which any particular patient was trying to do it.

The Adlerian concept of self

Alfred Adler’s approach was markedly different. Contrasted against Freud’s general classifications he developed what may be a subjective and functionally relevant theory of human nature (Ansbacher & Ansbacher, 1956). Whereas Freud’s self was merely the receptacle of all physiological drives — Adler posited that the self was, in fact, the sine qua non of human experience — the “me” that
moves through the world making decisions hour by hour, minute by minute. Rather than being
definable by some general classification, Adlerian selves are each as unique as the more than 6 billion
individuals currently living on this planet. Each possesses different perspectives, goals, and dreams.

*Adler’s socio-teleo-analytic theory of human nature*

*Socio.* If every Adlerien self is uniquely distinct from every other that raises the immediate
question, “How can we gain specific knowledge of any one of them?” Adler answered that all human
beings are social creatures, that each one of us is born with an innate desire to be part of a larger social
whole, and that each one of us is born to strive to achieve feelings of belonging. It was his belief that
just as we strive to become part of a larger social group so too they were formed by it. He thought that
each individual could only be understood from within the social context within which they were
embedded (Sweeney, 2009).

Alfred Adler believed that an individual’s early experiences had the power to shape his or her
perceptions of the world in a way that was especially strong. Since infants’ cognitive abilities are quite
limited and since they have very little life experience, he believed that their early childhood impressions
of themselves, the world, and especially their caregivers were quite formative and became the basis by
which they developed systems of rules that gradually helped them to understand, predict, and manage
events in their lives (Sweeney, 2009).

Adler used the term schema of apperception to refer to these rules *in toto.* He used the term
lifestyle to refer to their physical expression. For example, we may conclude about a person observed
repeatedly donating large sums of money to charity that he has a charitable lifestyle and that his
schema of apperception may contain a rule or belief something like “It is good to help people”. From
our observations we may also hypothesize that generous giving may have been modeled to him in his
life by his parents (or some other significant influence) when he was younger.
Not everyone is charitable, however. Adler believed that every individual’s schema of apperception, by which he or she perceives the world, is unique, that is, that it serves as the subjective lens by which he or she interprets ultimate reality. He thought that each individual’s behavior, or lifestyle, was simply the physical expression of an individual’s attempts to achieve his or her goals according to the unique rule structure that comprised his or her schema of apperception.

Teleo. While Adler may have believed that every individual was unique he had some very distinct and universal beliefs about human nature (Ansbacher & Ansbacher, 1956). As the natural result of being born an infant into an adult’s world, he believed was that every individual’s schema of apperception was instilled with feelings of inferiority. Adler thought that all human behavior was goal-oriented – subjugated towards the aim of decreasing feelings of inferiority and increasing one’s personal sense of security and well-being, or, as he phrased it, superiority.

Since feelings of inferiority are universal, but every individual’s schema of apperception is unique in other respects, Adler believed that the concrete goals he or she identified to mollify them (wealth, status, charitable giving, etc.), and the means by which he or she chose to pursue them, would also be unique (Sweeney, 2009). Although Adler stressed that striving for superiority was, in and of itself, morally neutral, he believed that the various ways in which individuals did it could be either positive or negative.

As social creatures, Adler believed that all human beings derived benefit from contributing to their larger social group. He coined the term social interest to describe the extent to which a person was socially competent and outwardly focused. He believed that healthy individuals, those possessing a high amount of social interest, would pursue feelings of superiority by striving to obtain goals outside of themselves that also brought benefit to their larger social group, for instance, providing therapeutic services to individuals or philanthropic giving. He believed that unhealthier individuals, or those lacking
in social interest, would pursue goals that were more internally oriented and ultimately destructive to themselves and others, for instance, the pursuit of drug consumption (Ansbacher & Ansbacher, 1956).

Analytic. Adler believed that many of the factors determining whether a person would act in a socially interested or socially disinterested way were largely unconscious. By unconscious he referred not to a nebulous region of the mind that was forever unknowable (Freud’s conception) but rather to mental content, i.e. beliefs and rules comprising one’s schema of apperception, of which an individual was merely ignorant. He believed that a person’s lifestyle, built upon the foundation of unexamined beliefs, continued to function unless interrupted by major life circumstances. (Sweeney (2009) notes that a person’s lifestyle may also be modified by organic factors such as a brain injury or drug overdose.) Adler thought that effective therapeutic intervention during these times of crisis lay in helping individuals discover the various mistaken beliefs that were unconsciously contributing to their crisis, examine them thoroughly, and then work to make changes as needed.

In conclusion, Alfred Adler developed a theory of human nature which expressed many of attachment’s theory’s key precepts fully one generation before John Bowlby began his early theorizing. Specifically, Adler postulated that human beings were social creatures whose development was deeply impacted by the context of their social environments. He believed that individuals’ early life experiences, in particular, played a large role in formulating the lens through which they would later perceive and interact with the world. He believed that those raised in warm, supportive, and encouraging environments would develop perceptual lenses that would predispose them to express large amounts of social interest in later life, the presence of which, according to him, was the mark of a psychologically healthy adult. Adler also believed that this perceptual lens would remain largely unaltered throughout life unless upended by some combination of particularly strong life circumstances. Given these many similarities, we will now compare the tenets of individual psychology with those of attachment theory using many of Adler’s own words.
Chapter 7: Interpreting Adler through the lens of attachment theory

An ethological base

We began our exposition of attachment theory by stating that its origins were ethological. That is, it was based upon observations made in the natural world. As such, its basic tenets correlate well with evolutionary theory: the attachment system no doubt originated in part to protect our ancestors’ offspring from the various dangers they would have faced daily in the wild (Bowlby, 1988). Writing in 1927, Adler made many of the same observations. He stated:

Darwin already pointed out that one never finds weak animals living alone. Man must be included among these, particularly because he is not strong enough to live alone. He has only little resistance against nature; he needs a large amount of aids to live and preserve himself. Consider the situation of a man in a jungle, alone and without aids provided by culture. He would appear incomparably more threatened than any other creature...Now we can understand that man could maintain himself only when he placed himself under particularly favorable conditions. These, however, were afforded to him only by group life. (Ansbacher & Ansbacher, 1956, p. 129)

Attachment needs and feelings of inferiority

Alfred Adler stated that the prepotent dynamic force, the lens through which all human activity could be interpreted, was striving to move from a position of inferiority to superiority, from a felt minus to a felt plus. Adler stated that our feelings of inferiority were obtained in childhood writing:

If we consider that every child is actually inferior in the face of life and could not exist at all without a considerable measure of social interest on the part of those close to him, if we focus on the smallness and helplessness of the child which continues so long and which brings about the impression that we are hardly equal to life, then we must assume that at the beginning of
every psychological life there is a more or less deep inferiority feeling (Ansbacher & Ansbacher, 1956, p. 115).

Thus children when first born are weak, and their weakness makes it necessary for other persons to care for them. The style or the pattern of a child’s life cannot be understood without reference to the persons who look after him and who make up for his inferiority. The child has interlocking relations with the mother and family which could never be understood if we confined our analysis to the periphery of the child’s physical being in space (Ansbacher & Ansbacher, 1956, p. 127).

Reading Adler’s words above, we can easily make comparisons between his deep inferiority feeling construct and the need for attachment postulated by attachment theory. Note also that Adler’s observations concerning the infant’s external environment also align well with those of attachment theory. Both recognize the innate neediness of the child and place special emphasis on his or her dependence on (hopefully) warm, supporting caregivers.

Secure vs. insecure; socially interested vs. discouraged

Adler differentiated healthy individuals from unhealthy individuals by the means they employed to obtain a feeling of superiority. He stated that healthy individuals (those socially interested) would strive to achieve goals outside of themselves that would also improve the lives of others. On the other hand, unhealthy individuals (those lacking social interest) would maintain a self-focus on internal goals and largely work to the detriment of humanity (Ansbacher & Ansbacher, 1956). Reading Adler through the lens of attachment theory, we observe that the distinctions he made between socially interested and socially disinterested or discouraged children correlate quite closely to attachment theorists’ descriptions of children with secure and insecure attachment styles, respectively. Adler writes:

Only a child who desires to contribute to the whole, whose interest is not centered in himself, can train successfully to compensate for defects...They can keep up their courage only if they
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have a purpose in view... It is a question of where their interest and attention is directed. If they are striving towards an object external of themselves, they will quite naturally train and equip themselves to achieve it. Difficulties will represent no more than positions which are to be conquered on their way to success. If, on the other hand, their interest lies in stressing their own drawbacks or in fighting these drawbacks with no purpose except to be free from them, they will be able to make no real progress (Ansbacher & Ansbacher, 1956, p. 112-113).

We can clearly see in these lines the description of a securely attached infant – one who is confident in his or her secure base, and who has the courage to both focus on and explore the external world. In contrast, we also recognize in the last two lines the description of an anxiously attached child – one suffering the internal duress of unmet attachment needs, which will keep his or her attention focused internally to the detriment of both his or her mental life and the exploration of the external world.

Regarding such anxiously attached children, Adler further elaborates:

[Anxiously attached] Children... much more than normal children, develop inferiority feelings, strive to compensate these lacks and to arrive at a goal in which they foresee and presume a feeling of superiority... They are attacked much more by the difficulties of life and feel and live as though they were in an enemy country. Fighting, hesitating, stopping, escaping, much more occupied with their own persons than with others... they fear defeat more than they desire success.

This same burden and pessimistic view originates also when the environment is unfavorable. Therefore, we find this great feeling of inferiority also among pampered children. Living in a kind of symbiosis, like parasites, always connected with their mother, their goal of superiority is to make this relationship permanent. Each change terrifies them. But changes are unavoidable. Thus the normal feeling of inferiority becomes increased. Their social interest is lacking in a high degree and only developed towards the mother... Later in life they are not adapted for
occupation, love, and marriage, because they consider only their own welfare and are not looking for the interests of others (Ansbacher & Ansbacher, 1956, p. 118).

Although Adler is harsher in his judgment, and places more onus for behavioral outcomes on the child than do modern attachment theorists, we can clearly see many of the hallmarks of anxious attachment – a child who suffers an inordinate amount of negative emotional experiences due to his or her unmet attachment needs. As a result, otherwise typical life events cause the child extreme duress, for which he or she attempts to compensate by moving ever closer to and maintaining contact with his or her attachment figure (mother). Unable to find relief from this arrangement he or she tends to maintain an internal focus throughout life if no interventions are made.

Expanding our focus somewhat, we see that Adler also had early insight into the more global aspects of anxious attachment style creation, writing:

The mother is the first other person whom the child experiences. Here is the first opportunity for the cultivation of the innate social potentiality. But even here, at the very beginning, many mistakes can be made. For instance, the mother is often satisfied with a restricted social environment for the child, and does not concern herself with the fact that he must go from her care into a much wider circle of human contacts. In such a case the mother concentrates the child’s social potentialities upon herself. She does not help the child to extend his interest to others besides himself. (Ansbacher & Ansbacher, 1956, p. 135)

Adler makes the link between increased inferiority feeling, i.e. unmet attachment needs, and lack of social interest and courage, i.e. insecure attachment, by stating:

[To understand the complete coherence of a case of failure] one must always consider an increased inferiority feeling within the first five years of childhood and, closely tied up with this, a lack of social interest and courage... (Ansbacher & Ansbacher, 1956, p. 157)
Although Adler’s concept of low social interest (or the discouraged child) seems to have more in common with an anxious attachment style, he also had insight into the human behavior theorists would later describe as an avoidant attachment style:

Since the feeling of inferiority is generally regarded as a sign of weakness and as something shameful, there is naturally a strong tendency to conceal it. Indeed, the effort of concealment may be so great that the person himself ceases to be aware of his inferiority as such...So efficiently may an individual train his whole mentality for this task that the entire current of his psychic life...escapes his own notice. (Ansbacher & Ansbacher, 1956, p. 119)

**Social interest and the secure attachment style**

So far we have focused on attachment needs and the creation of insecure attachment corollaries, both of which are abundant themes in Adler’s writings. There are also striking similarities between the secure attachment style construct and Adler’s conception of social interest.

Before investigating either concept, however, let us note that these concepts occupy very similar positions in their respective theories. The advantages of a secure attachment style over an insecure attachment style are indisputable. Adler considered a well-developed sense of social interest the hallmark of every healthy human being and its deficit the cause of many human maladies (Ansbacher & Ansbacher, 1956).

As we may recall from Hazan and Shaver (1987), securely attached individuals had a solid, positive view of romantic relationships, reported warm relationships with their parents (both past and present), and tended to think of themselves as easy to get to know and liked by most people. Their view of others was also generally warm. They tended to believe that others were basically well-intentioned and good-hearted. Brennan and Shaver (1995) helped us round out this assessment by reporting that securely attached individuals demonstrate an ability and willingness to trust their romantic partners,
and also that they share ideas and feelings in a manner that is flexible, appropriate, and sensitive to their partners’ needs (Mikulincer & Nachson, 1991; Simpson et al., 1992 in Brennan and Shaver, 1995).

Adler took a slightly different tack. He focused more on describing social interest and the psychological role it plays than describing the characteristics of an individual in possession of it. Nevertheless, we can imagine how an individual in possession of social interest would fit the description of Hazan and Shaver (1987) and Brennan and Shaver (1995) above. Adler writes:

As long as the feeling of inferiority is not too great, a child will always strive to be worthwhile and on the useful side of life...The only salvation from the continuously driving inferiority feeling is the knowledge and the feeling of being valuable which originate from the contribution to the common welfare...When social interest has been from the first instilled into the upward strivings of the psyche, it acts with automatic certainty coloring every thought and action. Where this automatized social feeling is deficient, the individual’s interest is too self-centered, and he feels that he is impotent, or a nobody. All his other feelings are [then] more or less directly connected with this [social] feeling. They do not exist sui generis, nor do they control action, although they are often used to do so...It is impossible to exaggerate the value of an increase in social feeling. The mind improves, for intelligence is a communal function. The feeling of worth and value is heightened, giving courage and an optimistic view...The individual feels at home in life and feels his existence to be worthwhile just so far as he is useful to others and is overcoming common, instead of private, feelings of inferiority. (Ansbacher & Ansbacher, 1956, p. 155).

Reading the previous passage with the benefit of 80 years of hindsight, we see Adler beginning to develop nascent concepts of attachment needs, secure and insecure attachment styles, positive and negative emotional experience, and the relationships that exist among all three.
Working models and the schema of apperception

As we may recall it was Main (1985) who first distinguished between attachment style behavior and its psychological implications. Her research confirmed Bowlby’s basic hypothesis that our early childhood experiences, especially those related to attachment, significantly impact the formation of our internal working models – generalized mental representations of ourselves, others, and the world formed by our past experiences, which include both cognitive and emotional components that impact our perception of present and future events.

Adler’s conception of human perception, as we have previously stated, was equally subjective (Ansbacher & Ansbacher, 1956). He posited that each individual developed a lifestyle based upon early childhood experiences that collectively impacted the development of one’s schema of apperception, which, unless disrupted in some fashion, continued to influence an individual’s perception of the world for his or her entire life. Regarding both, Adler writes:

The first four or five years are enough for the child to complete his specific and arbitrary training in the face of impressions from his body and the environment. From then on the creative activity and the style of life begins its work. Experiences become assimilated and utilized according to the style of life, by the structure of which the individual is determined. To facilitate this activity personal rules and principles, character traits, and a conception of the world become elaborated. A well-determined schema of apperception is established, and the child’s conclusions and actions are directed in full accord with the final ideal end-form of which he aspires (Ansbacher & Ansbacher, 1956, p. 183)

It is this fact which enables us to predict what will happen later in life. The individual’s apperceptions are from then on bound to fall into a groove established by the line of direction. The child will not perceive given situations as they actually exist, but under the prejudice of his own interests. From now on, the world is seen through a stable schema of apperception:
Experiences are interpreted before they are accepted, and the interpretation always accords with the original meaning given to life. Even if this meaning is very gravely mistaken, even if the approach to our problems and tasks brings us continually into misfortunes and agonies, it is never easily relinquished...In itself this was, to be sure, no particularly bold discovery, for similar observations have been made by investigators of all times. What was new in our formulations was that we sought to bring the childhood experiences, impressions and attitudes, so far as they could still be traced, into connected relationship with later manifestations of the mental life by comparing the childhood experiences with later situations and attitudes. In so doing, it became particularly significant that one can never regard single manifestations of the mental life as separate entities, but that one can gain understanding of them only if one understands all manifestations of a mental life as part of an indivisible whole...and recognizes that the secret goal of the child’s attitude is identical with the individual’s attitude in later years. (Ansbacher & Ansbacher, 1956, p. 189-190)

Chapter 8: Comparing therapeutic techniques: emotionally focused and Adlerian therapies

Given the many similarities that we have discovered between the theories of individual psychology and attachment theory it should come as no surprise that the respective therapeutic techniques to which they have given rise (Adlerian psychotherapy and emotionally focused therapy, respectively) should contain many similarities as well. We will devote our next chapter to describing both therapeutic approaches and detailing the similarities and differences that we find.

Emotionally focused therapy

As stated previously, emotional experience, strongly influenced by an individual’s attachment style, is highly correlated with relationship satisfaction (Davila, Bradbury, & Fincham, 1998; Meyers et al., 2002; Pereg & Mikulincer, 2004). Emotionally focused therapy (EFT) is based on the premise that relationship distress is both fostered and maintained by individuals’ perceptions of the world and the
corresponding emotions that those perceptions evoke. Targeting these emotional responses they are able to help their clients transform both their perceptions (internal working models/schemas of apperception) and their behavior. As Johnson (2004) writes:

> Emotions tell us and others what we want and need, and prime key actions – especially relationship responses...emotional frames or blueprints are constructed in relation to situations that frustrate or satisfy needs and goals. These frames then guide people in the differentiation and classification of experience, and in organizing expectations and reactions (Greenberg, Rice, & Elliot, 1993). These frames help us predict, interpret, respond to, and control our experience...In therapy, such blueprints are activated and made available for exploration and development; they may then also be modified by new experience. Emotion is accessed, developed, and restructured, and is also used to transform ways of constructing experience from moment to moment...It is a target and agent of change (Johnson, 2004, p. 44 emphasis added).

**Validating research**

The goals and techniques of EFT have been validated by research (Johnson, Hunsley, Greenberg, & Schindler, 1999). Specifically, it has been found to be more effective than either skill-building or cognitive-behavioral approaches, and obtains the best results of all couples-based therapeutic approaches in the literature at present.

Studies have demonstrated that 70-75% of couples recover from relationship distress after approximately 10-12 sessions of EFT and that 90% rate themselves significantly improved. Perhaps more importantly, the outcome of EFT seems less affected by the severity of initial distress than other approaches are. Specifically, severity of initial distress was found to account for only 4% of the variance of couples’ satisfaction derived from follow-up interviews. For couples receiving a behavioral therapeutic approach, by contrast, the severity of initial distress accounted for 46% of the variance in their satisfaction (Whisman and Jacobsen, 1990).
EFT relapse rates are also fairly low, even in very stressed, “at risk” couples, who might be most expected to relapse. Research has also indicated that couples’ relationships tend to continue improving after therapy ends (Johnson et al., 1999).

**EFT characteristics**

While the “look” of any therapeutic approach is difficult to convey within the confines of the written word a therapist implementing EFT successfully will, among other things:

- Create a strong therapeutic bond (a secure base) with his or her client. Specifically, her or she will do this by validating his or her client’s attachment needs and fears, and by promoting safe emotional engagement, comfort, and support.
- Explicitly address his or her clients’ emotional responsiveness and accessibility. Both partners who have withdrawn and those who are prone to blaming will be supported and encouraged to soften so that bonding events – the antidote to negative relationship behavioral cycles – may occur.
- Explicitly address pivotal attachment responses in order to both address attachment injuries that block relationship repair, and also redefine the relationship.
- Focus on how the self is defined and may be redefined in terms of relationship with attachment figures.

**EFT techniques**

EFT therapists use a variety of techniques to achieve their goals including:

**Validating.** This is the most basic intervention. The therapist invites clients to engage with their experience and works to reframe it in a way that is both legitimate and acceptable. For example, “It’s so hard for you to even hear what he is saying? You just cannot believe that he might want to be close to you – when you feel so small, so needy. You don’t feel entitled to be held and comforted right now, is that it?” (Johnson, 2003, p. 113)
Reflecting emotional experience. The therapist both reflects and clarifies emotional responses and works to associate them with underlying attachment issues. For example, “Could you help me to understand? I think you’re saying that you become so what you call “tight” in these situations that you want to hold onto everything, keep everything under control? And then you get very curt with your husband when he begins to “rock the boat” and talk about what is missing in the relationship. Is that right?” (Johnson, 2003, p. 113)

Evocative Responding. The therapist asks open questions designed to heighten a client’s perception of his or her physiological/emotional responses during therapy. For example, “What’s happening right now, as you say that?” “What’s that like for you?” “So when this happens some part of you wants to reach out, but another part of you is screaming out that it is too dangerous?” (Johnson, 2003, p. 113)

Heightening. The therapist uses metaphors, images, enactments, etc. to heighten a client’s cognitive/emotional awareness and bring attention to the way he or she is interpreting stimuli. For example, “So could you say that again directly please, ‘I do turn away, I do shut you out.’” or, “Can you turn and tell her, ‘It’s too hard to tell you about my longing?’” (Johnson, 2003, p. 113)

Emphatic conjecture or interpretation. This is more forceful than heightening. The therapist directly formulates the client’s experience, stating it more directly than the client has. For example, “You try to protect that raw, sensitive part of you by keeping a ‘barrier’ between you and the world, but then it gets a little lonely behind there, is that it?” (Johnson, 2003, p. 113)

Tracking, reflecting, and replaying interactions. The therapist interrupts client interactions to more carefully investigate and clarify them. For example, “Can I stop you for a moment? What just happened here? You smiled at him when he said he loved you, but then you turned your head and said ‘Is that right’ and began to recount that time he let you down and you decided to be ‘separate and strong.’” (Johnson, 2003, p. 114)
Reframing in the context of the cycle and attachment processes. The therapist reinterprets clients’ specific experiences and explicitly investigates ways in which they fit into each partners’ attachment needs and fears. For example, “You go still and tight because you feel like you’re right on the edge of losing her, yes? You go still because she matters so much to you, not because you don’t care?” (Johnson, 2003, p. 114)

Restructuring and shaping interactions. The therapist helps his or her clients to clarify and reshape their old patterns of interaction as well as enact new ones. For example, “You have just spoken about being sad. Could you tell him right now about that sadness?” “Can you ask him for what you need right now?” (Johnson, 2003, p. 114)

In summary, emotionally focused therapists work with their clients to express and process the emotionally charged interactions at the heart of many negative cycles of relationship dysfunction. They do this by first heightening their personal awareness (of thoughts, emotions, and the contents of their internal working models). They then help them to process their negative emotional experiences and make changes. As negative cycles of relationship dysfunction abate, emotionally focused therapists shift their focus to consolidating their clients’ gains. They do this by helping them integrate new, healthier models of interaction into their relationships. This fundamental shift in both attitude and behavior fundamentally alters their internal working models and helps crystallize their new patterns of interaction. Let us now turn our attention to a description of Adlerian therapeutic techniques.

Adlerian therapeutic techniques

As stated previously, Adler believed that every human being attempts to ameliorate feelings of inferiority by pursuing goals which he or she thinks will move him or her towards feelings of security (Ansbacher & Ansbacher, 1956). Psychopathology, he believed, is simply the result of mistaken beliefs, which skew clients’ schemas of apperception, and hence, both the goals they pursue and the means by which they pursue them. The aims of Adlerian therapists, therefore, are twofold.
First and foremost, Adlerian therapists work to investigate their clients’ lifestyles/private logic for mistaken beliefs. Doing so, Adler believed, will help them replace their mistaken beliefs with common sense. He wrote:

The uncovering of the neurotic system, of the life-plan (or style of life) for the patient, is the most important component in therapy. The reason for this is that the life-plan in its entirety can be kept intact only if the patient succeeds in withdrawing it from his own criticism and understanding (Ansbacher & Ansbacher, 1956, p. 334)

Therapists’ second task is to gently expose their clients’ mistaken beliefs, providing the encouragement that will help their clients release them and replace them with new beliefs and modes of behavior that are more socially interested.

Although modern Adlerian psychotherapists have taken pains to add some additional structure, their aims and methods differ little from those first established by Adler (Rule, 2006).

Dreikurs (1967) identified four phases of therapy which he termed the relationship, lifestyle investigation, lifestyle interpretation, and reorientation phases. During the relationship and lifestyle investigation phases, Adlerian therapists help their clients first comprehend and clarify their lifestyles/private logic by the use of various techniques, including:

*Attending.* Adlerian therapists provide their undivided attention to their clients by listening to their presenting problems and making observation of their physical behavior and appearance. Attending is particularly important during the initial phase of therapy while the therapist is working to assemble an accurate and unbiased impression of his or her client’s lifestyle.

*Responding.* This is the process by which Adlerian therapists respond to what they have observed their clients do and say. When responding, it is important that the therapist convey empathy and that he or she accurately mirror back to the client both the content and the emotional *timbre* of his
or her client’s speech. Doing so will convey to the client that he or she is being accurately heard and will deepen the client-therapist bond.

**Guessing.** Adler emphasized the importance of taking educated guesses when working to ascertain clients’ lifestyles. That is, he emphasized a stance of humility, of not “lecturing” a client or “telling” him or her what the problem was, but in forming a working hypothesis and always being willing to update it in light of new evidence.

**Personalizing.** This is the process whereby the therapist helps his or her client to further clarify the problem he or she is experiencing. In so doing, he or she helps his or her client to gain increased understanding and move from the general, e.g. “I feel anxious”, to the more personally explicit, e.g. “I feel anxious because it seems like the number of tasks I have set before myself are overwhelming and beyond my control”.

Having investigated the client’s lifestyle and helped him or her arrive at the crux of his or her particular dilemma, the Adlerian therapist next moves into the lifestyle interpretation phase and begins to challenge his or her client’s mistaken beliefs. The therapist may do so by challenging “over-generalizations, false or impossible goals of security, misperceptions of life and life’s demands, the minimization or denial of one’s worth, [and] faulty values.” Mosak (1979 in Rule, 2006, p. 22)

After challenging and helping his or her client explore mistaken beliefs and assumptions the Adlerian therapist next helps him or her begin the re-orientation phase of therapy, during which he or she will help the client develop new goals and provide him or her the encouragement necessary to make changes and achieve those goals. In order to do so, he or she will need to help the client:

1. Identify decisions the client is making that are contributing to his or her present difficulties
2. Help him or her make new decisions more in line with stated goals
3. Identify personal assets the client can use to help obtain his or her goals
4. Help the client explore the interrelatedness of thinking, feeling, and doing. Specifically, the therapist will help his or her client identify thinking processes related to his or her lifestyle, and the ways in which they impact and interact with his or her emotions and behavior.

5. Foster an increased “other-directedness” in the client, i.e. social interest (Rule, 2006)

**EFT and Adlerian therapies – similarities and differences**

At first glance, the differences between EFT and Adlerian psychotherapy (AP) may be more apparent than their similarities. AP is often conducted with individuals rather than couples; it has also been widely used in school settings. Adlerian therapists rely a great deal on exploring their clients’ pasts in order to help them make changes in the present. EFT therapists, by contrast, typically work with couples and focus almost exclusively on the present (both emotions and perceptions) in order to help their clients make changes.

That being said, while there may be significant differences in terms of both prognosis and scope, one may also identify a significant number of similarities. The EFT technique of validating, for instance, is very similar to the Adlerian technique of attending. Likewise, the EFT techniques of reflecting emotional experience and evocative responding are also closely correlated with the Adlerian techniques of responding and personalizing.

From a more global perspective, both AP and EFT models are non-pathologizing. This means that they regard mental and relationship problems not as the result of some fundamental human defect or deficiency but rather as the natural byproduct of self-ignorance, which can be significantly lessened by psychotherapy.

It should also be noted that the therapeutic stance required to successfully conduct both therapies is also very similar. Both AP and EFT models emphasize the importance of the client-therapist bond. Both advocate an approach towards the client that is curiously questioning – one who is always willing to revise current hypotheses in the wake of new information.
Perhaps the greatest similarity between AP and EFT, however, is the focus of treatment. Successful AP and EFT fundamentally changes clients’ schemas of apperception or internal working models, respectively. Perhaps the greatest difference between AP and EFT (which is not that different), is the way in which they seek to achieve this goal.

As previously stated, schemas of apperception/internal working models are comprised of implicit beliefs and heavily influence both our perceptions and emotional experiences. AP appears to place more emphasis on heightening one’s awareness of one’s implicit beliefs, i.e. private logic, in order to evoke change. EFT appears to place more emphasis on heightening one’s awareness of one’s emotional experiences in order to evoke change. For instance, Rule (2006) states that an Adlerian psychotherapist might invite a client to summon several emotionally charged memories to mind in order to demonstrate that he or she has more control over his or her emotional experience than what he or she believes, whereas an emotionally focused therapist would likely focus on the emotional experience itself and help his or her client determine what sort of thoughts and/or memories corresponded to it (Johnson, 2006).

There is also significant overlap in this area however, and the relative emphasis that AP and EFT place on implicit beliefs and emotional experience, respectively, may simply reflect the order in which each are addressed in treatment. Near the end of the therapeutic process, for instance, after emotional experiences have been explored and negative behavior cycles have been reduced, emotionally focused therapists will help their clients explicitly re-orient their self-concept, i.e. schema of apperception/internal working model, in light of their changed emotional experiences and patterns of interaction with their partners. Similarly, during the re-orientation of AP, Adlerian therapists will help their clients identify ways in which their thinking impact their emotional experiences and behavior. (See #5 above.)
Chapter 9: A future of Adlerian and attachment theory synergy?

Having investigated both the theories of individual psychology and attachment theory along with their respective therapeutic offshoots we have discovered many more similairities than differences. Yet, each seems to possess something that the other lacks. The tenets of attachment theory, for instance, have been validated by decades of research in ways that those of individual psychology have not. However, AP has been used in a variety of therapeutic settings including individual, couple, family, and school; whereas the scope of EFT has been much more limited to date and is used primarily in a couples counseling context (Peluso, Peluso, White, & Kern, 2004).

Peluso et al. (2004) note the similarities between questions featured on the Adult Attachment Interview and those developed by various Adlerians (Kern, 1988; Eckstein & Baruth, 1996; Mosak & Shulman, 1988, in Peluso, et al., 2004):

Table 9.1

<table>
<thead>
<tr>
<th>Adult Attachment Inventory Questions</th>
<th>Lifestyle Interview Questions</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. To begin with, could you just help me to get a little bit oriented to your family – for example, who was in your immediate family, and where you lived?</td>
<td>Who is in your family?</td>
</tr>
<tr>
<td>2. Now I’d like you to try to describe your relationship with your parents as a young child, starting as far back as you can remember.</td>
<td>Early recollection techniques in all Lifestyle Interviews: Think back as far as you can...</td>
</tr>
<tr>
<td>3. Could you give me five adjectives or phrases to describe your relationship with your mother/father during childhood? I’ll write them down, and when we have all five I’ll ask you to tell me what memories or experiences led you to choose each one.</td>
<td>Family constellation descriptions of mother/father Describe the nature of your parents’ relationship. Which child was mom or dad’s favorite? Who were you most like, mother or father?</td>
</tr>
<tr>
<td>4. To which parent did you feel closer, and why?</td>
<td>Which of your parents was your personal favorite?</td>
</tr>
<tr>
<td>5. When you were upset as a child, what did you do, and what would happen? Could you give me some specific incidents when you were upset emotionally? Physically hurt? Ill?</td>
<td>What were some of your childhood fears or traumas?</td>
</tr>
</tbody>
</table>
7. Did you ever feel rejected as a child? What did you do, and do you think your parents realized they were rejecting you?

8. When you misbehaved, who disciplined you?

9. How do you think your overall early experiences have affected your adult personality? Are there any aspects you consider a setback to your development?

10. To what extent did you accept, reject, or modify the family motto and other family values?

11. Were there other adult who were close to you—like parents—as a child?

12. Were there any other significant people in your life in childhood?

13. Did you experience a loss of a parent or other close loved one as a child, or in adulthood?

14. Did anyone in your family die?

Given the many theoretical similarities and the fact that they extend even to research instruments the therapeutic tools already in use it would seem a relatively easy first step to both formalize and harmonize several key Adlerian constructs, e.g. schema of apperception, social interest, etc. so that they could be integrated by researchers and benefit from the extensive study that key attachment theory constructs have enjoyed for decades. Such harmonizing would not only serve to bring Adlerian theory more into the modern day mainstream, but it might also provide EFT researchers access to time-honored AP techniques that would allow them to significantly broaden their scope beyond the bounds of couple therapy (Peluso, Peluso, White, & Kern, 2004).

Chapter 10: Concluding thoughts and ideas for the future

Researching and writing this thesis has taught me a great deal. Although I was familiar with Adlerian theory prior to beginning my research I now feel that I understand it more clearly, especially as it is to be distinguished from Freud’s theory of psychoanalysis. (Delineating Adler’s, Bowlby’s, and Freud’s contributions to psychological thought (p. 4) was a particularly delightful moment of intellectual insight for me.) I also became much more closely acquainted with Adler’s writings in Ansbacher and Ansbacher (1956) than what I had been previously, as well as the writings of Dreikurs and Mosak to a somewhat lesser extent.
Of course, I also learned a great deal about attachment theory and emotionally focused therapy while writing this thesis. While conducting my research, I was amazed to discover, in particular, the diverse aspects of human experience that may be directly correlated to an individual’s attachment style—everything from partner selection to eating disorders. Clearly, much research remains to be done. I would very much enjoy participating at some point.

Since attachment styles have such a significant impact on human development and functioning I believe that every therapist should have a working knowledge of them. Like Adler I believe that much of human psychopathology emanates from a single source, namely, schemas of apperception/internal working models that have gone askew. While the details of my distant future remain somewhat murky, I would enjoy devoting a significant portion of my professional life to advancing this understanding amongst the therapeutic community in some fashion, as well as more generally participating in the theoretical and therapeutic cross-pollination I discussed in my last few pages of my thesis.

I am also mindful that my analysis begs a larger question— if both Adlerian and emotionally focused therapy invoke change by increasing personal awareness (albeit in different ways), to what extent are the positive benefits bestowed by their specific methods correlated to this general outcome? It took attachment theorists approximately 50 years to disentangle the moderating impacts attachment style and emotional experience had on adult relationships. Doing so, they discovered that emotional experience was actually the key to relationship (dis)satisfaction. Attachment was simply the mold that cast it. I wonder if some similar variable might ultimately underlie the methods of Adlerian psychotherapy, emotionally focused therapy, and various other psychotherapeutic approaches; and, if so, what it is. Discovering such a universal variable (if it exists) would most likely revolutionize the practice of psychotherapy and bring more unity to a field that has sorely lacked it almost since its inception.
In the near term, however, I feel the need to accrue more experience. 100% of the knowledge I currently possess of EFT, for instance, I obtained by reading books. Within 3-4 months I hope to transition into a counseling role and begin my pursuit of licensure and various certifications. In addition to EFT (not offered in the Twin Cities to my knowledge) I am particularly interested to learn more about narrative and EMDR therapeutic approaches. Looking somewhat longer term plan to pursue a PhD at the University of Minnesota in Family Social Science and hope to enter a program if not this Fall, within 3 years.
References


