



What do children need from permanent placements?

Observations from an attachment perspective

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Over view

- Attachment
- The parents
- The children
- Assessment
- Interventions

What is attachment?

A unique, enduring, and affectively charged relationship (e.g., with one's mother, with one's spouse)

A strategy for protecting oneself (of which there are three basic strategies, Types A, B, and C, as identified by Ainsworth, and many sub-strategies, as described by the DMM)

The pattern of information processing that underlies the strategies.

(Crittenden 2008:12)

What is attachment?

“Attachment behaviour is the infants’ contribution enabling caregivers to protect and comfort them. Patterns of attachment are infants’ strategies for shaping mother’s behaviour.”

(Crittenden 2005)

A strategy is ...

- What we believe will make us safer
- It is a matter of perception
- You can feel anxious or scared when there is no danger
- You can feel safe when under threat

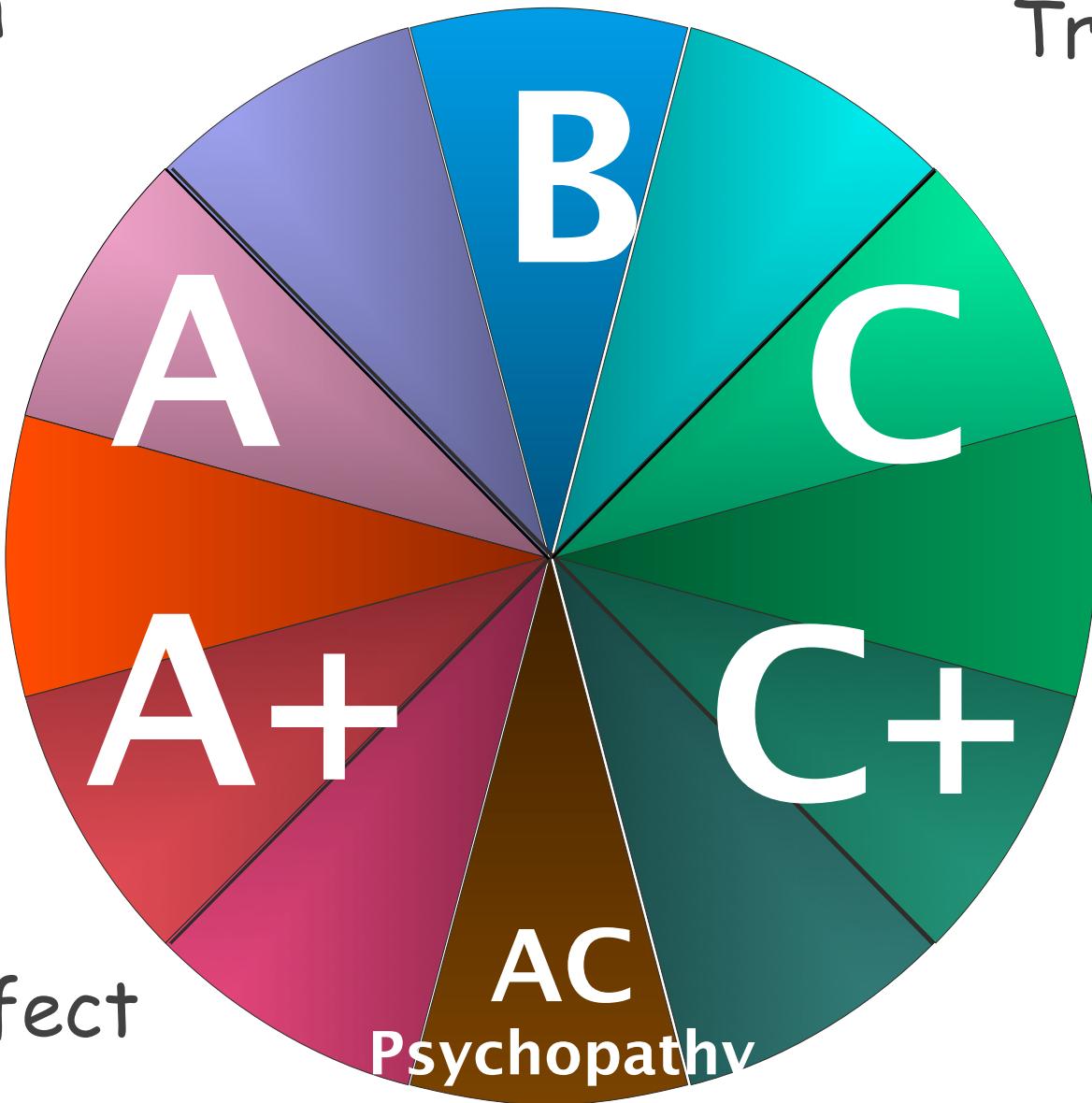
The Three Basic Strategies

- Type A: Very COGNITIVE; little affect
- Type C: Little cognition; intense AFFECT
- Type B: Balanced and integrated COGNITIVE and AFFECT

of Patterns of Attachment

True Cognition

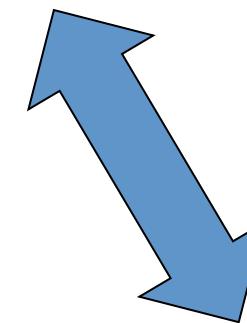
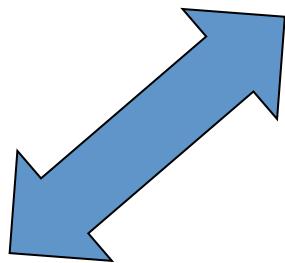
True Negative A



The parents

I – 5

Core dimensions intrinsic to parenting



6
Modifiers type 1
Modifiers type 2



8

7
Integration
(Information
processing)

(Farnfield 2008)

Childhood attachment system

1. The parents state of mind regarding their childhood attachments
2. Parent's resolution of loss and trauma

The spousal system

3. Pair bonding and sexual partnership

Affiliative / wider support system

4. Kinship, friends and wider support system

Care giving system - parenting

Modifiers: Type I. Intra or interpersonal.

- a). Mental illness
- b). Learning disability
- c). Substance abuse
- d). Child sexual abuse
- e). Domestic violence.
- f). Reconstituted families.
- g). Adolescent motherhood.

Type 2. Socio-political.

- Inherent in cultural / sub cultural or class norms is information about what has enabled the group / culture to survive
- Includes poverty, economic oppression, racism
- Stories about the history of dangers faced by the tribe and myths about survival

Type 2 modifiers.: Socio-political.

- Cultural and sub cultural norms with regard to child rearing
- E.g. use of physical punishment; what is acceptable behaviour in girls compared with boys; whether adults play with small children

Type 2. Socio-political.

- Because they are culturally normative they are rarely questioned inside the culture.
- But may be at odds with the norms held by outsiders
- **Shame**

Type 2. Socio-political.

Moving from one culture to another poses problems if behaviour functional to survival in one culture exposes the family to new dangers in the next.

Integration - Mentalising

- Mentalising refers to the process by which humans attend to “mental states in oneself and others”
- It develops throughout child and early adulthood and “is the most fundamental common factor among psychotherapeutic treatments”.

Parenting assessments – do be do

- What parents do
- How parents think about what they do

Assessment - families

What they do

- CARE-Index (Hautamaki, 2014)
- Marschak MIM (1960)
- Lausanne Trilogue Play Paradigm (LTP) Fivaz-Depeursinge & Corboz-Warnery 1999
- Observation

Assessment - parents

ow people think about what they do:

Adult Attachment Interview – dimensions 1&2

MM-AII Crittenden & Landini, 2011)

Attachment Style Interview – dimension 3

ifulco, 2014)

Questionnaire assessment – dimension 4

(e.g. Family Support Scale, Dunst et al 1993)

Meaning of the Child Interview – dimension 5

rey & Farnfield, submitted)

Parent Development Interview – mentalising/ reflective functioning (Slade et al 2005)

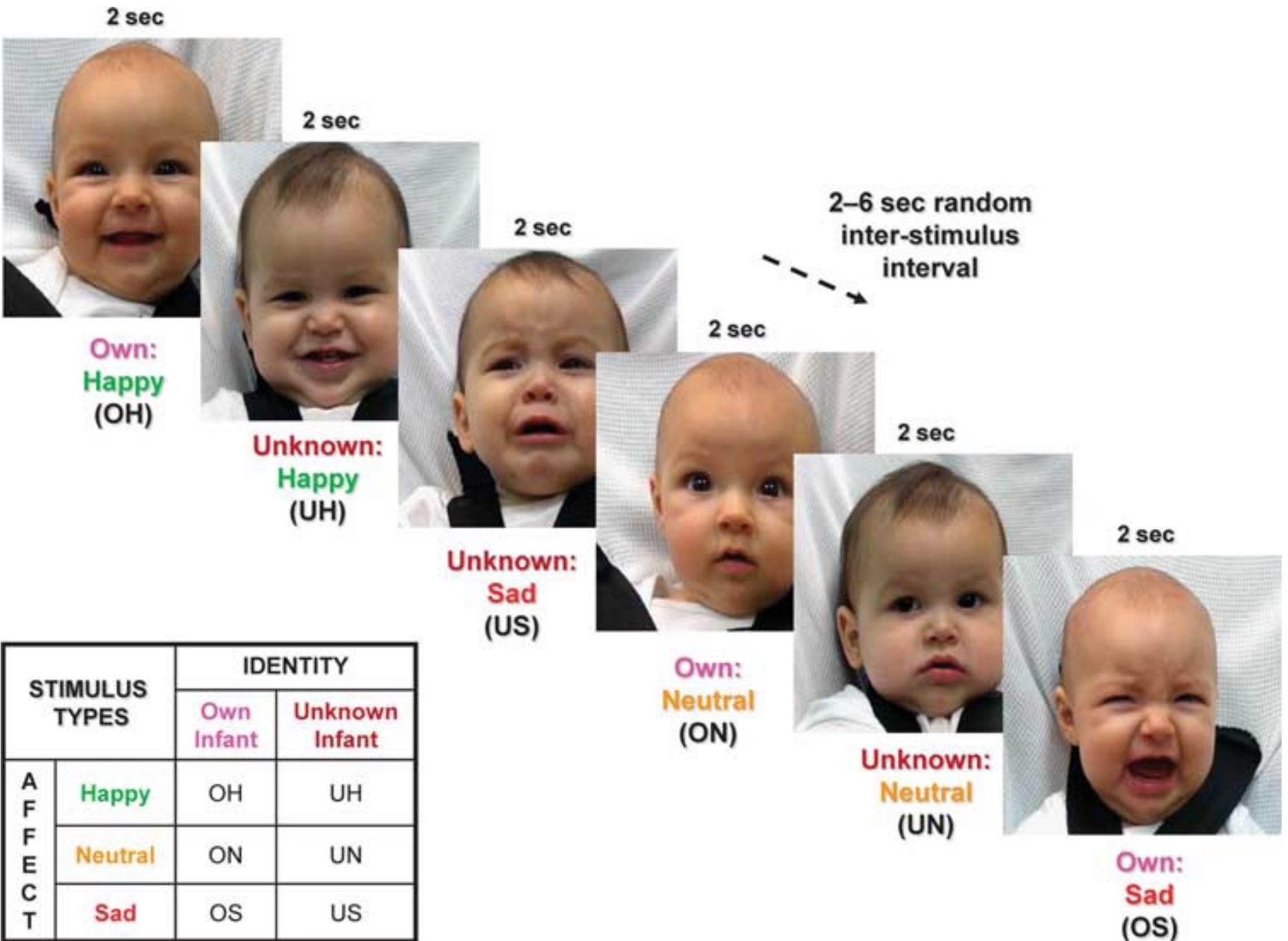
Why is adult attachment important?

- Secure attachment directly correlates with high level mentalising – and insecure with low level mentalising
- It holds important information about how the adult reacts to displays of anger and desire for comfort in their child.

Adult Attachment Predicts Maternal Brain and Oxytocin Response to Infant Cues

Lane Strathearn, Peter Fonagy, Janet Amico and P Rea Montague

Neuropsychopharmacology (2009), 1–12



Children benefit from being placed with alternative carers who are secure on the AAI

- Significant correlation between autonomous (secure) foster mothers and foster children assessed as secure the SSP.
- Non autonomous foster parents had a disproportional number of children rated disorganised (Dozier et al. 2001).
- All adopted children made progress in terms of increasing positive representations of attachment themes using the narrative story stem procedure, but those whose adoptive parents were secure on the AA also showed a decline in negative themes, suggesting resolution of trauma (Steele et al., 2003; see also Beijersbergen et al 2012)

Placement stability

- Foster parent commitment to the child was a strong influence on placement stability.
- The number of children a foster carer had previously cared for was negatively correlated with commitment to the current child, and that the younger the child at the start of fostering the more committed were the carers (Lindhie & Dozier 2007).

Carers' attachment on the AAI

- Dozier et al found attachment among foster carers did not differ from non-clinical populations (Dozier et al., 2001).
- Coram-Anna Freud study (Steele et al., 2008) found more interviews with adoptive mothers were rated secure than expected, but the opposite was true for adoptive fathers.
- Santona & Zavattini (2005) Adoptive parents 76% autonomous - secure

Carers attachment on the AAI

- A study using the DMM-AAI of prospective adoptive parents found only 7% AAIs were rated balanced-secure and that mothers who already had a child of their own were significantly more likely to be in the range secure/normatively insecure (most often in Type A2) whereas for fathers who already had a child the opposite was the case (Farnfield 2012).

population

North American Safe

- 23% dismissing (A),
- 58% secure (B)
- 19% preoccupied (C)
- 18% for unresolved loss or other trauma

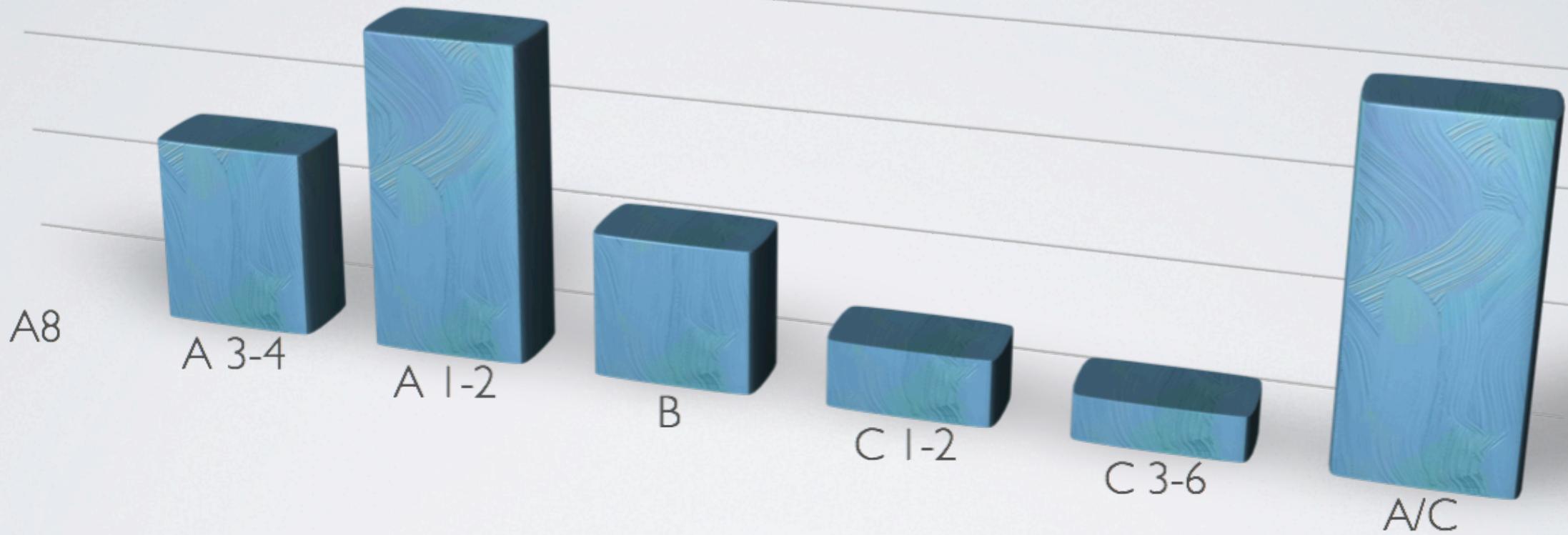
Prospective Adopters

- 46% A or A+
- 13% secure B
- 10% C or C+
- 31% A/C
- 60% for unresolved loss or trauma

(Bakermans-Kranenburg & van IJzendoorn, 2009)

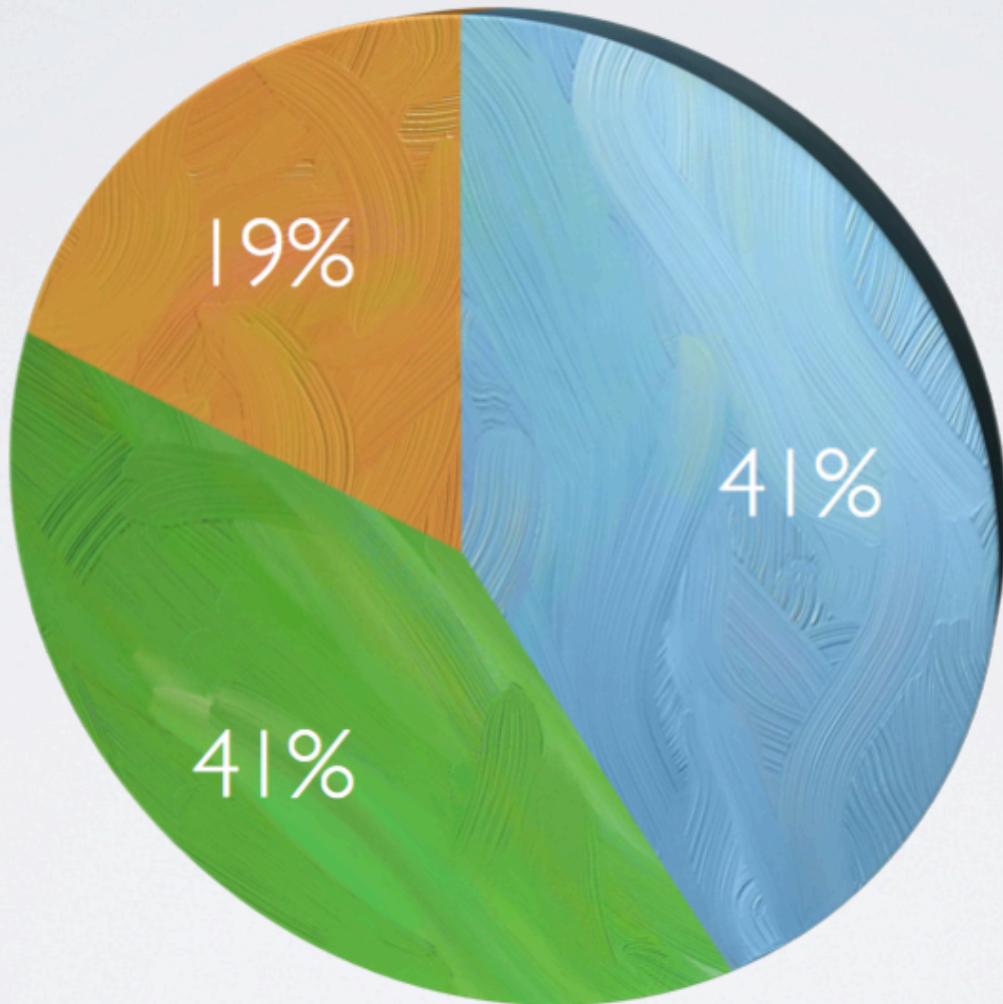
(Farnfield, in preparation)

 n48 (95% applicants to one LA in 1 year)



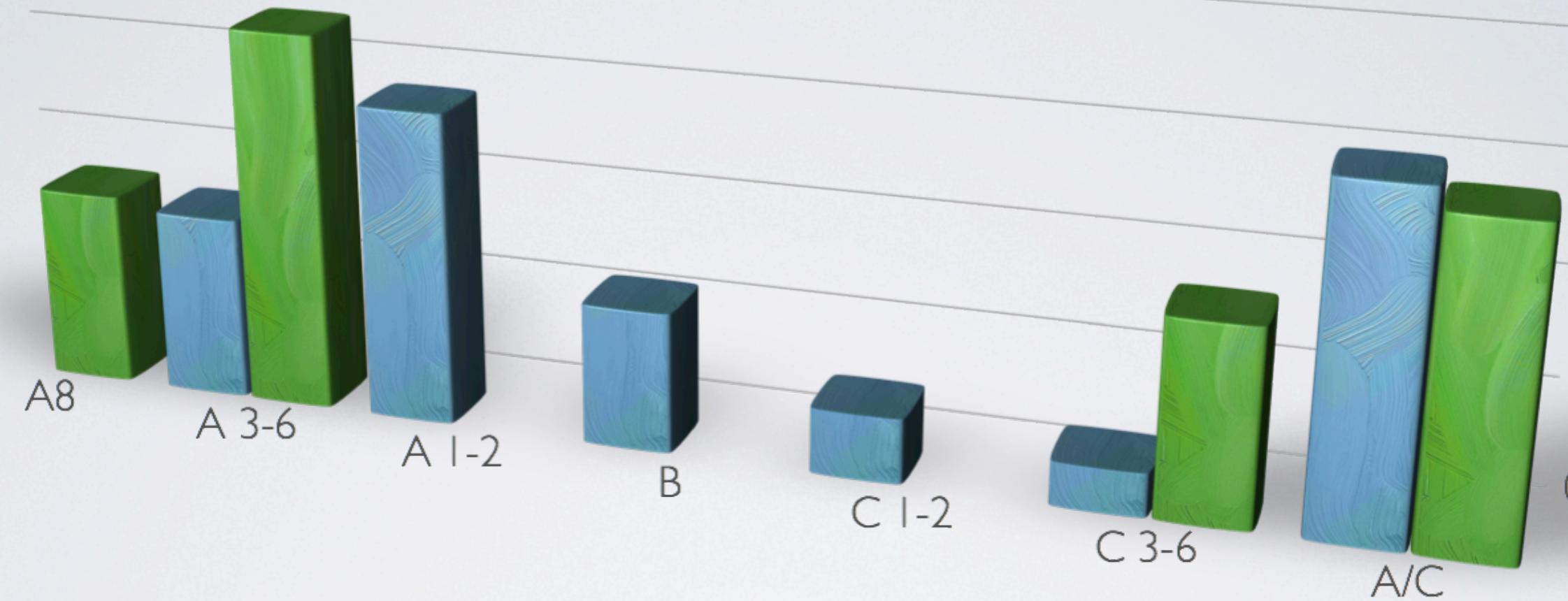
Unresolved loss & trauma

- No UI/Utr
- Uloss or Utrauma
- ULoss&UTrauma



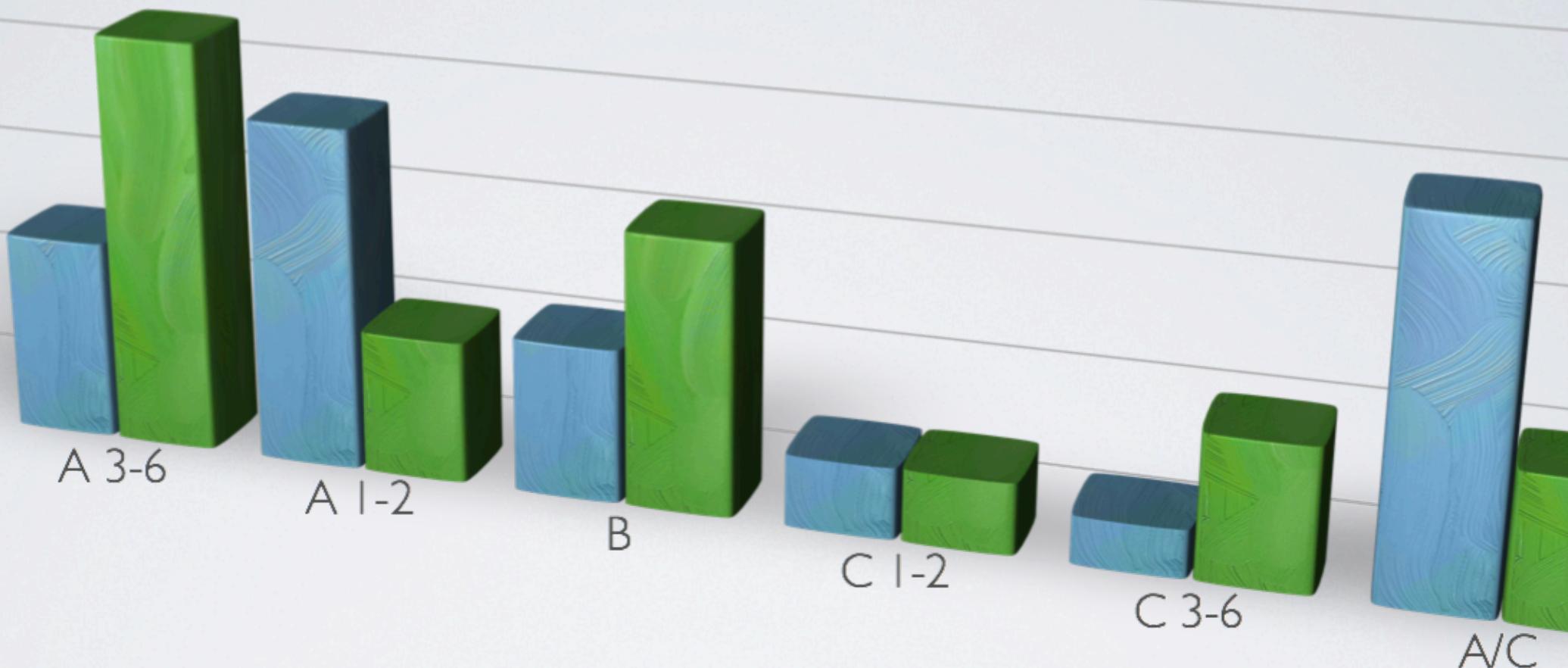
 Adopters

 LAC



■ Adopters

■ Play therapists



Attachment and reproduction

The function of attachment is to:

keep yourself alive

long enough to reproduce

have grand children

and pass on your genes

Adoption

Challenges all this

Disorientation

A DMM modifier

The speaker has a problem locating the source of their
memories/information about protection

Over attributes the self as the source of what they know

VC or AC strategy

the DMM ratings of disorientation are rare and this sample of adopters is remarkable in that:

21% (n10) of the interviews were rated disorientated A/C or

No difference in terms of sex (5M and 5F)

9 with Uloss or U trauma

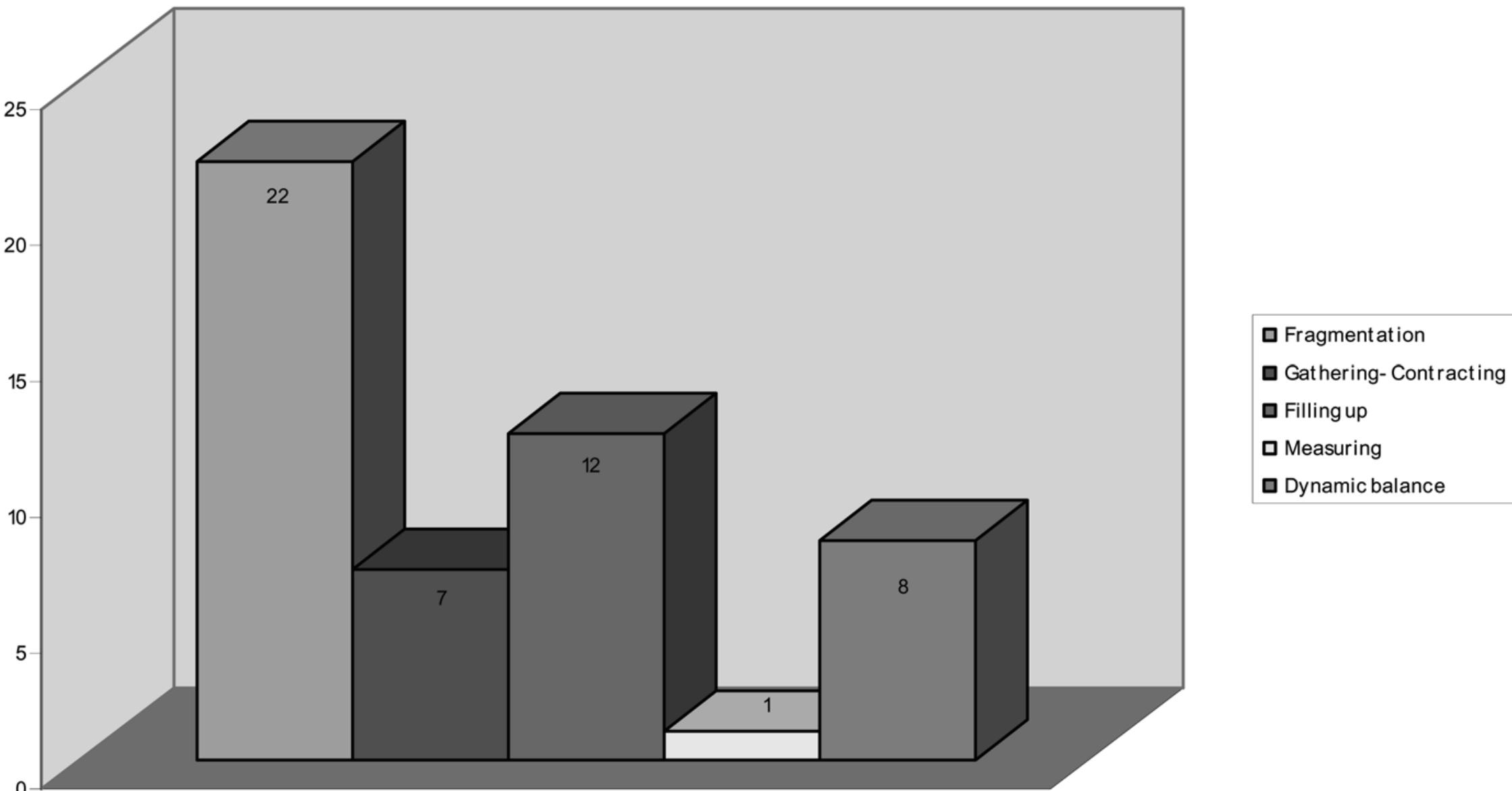
Infertility & disorientation

It seems possible that 21% of applicants were confused regarding whether they wanted to pass on their own genes or those of another couple.

The impact of this on the child is not known

Santos & Zavattini (2005) Disorder reduction vs infertility?

Distribution of the forms of "Space Government"

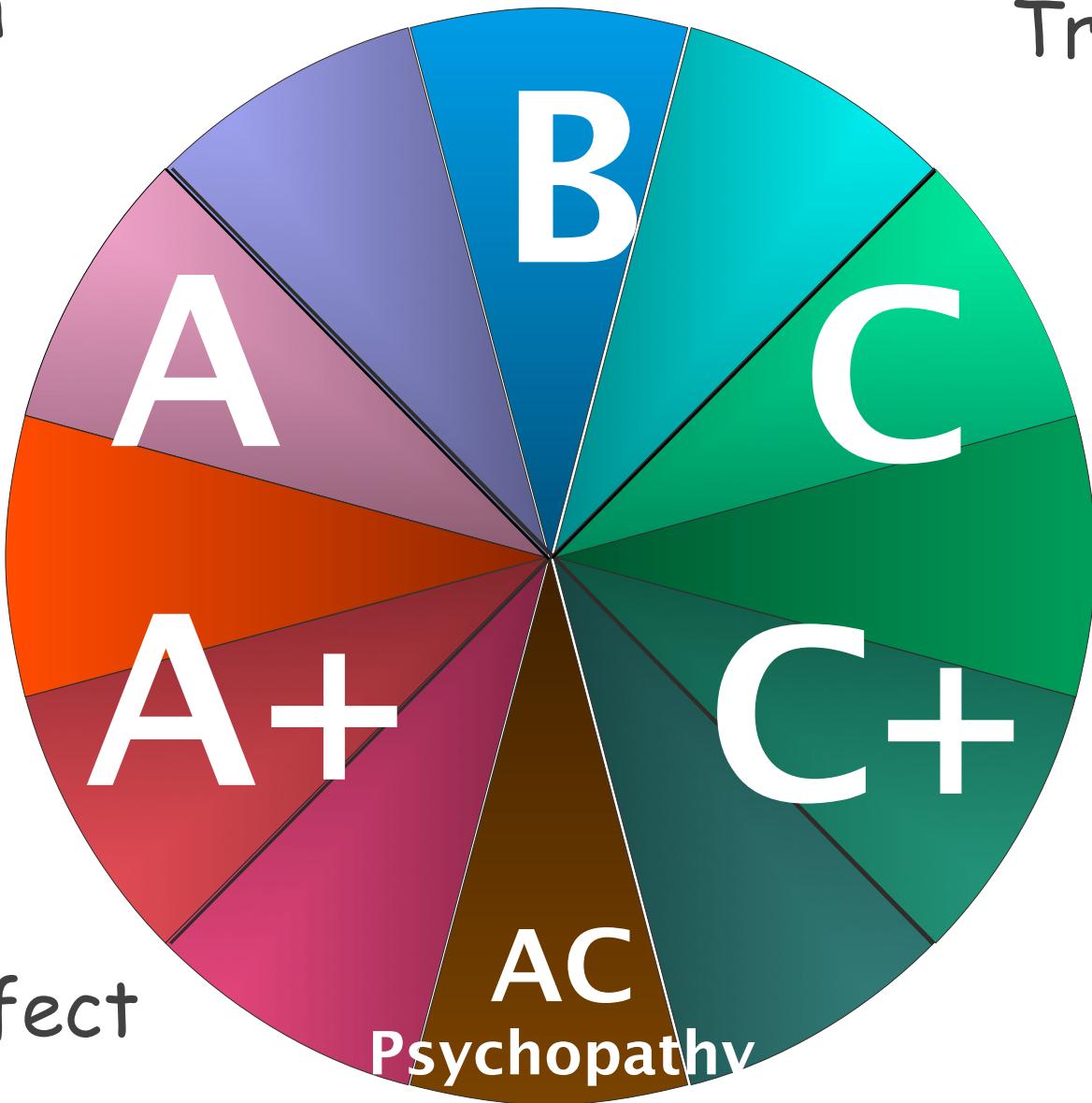


The children

of Patterns of Attachment

True Cognition

True Negative A



True Positive Affect

False Cognition

Attachment

A+ includes:

- Compulsive care giving (role reversal)
- Compulsive compliance (fear)

C+ includes

- Aggressive/helpless
- Punitive / seductive
- Paranoid

Attachment and fostered/adopted children

Face severe dangers:

1. Maltreatment and/or neglect in their family of origin
2. Attachment trauma
3. MOVES within state care
4. Loss of friends/continuity of place



Type A/A+

Inhibit things that
will displease care-

Do things that will
please or placate
predictably
dangerous care-



Compulsive children

- By 3 months infants can inhibit negative affect – the ‘good baby’
- Rigid, robotic (frightened) babies
- Frozen watchfulness
- By 24 months toddlers are able to falsify positive affect i.e. smile and/or say they are happy when they feel sad or worried
- By 4 years the strategy is perfected into the ‘sunshine’ face



Victoria Climbié
1991-2000

A little ray of sunshine

She liked to dress up and was given clothes to dress up in by the nursing staff. Nurse Taub would take her to see the babies in the neo-natal ward and bought her sweets and treats. According to Dr Rossiter, she was a “little ray of sunshine” .

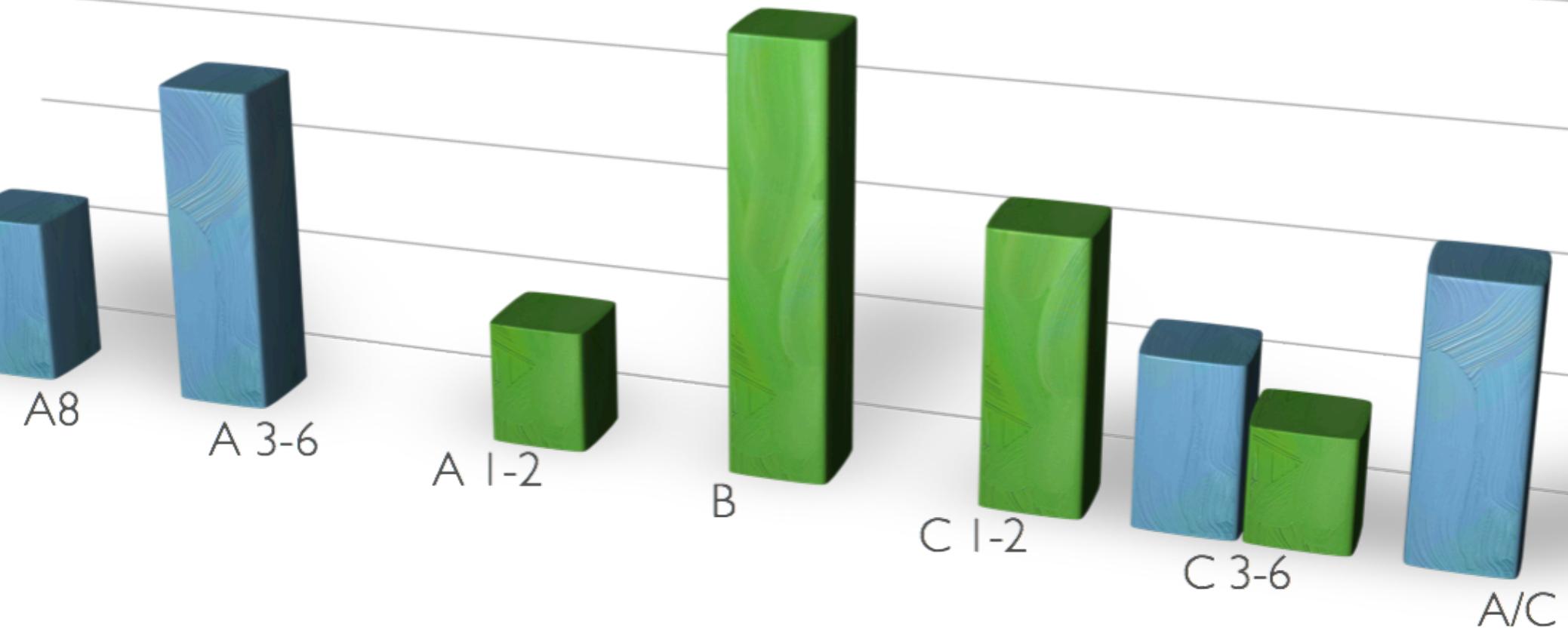
(Laming 2003)

“You could beat her and she wouldn’t cry ... She could take the beatings and pain like anything”

Karl Manning

LAC n17

Community n24



 LAC

 Community



Utr divorce



ULoss/trauma



Depression

Assessment and children

- Strange situation 11 months – 4 years
- Modified strange situation for siblings
- Narrative story stems 3 – 11 years
- School Age Assessment Attachment 6-9 years
- Attachment interviews 6 years onwards
- Various trauma / PTSD scales/ Depression

Identity – a memory systems approach

Everyone must be who he was in the first years of his life, even if later these were buried under. No one can become what he cannot find in his memories.

- **Jean Améry – Auschwitz survivor**

Identity – what usually happens

- A core self : 0 - 3/6 months
- A self that knows it exists in the minds of others
12/18 – 36 months
- Ability to tell a story about the self 36 months
- Autobiographical memory 6 years onwards
- Adolescence: a place for the self in the world

Children at most risk of identity crisis

1. Multiple moves (2+) in the care system before the age of 6 years
2. Serious and prolonged abuse in infancy / preschool years

Identity and life story work

- How can we enable children to generate their own life story?
- Risk of children borrowing semantic statements from professionals
- Identity is clearly not something you get at adolescence

The externally assembled self

‘There is no me, I do not exist.’

Peter Sellers

Life story work should be:

- Ongoing
- Developmentally appropriate
- Rooted in current experience
- Done in conjunction with the people who
were there

Identity

The greater part of identity is being known by others - our family or tribe.

Memories

We can give children information but we cannot give them memories they do not have

Intervention

Attachment & Biobehavioral Catch-up (ABC)

(Dozier, Lindhiem & Ackerman, 2005)

- Brief home visiting programme for foster parents and foster children.
- Uses video feedback and attends to a foster carer's state of mind as assessed by the AAI and their This Is My Baby Interview (TIMB) which assesses commitment to the child
- Intervention children showed more typical levels of the 'stress hormone' cortisol than controls and were not significantly different to a third group who had never been in care (Dozier et al., 2008)

Home based video feedback

Increase in parent sensitivity increases security of child attachment **at any age**
(Beijersbergen et al, 2102 – longitudinal adoption study)

Improving parents sensitivity is easier than improving child attachment security (see Farnfield & Holmes, 2014)

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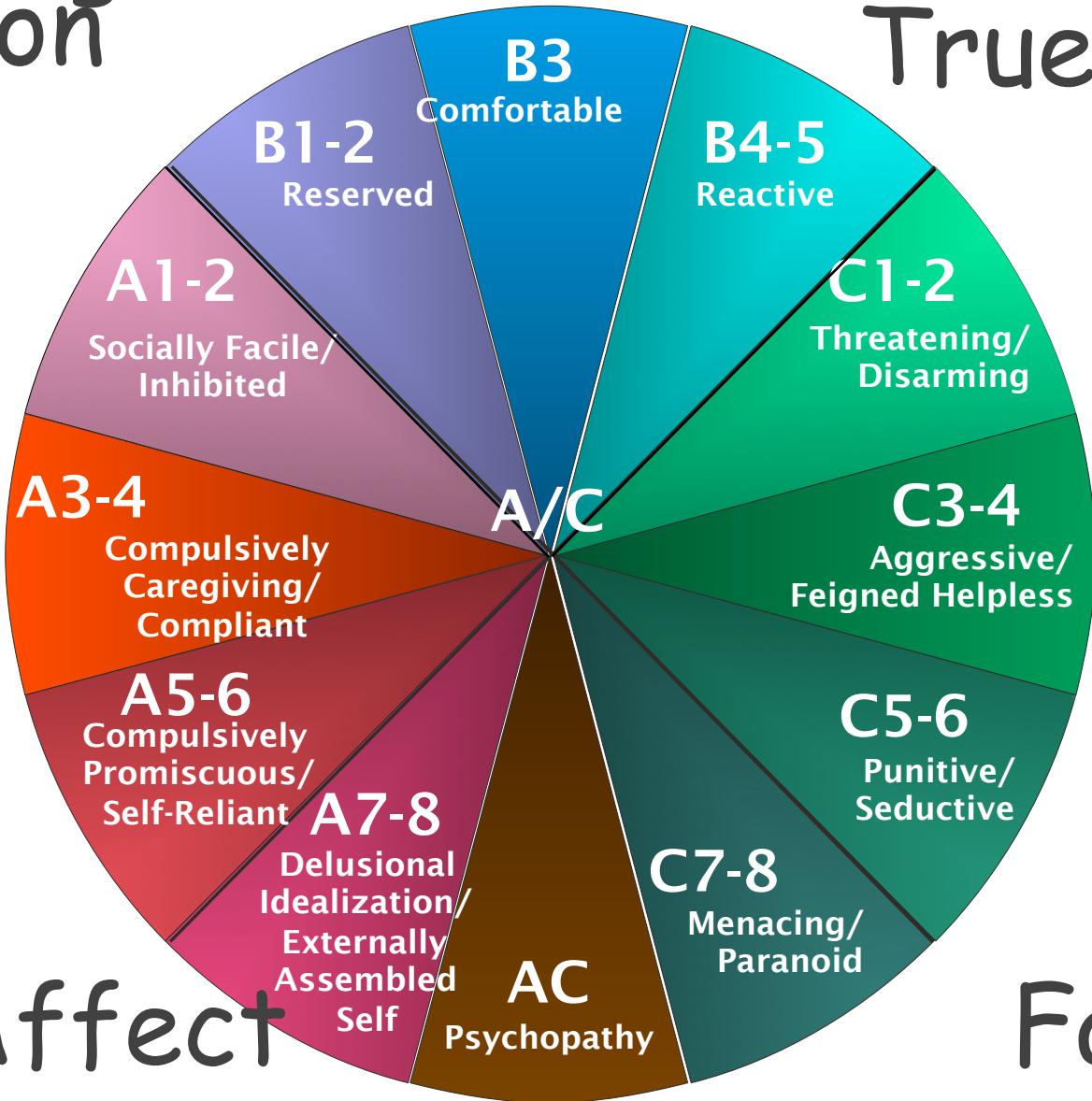
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of Patterns of Attachment in Adulthood

Distorted Cognition

Integrated True Information

True Negative



Positive Affect

False Cognition