

Welcome

Attachment, Trauma and

Recovery

Learning Outcomes

- to demonstrate a clear understanding of attachment and trauma.
- to identify the major theorists involved in attachment thinking and identify differing attachment models
- to consider the children and young people that you care for and relate your learning to your practice
- to consider the differing roles in the recovery of children affected by attachment challenges and trauma

???What is Attachment???

What is Bonding???



Bonding

Bonding is the physical and psychological connection between mother and infant that begins at conception, grows during pregnancy, intensifies at birth and exists forever. All children are bonded to their biological mothers, regardless of what transpires after birth.

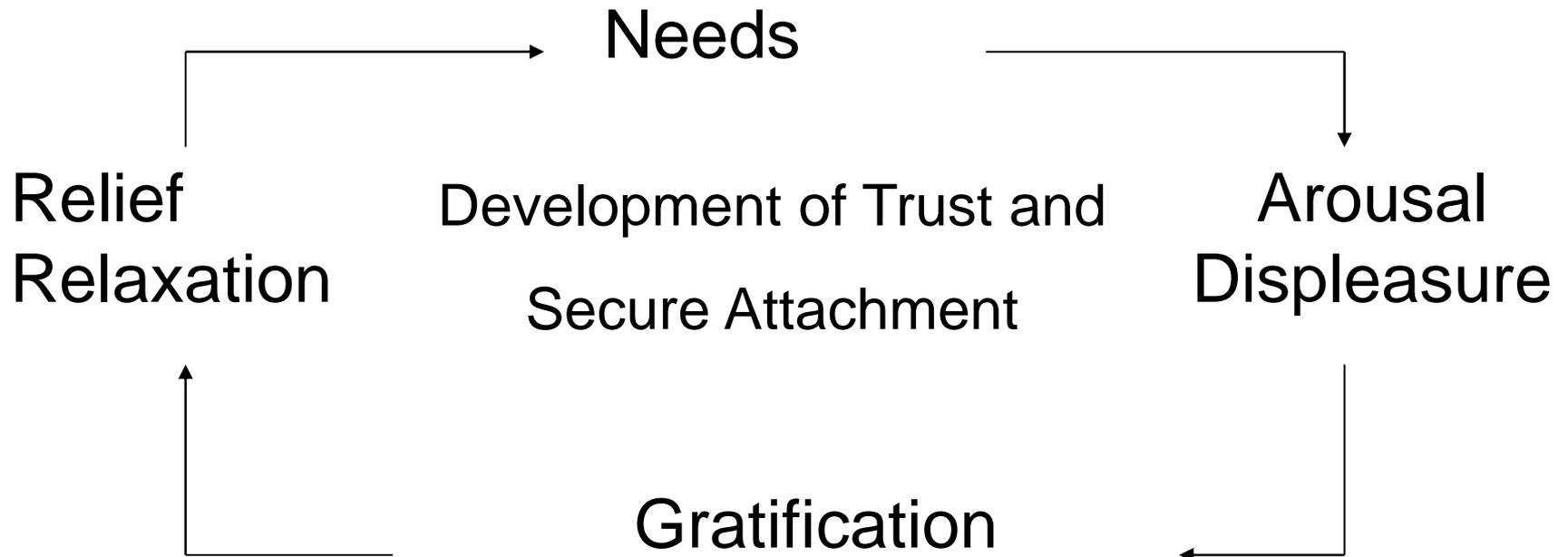
Levy & Orlans –

Attachment Trauma & Healing, p.224

- **Touching**
- **Cooing**
- **Eye contact**
- **Holding**
- **Smiling**
- **Talking**
- **Rocking**
- **Singing**



First – Year Attachment Cycle



Second Year Attachment Cycle



A Child Needs Healthy Attachments to.....

- Develop Emotionally, Socially, Psychologically, Physically, Morally and Spiritually
- Develop Develop Develop Achieve self worth and esteem
- Cope with change and stress
- Cope with separation and loss
- Become independent
- Develop future relationships

Attunement

- Is the key to attachment
- the parent is sensitive to the child and able to understand the mind and the feeling state of the child
- Attuned parental responses impart meaning to the ‘inner world’ of body signals e.g. hunger, thought and emotions.

Attunement

“In affective attunement, the mother’s activities match the *feeling* state of her infant and do not simply imitate his behaviour”

Daniel Stern 1985

- **Touching**
- **Cooing**
- **Eye contact**
- **Holding**
- **Smiling**
- **Talking**
- **Rocking**
- **Singing**

“A securely attached child....will have a working model of the world in which she herself is worthy of love and attention, others are expected to be responsive and reliable and relationships with others are seen as rewarding and fun”

Beckett C (2002)

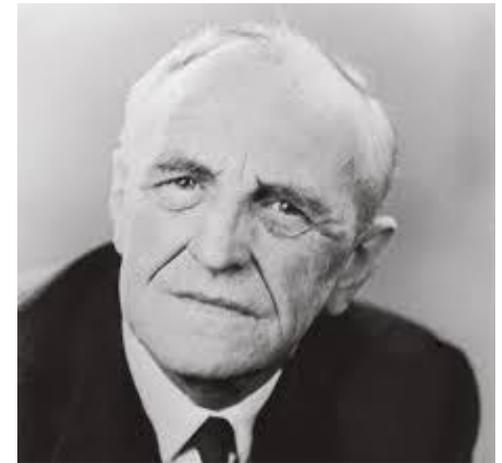
Attachment Theory

Donald Winnicott 1896-1971

Although accepting Kleinian theory, he viewed the key aspect of healthy development as rooted in relationships and micro-interactions with other people. He studied the importance of the mother – baby relationship and felt that the mother must be a "good-enough mother" who relates to the child with "primary maternal preoccupation."

Key Words

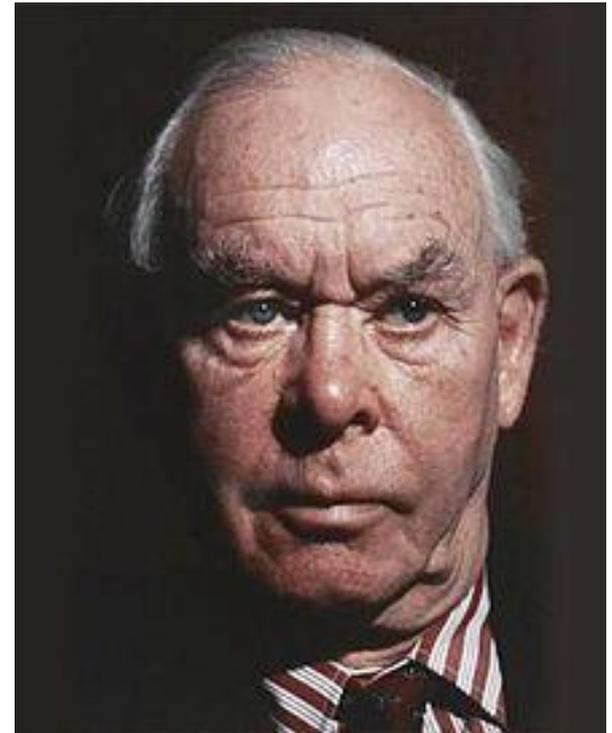
Object Relation Theory; Good enough mother; True Self/False Self; Play and Transitional Objects



John Bowlby 1907 - 1990

He believed that mental health and behavioural problems could be attributed to early childhood suggesting that children come into the world biologically pre-programmed to form attachments with others, because this will help them to survive. Bowlby hypothesised that both infants and mothers have evolved a biological need to stay in contact with each other.

Key Words: Attachment, Attunement, Security, Relationships, Bonding





Anna Freud and Barbara Docker Drysdale were pioneers of attachment theory and both, although not as prominent as Bowlby and Winnicott were instrumental in ‘thinking of the child’

So Attachment is about....

the ability of individuals to use attachment figures as a secure base from which to explore and

...a safe haven in times of fear, distress or danger

...the extent to which caregiver responses are:

Reciprocal

Sensitive (accurate interpretation of signal)

Consistent

Offer comfort, calm & enable feelings of safety



Infants need a “secure base” (i.e. are able to *trust*) their primary caregiver

A Secure Attachment leads to subsequent healthy development

An Insecure Attachment leads to unhealthy development

Attachment style affects relationships throughout life

Strange Situation

	Event	Attachment Issue
1	Parent and baby enter playroom.	
2	Parent sits quietly while baby plays.	Parent as secure base for exploration
3	Stranger enters and talks with parent.	Baby's response to new adult
4	Parent leaves the room. Baby is alone with the stranger.	Baby's response to separation
5	Parent returns. Stranger leaves.	Baby's response to reunion
6	Parent leaves. Baby alone in the room.	Baby's response to separation
7	Stranger enters and offers comfort.	Baby's ability to accept comfort from a stranger
8	Parent returns and offers comfort if needed and tries to get the baby to play.	Baby's response to reunion

Infants need a “secure base” (i.e. are able to *trust*) their primary caregiver

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Secure Attachment

Children have confidence that their attached figure will meet their needs consistently and reliably. Their attached figure represents their secure base at times of distress, and when they seek comfort it is available.

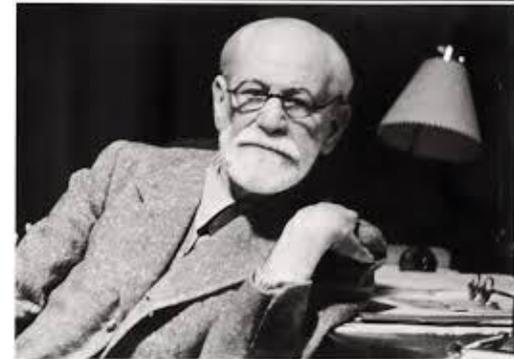
Insecure Avoidant

Children do not seek out their attached figure, and as such do not maintain a dependence on them. When the child becomes distressed by their experience, the child does not seek comfort, has no expectation of safety and does not seek or accept nurture.

Insecure Ambivalent / Resistant

Although children demonstrate behaviours, which are similar to secure attachment, they rarely accept such comfort from attached figures.

He regarded the development of personality as being the balance between the Id, the Ego and the Super-Ego. The Id strives for unrealistic gratification of basic desires, the Super-Ego strives for unrealistic moral responsibility and conscience while the Ego acts to compromise these two opposing forces.



ID



Super Ego

Ego

More on Freud

Freud's work was heavily criticised for lack of substantial evidence. He regarded basic sexual instincts as being the driving force behind virtually all behaviour.

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John Watson



- Early 20th century, "Father of American Behaviorist theory."
- Based his work on Pavlov's experiments on the digestive system of dogs
- Researched classical conditioning
- Children are passive beings who can be molded by controlling the stimulus-response associations.

Erik Erikson - 1902-1994

Develops beyond Freud's ideas. More stages (8) and more influence of environmental factors.

Key words

Psychodynamic; psychosexual; psychosocial; 8 development stages; identity; crises/dilemmas



More on Erikson

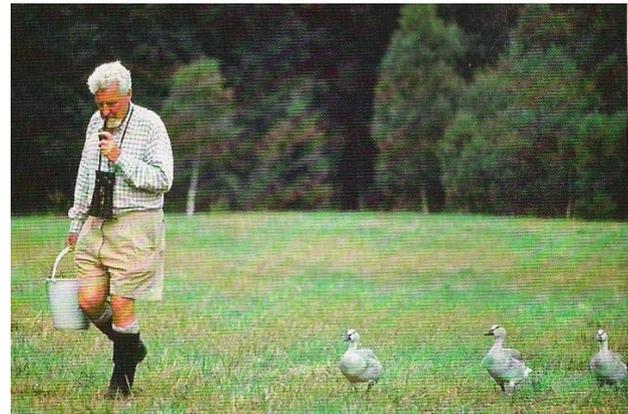


Erikson's stages of personality development

		1	2	3	4	5	6	7	8
Freud's stages of personality development	Stage								
	Oral	Basic trust vs. mistrust							
	Anal		Autonomy vs. shame, doubt						
	Phallic			Initiative vs. guilt					
	Latency				Industry vs. inferiority				
	Genital					Identity vs. role confusion			
	Young adulthood						Intimacy vs. isolation		
	Adulthood							Generativity vs. stagnation	
Maturity								Ego integrity vs. despair	

Konrad Lorenz

Ethologist, known for his research on imprinting. Lorenz concluded that the process of “imprinting” was a natural instinct and would cause the goslings to imprint on the first large moving object that they saw. He concluded this was due to the fact that they needed food and protection. He related this to natural selection by stating that if they did not learn this behaviour through evolution that they would die out leaving only the few that did. This is known as “Natural Selection”.

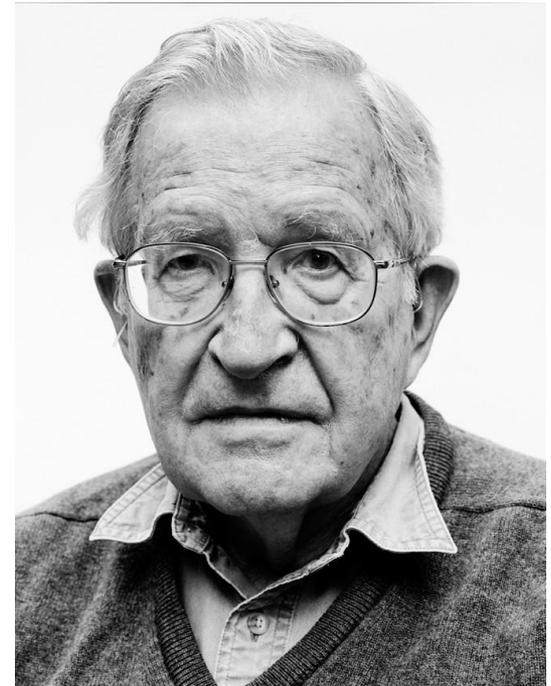


Noam Chomsky 1928 -

Children are born in possession of an innate ability to comprehend language structures and states that every child has a ‘language acquisition device’ which encodes the major principles of a language and its grammatical structures into the child’s brain.

Key Words

LAD, Innate Programming; ‘Motherese’ (a form of baby talk that influences a child's acquisition of grammar rules); universal grammar



0 -2 months	Reflective crying, vegetative sounds which reflect their physical state
2 -5 months	Cooing and laughter, early consonants, sounds from back of throat, laughs and giggles
4 – 6 months	Vocal play, babbling, more adult like in range and pitch and raspberries (bilabial trills)
6 – 12 months	Replicated babbling, more pitch control, ability to sound out consonants and vowels

Arnold Gesell - 1880-1961

Development genetically determined by universal “maturation patterns” which occur in a predictable sequence.

Key words

Biological maturation; milestones; normative development; cephalo-caudal; proximo-distal; nativist (nature) language development; biological/genetic determinism.



More on Gesell

Gesell's classic study involved twin girls, both given training for motor skills but one given training for longer than the other. There was no measurable difference in the age at which either child acquired the skills, suggesting that development had happened in a genetically programmed way, irrespective of the training given.

A child learns to whether or not an adult teaches him/her, suggesting physical development at least is largely pre-programmed.

By studying thousands of children over many years, Gesell came up with "milestones of development" - stages by which 'normal children' can accomplish different tasks.

Milestones

By 3 months: Visual, touch, sensing, hearing, exploring symmetrical movements with hands and legs - early attachment relationship develops thru' attunement, smiling

By 6 months: Muscle tone/strength, grasping, pushing, kicking, body awareness, sense of self as 'other', memory, sounds, stranger anxiety

By 9 months: Rolling, crawling, reaching, interaction, focus, babbling, peek-a-boo, laughing

By 12 months: Crawling up stairs, sits and stands alone, walks with help, feeds self, exploring impact of self on the world

Milestones continued

By 15 months: Kneels, falling and recovering, walks alone, develops resilience, likes dolls, understands words

By 18 months: Scribbles, building bricks, undresses self, can walk up and down stairs with help, points and names, sings

By 2 years: Toilet training, copies caregiver around house, looks at books, ownership, doesn't share, throws ball, interactive in games with adult

By 2 1/2 years: Kicks and throws ball, tantrums, climbing and jumping

Jean Piaget - 1896-1980

Development takes place in distinct stages of cognitive development. Adults influence but the child is building their own thinking systems.

Key words

Cognitive learning theory stages; pre-operational; animism; moral realism; concrete operations; formal operations



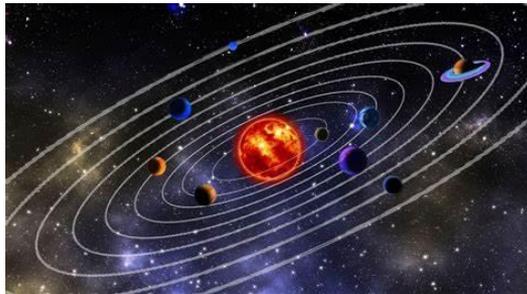
Piaget's Cognitive Development Stages

- Sensori-motor - Ages birth till 2: the infant uses his senses and motor abilities to understand the world
- Pre-operation - Ages 2 till 7: the child uses mental representations of objects and is able to use symbolic thought and language
- Concrete operation - Ages 7 till 11: the child uses logical operations or principles when solving problems
- Formal operations Ages 12 upwards: the use of logical operations in a systematic fashion and with the ability to use abstractions



Urie Bronfenbrenner

Ecological Systems Theory



Burrhus Skinner - 1904-1990

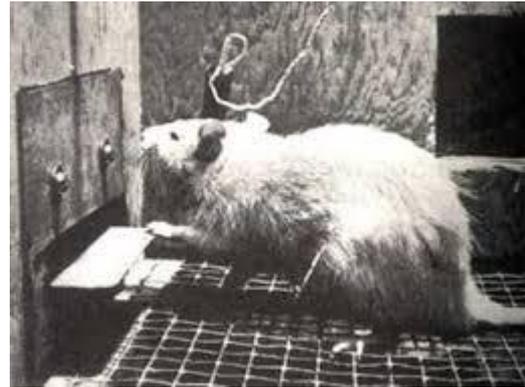
**Reinforcement and punishment
moulds behaviour and therefore
children are conditioned by their
experiences**

**Operant conditioning;
positive/negative reinforcement;
consequence; reward; punishment;
respondents; operant; social
learning theory; behavioural learning
theory**



Skinner maintained that learning occurred as a result of the organism responding to, or operating on, its environment, and coined the term operant conditioning to describe this phenomenon.

He did extensive research with animals, notably rats and pigeons, and invented the famous Skinner box, in which a rat learns to press a lever in order to obtain food.





The behavioral theory of attachment would suggest that an infant would form an attachment with a carer that provides food. In contrast, Harlow's explanation was that attachment develops as a result of the mother providing "tactile comfort," suggesting that infants have an innate (biological) need to touch and cling to something for emotional comfort.

Alfred Bandura 1925

—
Learning takes place by imitation. This differs from Skinner's "conditioning" because there is more emphasis on inner motivational factors.

- **Key words**
- **Imitation; copying; modelling; role models; reinforcement; social learning theory; observational theory (social cognitive theory); Bobo doll experiment.**



WHAT IS THE BOBO DOLL EXPERIMENT?

The Bobo Doll Experiment was a name given to a group of experiment which was conducted by Albert Bandura in 1961 and then re-visited back in 1963, the experiment revolved around children's behaviour after watching adults model act aggressively towards a Bobo Doll. There are were different variations of the experiment which the most notable one was see the adults getting rewarded, get punished, or experience no consequence for beating the bobo doll. These experiment all contributed to Bandura's Social Learning Theory.

The social learning theory claims that people learn through observing, imitating and modelling. It shows that people learn through other ways than being rewarded or punished. It can also be done through seeing someone be rewarded or punished.

Melanie Klein

1882–1960

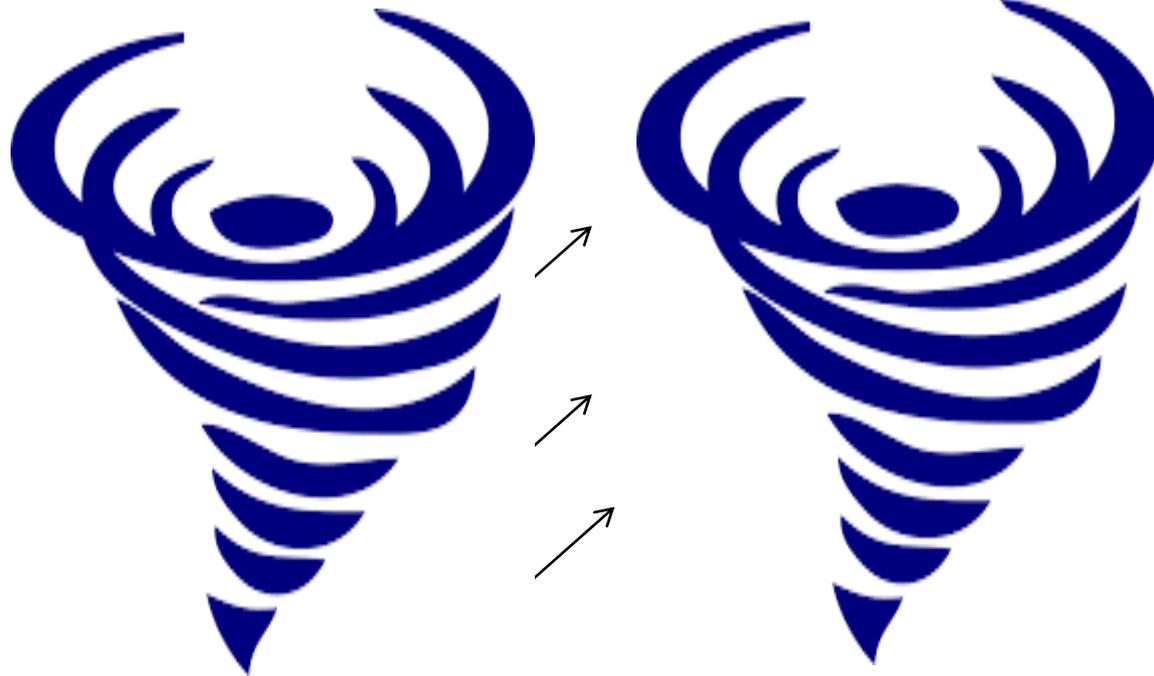
She used observation of children at play with selected toys (her 'play technique') as a substitute for the adult free association.

The child's inner world has exaggerated, idealized and persecutory objects, not simple representations of experiences with parents. The very young infant's inner world is primarily defensive, protecting the self from the discomfort of pain and frustration.

As the child grows, it realizes that good and bad experiences come from the same person, as well as differences between internal and external objects







Problem occurs

**Problem
Goes**



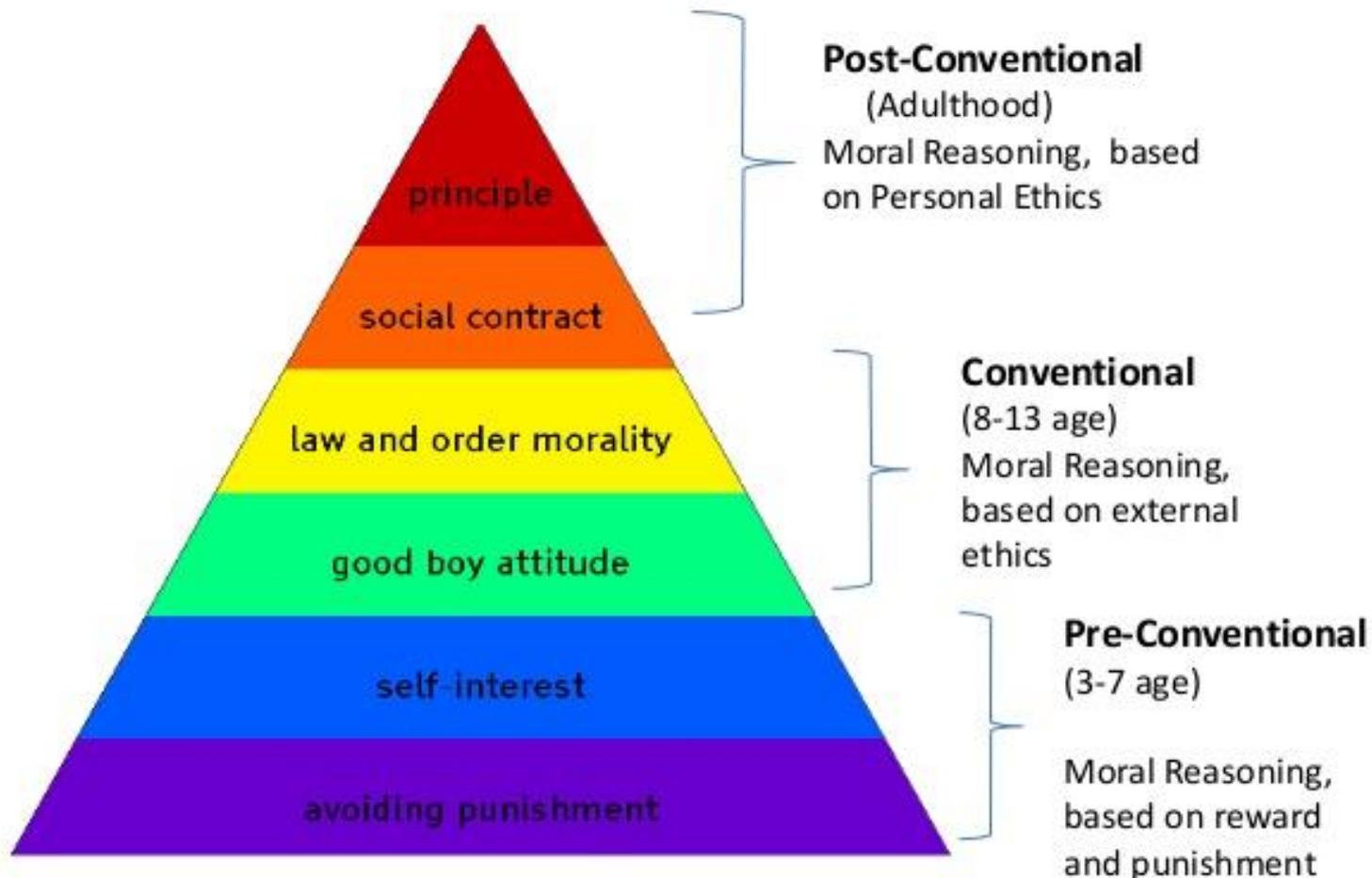
**Problem
Occurs**



**Problem
Addressed**



Lawrence Kohlberg introduced the notion of moral development having critical steps - that each experiences develops mastery of decisions and societal cohesion (or not!)





Playfulness

- Light-touch · hopeful · open · spontaneous
- opportunistic · friendly · positive

Acceptance

- Unconditional Positive Regard
- Everything the child does is accepted
- Behaviour is communication, accept the child's communication



Curiosity

- Non-judgemental
- Adult does not know best
- Adult genuinely wants to know
- Adult has an active interest in the child's experience

Empathy

- A felt sense of the other's actual experience
- Adults' understanding of the child is experienced and communicated



Allan Schore 1943

“Attachment theory, first created by...John Bowlby over 50 years ago, is now revitalized, particularly by its deep connections with neuroscience. At this point in time, we have in attachment theory a coherent theory of development that is grounded in both psychological science and neuroscience, and thereby is on a much firmer ground than it used to be.”

Schore (1994-2014): interpersonal neurobiological model of attachment mechanism; relational, social-emotional attachment experiences shape developing “social,” emotional” right brain and thereby emotional well-being in later stages of life.



What is Trauma?

Trauma is the emotional, psychological and physiological residue left over from heightened stress that accompanies experience of threat, violence and life changing events

A more overwhelming event than a person would ordinarily be expected to encounter

Traumatisation occurs when both internal and external resources are inadequate to cope with external threat.

- Complex trauma
- Family violence
- Cultural Trauma
- Medical trauma
- Natural disasters
- Community and school violence
- Neglect/Physical/Sexual/Emotional abuse
- Traumatic grief
- Refugee and war zone trauma

“Early Childhood Trauma creates the blueprint in the body that influences every system in the body from immunity to the expression and regulation of emotions, to nervous system resilience, communication, intelligence, and self-regulatory mechanisms such as body temperature regulation and hormone production”

(Levine & Kline, 2007, p.34)

How do children react following trauma?

Every child reacts to trauma differently



Reaction will depend on:

Developmental level

Previous life experiences

Level of exposure to the trauma

Parental reactions

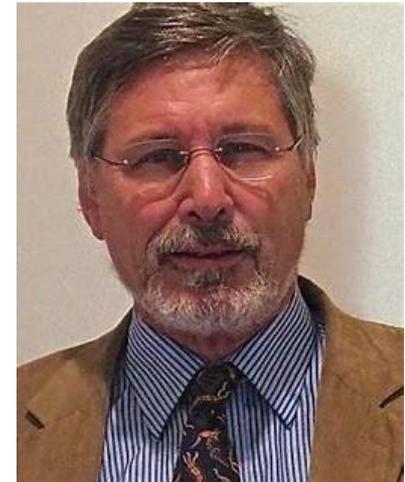
Subsequent changes in living situation



The majority of children are resilient

Many traumatised children, and adults who were traumatised as children, have noted that when they are under stress they can make themselves ‘disappear.’ That is, they can watch what is going on from a distance while having the sense that what is occurring is not really happening to them, but to someone else.

van der Kolk, 1996



???What is a trauma bond???

Attachment (Love)

Attune for Pleasure

Focus on own wellbeing

Obedience with Resistance

Exploration and Checking In

**Full range of emotional language
and regulation**

Age Appropriate Functioning

**Cohesive and Competent Sense
of Self**

Trauma Bond (Slave)

Attune for Survival

Focus only on the Wellbeing of the

Threat Spontaneous Obedience

Stay Close to anticipate or

Stay Away to be unnoticed

Exaggerate Feelings v No Feelings

**Express only the feelings that
reflect the threat**

Inhibitions in Developmental Areas

Fragmented Sense of Self

Understanding the Impact of Trauma on the Developing Child

The first three years are when the brain is making the majority of its “primary” associations and the core neural networks organize as a reflection of early experience. Early developmental trauma and neglect have a disproportionate influence on brain organization and later brain functioning.



Traumatized children spend most of their lives in a state of low-level fear – even though outwardly they may look calm and relaxed.

While in this state, it takes very little to move them up the arousal continuum.

They will respond by using either a dissociative or hyperarousal adaptation. Their functioning on every level (emotional, behavioral, cognitive) will reflect this state.



Fight or Flight **was** first described by Harvard physiologist Walter Cannon, this unconscious response is hard-wired into **our** brain and represents a genetic wisdom designed to protect **us** from bodily harm. This response corresponds to an area of the brain called the hypothalamus, which—when stimulated—initiates a sequence of nerve cell firing and chemical release that prepares your body for running or fighting.

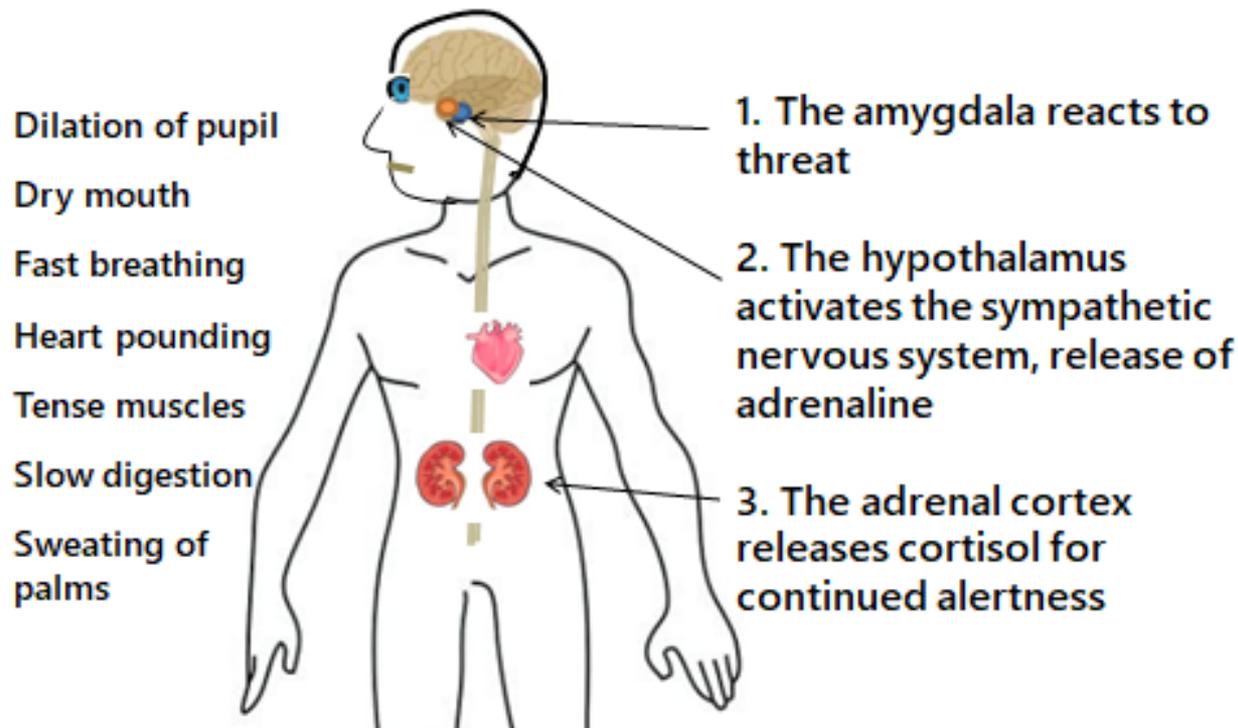
During a fight-flight-freeze response, many physiological changes occur. The reaction begins in your [amygdala](#), the part of your brain responsible for perceived fear. The amygdala responds by sending signals to the [hypothalamus](#), which stimulates the autonomic nervous system (ANS).

The ANS consists of the sympathetic and parasympathetic nervous systems. The sympathetic nervous system drives the fight-or-flight response, while the parasympathetic nervous system drives freezing. How you react depends on which system dominates the response at the time.

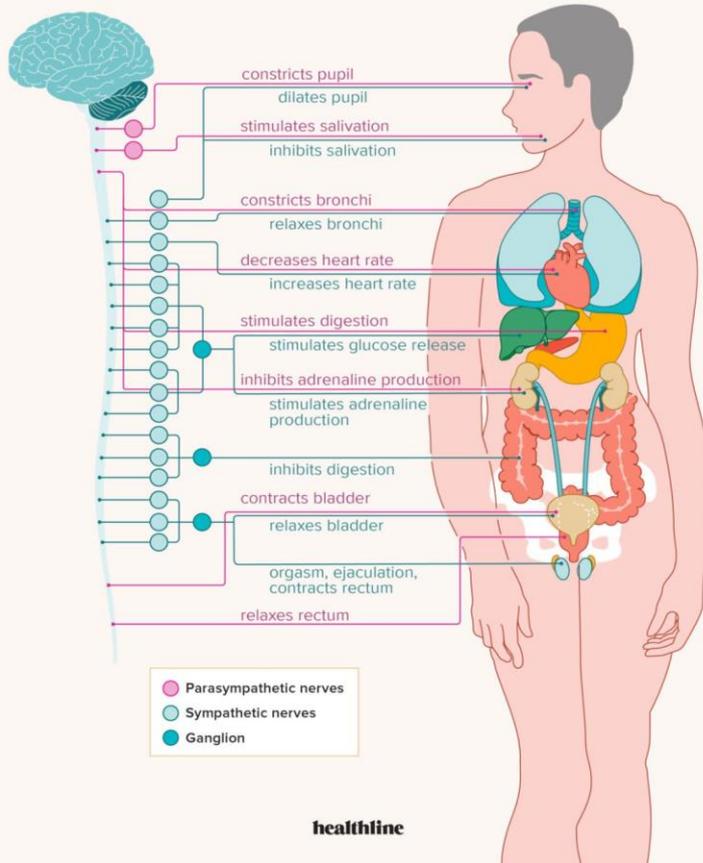
In general, when your ANS is stimulated, your body releases [adrenaline](#) and [cortisol](#), the stress hormone. These hormones are released very quickly, which can affect you:

- **Heart rate.** Your heart beats faster to bring oxygen to your major muscles. During freezing, your [heart rate](#) might increase or decrease.
 - **Lungs.** Your breathing speeds up to deliver more oxygen to your blood. In the freeze response, you might hold your breath or restrict breathing.
 - **Eyes.** Your peripheral vision increases so you can notice your surroundings. Your [pupils dilate](#) and let in more light, which helps you see better.
 - **Ears.** Your ears “perk up” and your hearing becomes sharper.
 - **Blood.** Blood thickens, which increases clotting factors. This prepares your body for injury.
 - **Skin.** Your skin might produce more sweat or get cold. You may look pale or have [goosebumps](#).
 - **Hands and feet.** As blood flow increases to your major muscles, your hands and feet might get cold.
 - **Pain perception.** Fight-or-flight temporarily reduces your perception of pain.
- Your specific physiological reactions depend on how you usually respond to stress. You might also shift between fight-or-flight and freezing, but this is very difficult to control. Usually, your body will return to its natural state after 20 to 30 minutes.

The fight or flight response



Autonomic nervous system



By its very nature, the “fight or flight” system, Sympathetic Nerves bypasses the rational mind—where more well thought out beliefs exist—and moves you into an “attack” mode. Thinking becomes distorted and fear becomes the lens through which you see the world. It is short-lived and the ANS ‘s other half, Parasympathetic Nerves “rest and digest” calms the ‘attack mode’ by adopting a ‘rest’ mode.

What about Freeze?

...this freezing response probably seems somewhat wrong headed; wouldn't it be better to get a head start and dash away from the potential threat immediately? Actually, no. In the wild, many predators react to movement, and if you abruptly go rigid there's a chance that the tiger that you just spotted won't notice you. Think of freezing as a state of defensive preparation. The body gets the same jolt of adrenaline that readies it for fighting or fleeing, but the brain has calculated that at least for that moment, your best odds of survival come with no action at all.... Taylor Clark explains the passive defence of Freeze

How the Brain Responds to a Traumatic Event

With a prolonged alarm reaction, the child will experience an altered neural state.

The longer the child remains in a persistent states of fear, the more likely it is that the child's brain will change to reflect these experiences.

- Make sure the abuse or other trauma has stopped
- Begin to build a relationship, by being honest, reliable and doing what you say you will do
- Understand trauma
- Help them feel safe through nurture, structure and support
- Use boundaries and logical consequences
- Stay calm and well-regulated – even as you set limits on aggression – to avoid power battles

- Understand your own traumas, so you can reflect on your own feelings and reactions
- Co-regulate with the child: use your calm to soothe and help them calm
- Don't take their behaviour personally
- Use discipline without shaming
- Engage with family members and carers

Adapted from: Child Safety Commissioner, 2009, *From isolation to connection: a guide to understanding and working with traumatised children and young people*, www.kids.vic.gov.

Some Key Points

Traumatized children spend most of their lives in a state of low-level fear – even though outwardly they may look calm and relaxed.

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Defence Mechanisms

Prolonged exposure to stress and a child's continued use of coping strategies may result in behavior patterns that are difficult to change if the child perceives the strategy as being effective (Kochenderfer-Ladd & Skinner, 2002; Stansbury & Harris, 2000).

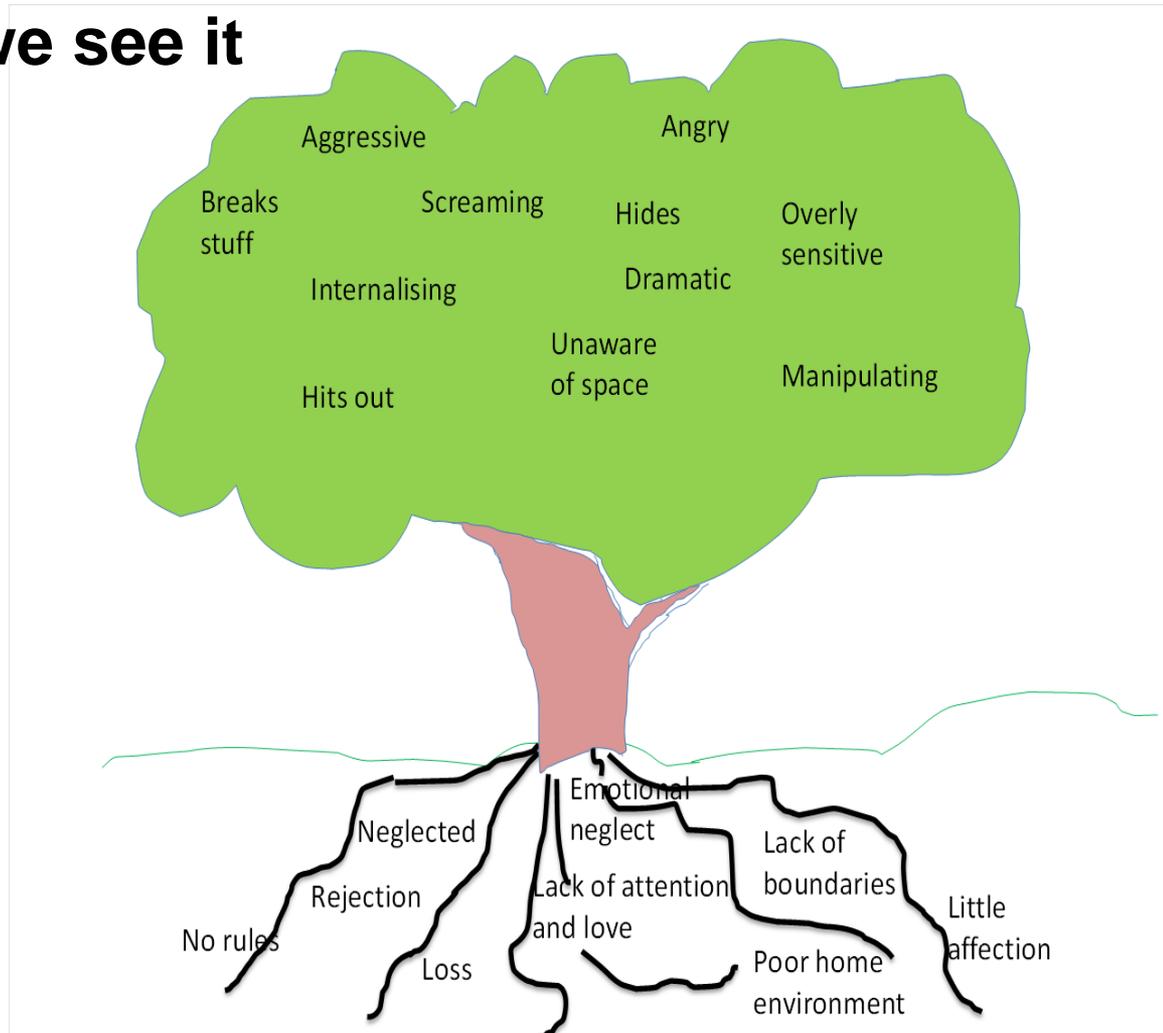


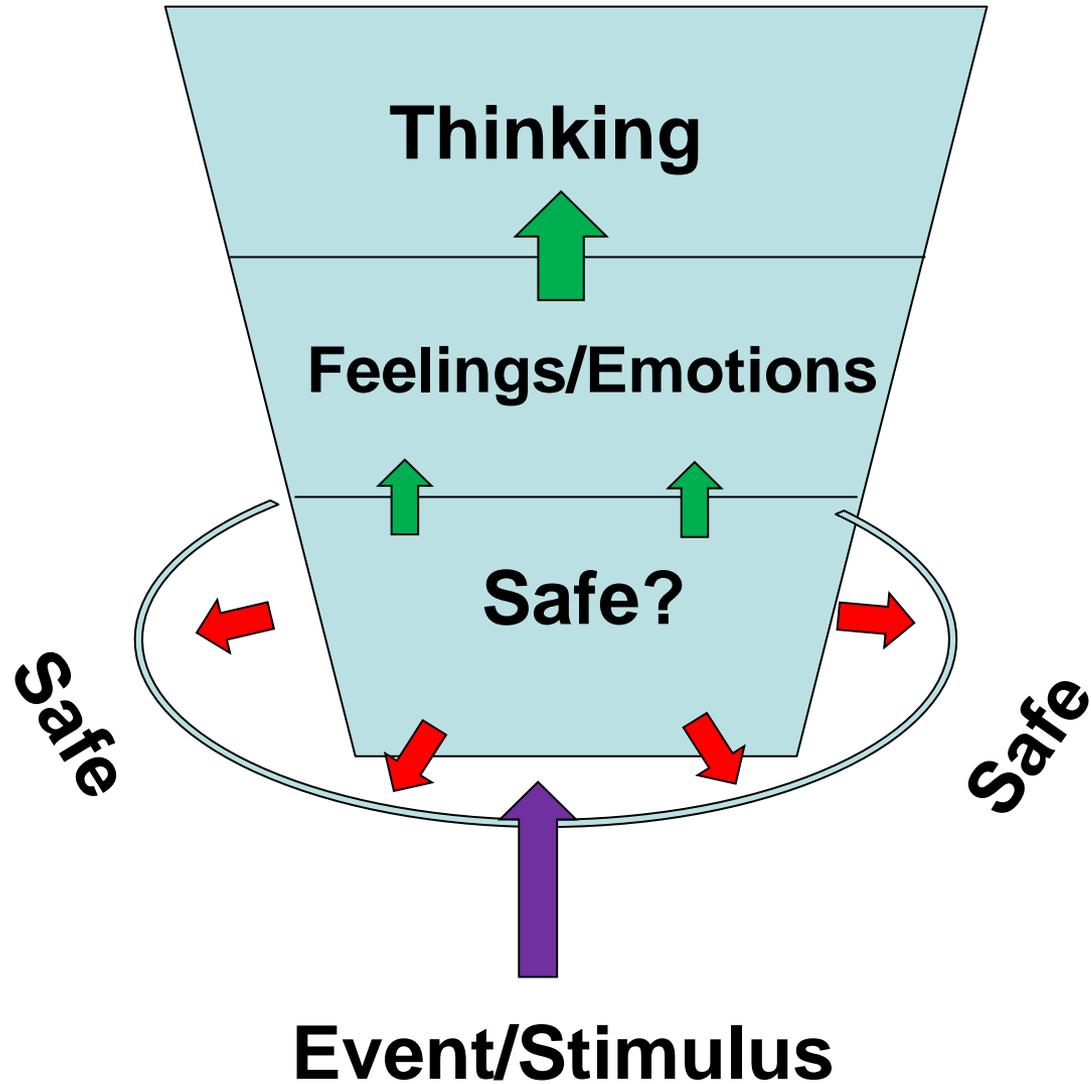
That truth is that monsters are real, and ghosts are real, too. They live inside us, and sometimes they win”



King, S (1977) The Shining

Communication through behaviour and feelings – Understanding what we see and why we see it





The new messages for the child

Adults take care of children and meet their needs, not the other way around

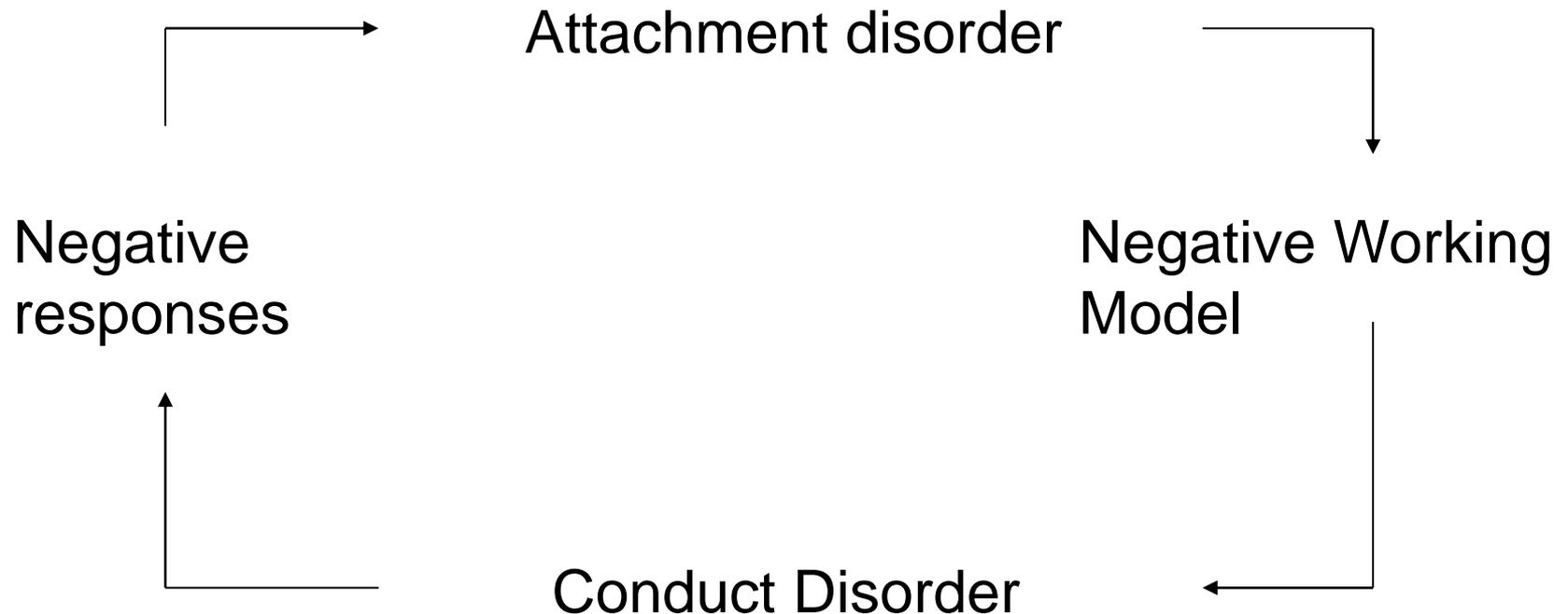
Every child is important

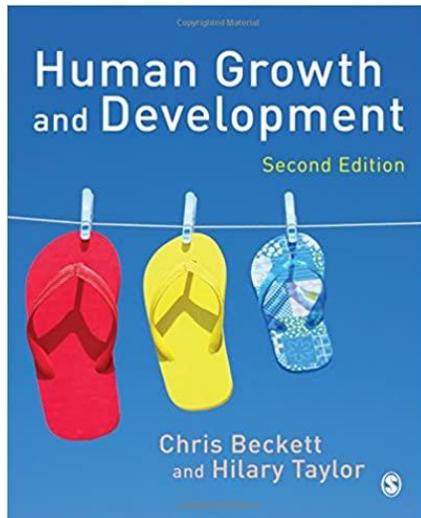
We can ask for what we need and get our needs met in ways that leave us feeling OK about ourselves

No one here uses force, bribery, tricks to get their own way

Everyone's feelings are important to listen to

Cycle of the Acting-Out (“Bad”) Child





“Children with grossly neglectful parents...will think of all kinds of excuses for the neglect in order to protect themselves from concluding that their parents do not care about them. They may tell themselves that they deserve the neglect, or that they prefer things the way they are”.

Beckett C (2002)

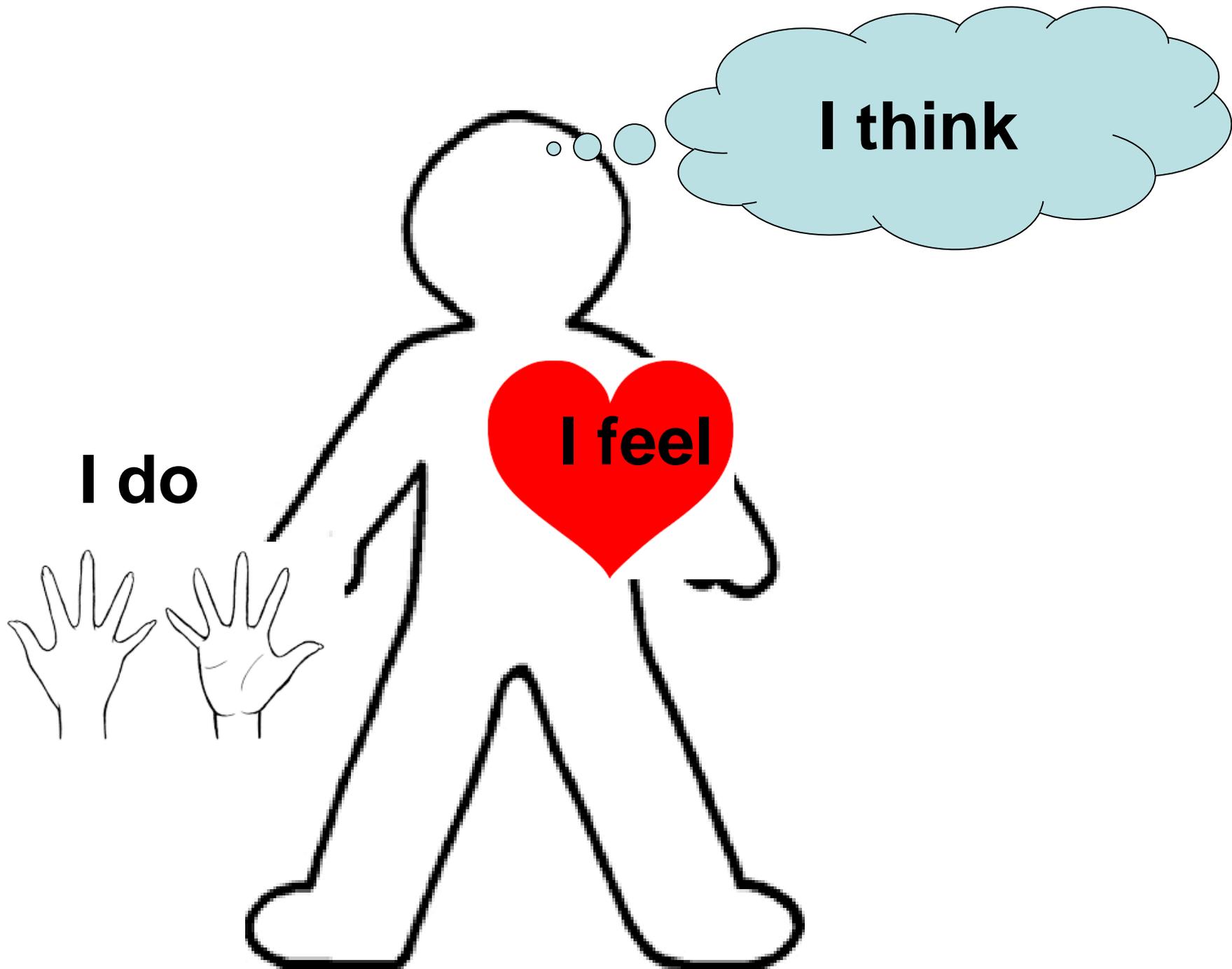
What Can We Do?

- Take the time and trouble to learn about the child's history and experiences.
- Consider the child's losses that will be triggered when they move on
- Accept the child with all the feelings, thoughts and behaviours that go with grieving.
- Be aware of the losses and bereavements in your own life.

Overcoming the Barriers of Complex Defences

We need to be patient, empathic, imaginative, respectful and tactful in order to help troubled children and young people communicate. In helping children to make sense of their world, we can explore their thinking, their emotional self and their internal view and then help shape their external presentation to achieve all they can be.

Rose 2012



I think

I feel

I do



**Don't forget the
rollercoaster!!!**

