

Attachment

Explanations of attachments

Learning Theory/Behaviourist Theory by Sears

This theory suggests that all behaviours are learned including attachments. Learning occurs via process of conditioning:

- 1) **Classical conditioning** suggests we learn through association
- 2) **Operant conditioning** suggests we learn through rewards

Through *C.C.*, babies learn to associate their caregivers with food (a course of pleasure). On this basis, the infant is thought to become attached to their caregivers.

In regards to *O.C.*, it is proposed a hungry baby feels uncomfortable and wants to reduce this feeling. When the infant is fed this feeling of discomfort is reduced. Thus food acts as a reward - referred to as the PRIMARY REINFORCER.

The provider of the food is regarded as the SECONDARY REINFORCER and they too act as a source of reward (as the infant wants to be with that person)

Evaluation of the Learning Theory

⊗ **Harlow's study**

Study: Placed a Rhesus monkey in a cage with 2 surrogate mothers. One made of wire (had food too) and another of cloth.

Findings: Monkey spend 1 hr at wire/food mother and 17-18 hours at cloth mother.

Evaluation of Harlow's study:

- Used animals so cannot apply to humans
- Unethical

This therefore suggests that attachments are not simply about food and satisfying a child's physiological need. Comfort instead seemed to be more important to the formation of an attachment. Therefore the learning theory cannot be the full explanation.

😊 / ⊗ **Scaffer and Emerson**

Looked at a sample of infants and found most were attached to the person who fed them, thus supporting the LT. This was not true for all infants thus going against the LT.

⊗ This theory is also too simplified in its approach to attachments; it suggests that attachments are only to do with providing food. Surely the mother's responsiveness to a child's needs is also important.

This theory also totally ignores the quality of interactions between the infant and the caregiver e.g. surely parents who spend most of their time with their children are undoubtedly attached.

Evolutionary Theory by Bowlby

- 1) Innate: Argued attachment is innate. Proposed infants are pre-programmed to become attached and adults are pre-programmed to form a relationship with their infants.
- 2) Monotropy: Suggested infants form one social bond with person who responds most sensitively to infants social releases (any behaviour of a child that makes an adult react like crying or smiling).
- 3) Internal Working Model: Bowlby suggested the infant develops an IWM which acts as a template for future relationships based on relationship between primary caregiver and infant
- 4) Critical period: Suggested if attachment not made in 2.5 years (the critical period), it will not be possible to. If an attachment had not been made by this time then the child would later suffer social and emotional problems

Evaluation of the Evolutionary Theory

☺ **INNATE: Lorenz and goslings**

Lorenz found a clutch of goslings because attached to the first thing they saw when they were born - him. For instance, they followed him everywhere.

This suggests there is an innate drive to form attachments.

- However, as it is done to animals, we cannot generalise to humans.

☹ **MONOTROPY: Schaffer and Emerson**

Conducted large scale observational study of attachment of infants. Found in many cases infants formed multiple attachments to people.

Bowlby suggested infants form one social bond but in this case they formed multiple bonds, contradicting the concept of monotropy.

☺ **INTERNAL WORKING MODEL: Hazan and Shaver's love quiz**

Found P's that had been classified as having a secure attachment as a child were more likely to have stable and long-lasting relationships later in life than those who were classified as being insecurely attached.

Supports the idea that relationship between child and caregiver does form a template and affects for future relationships.

☺ / ☹ **CRITICAL PERIOD**

Cases of privation such as *Genie* suggest that not having made an attachment by the critical period DID lead to problems in social and emotional development in her later life, supporting the concept of the critical period. However, this is not true for others, such as the Czech twins. Also there is the debate that maybe some children simply find it easier to form attachments just by their personality.

L.T. suggests that attachments are learned, whereas Bowlby proposed they were innate. Perhaps a better explanation may use a combination of both concepts.

Types of attachments

- 1) **Secure attachment** - this is where a child shows distress when separated from their main caregiver and joy when reunited. They also show signs of distress when confronted by a stranger.
- 2) **Insecure attachments** of which there are two types:
 - **Avoidant**- this is an infant who shows no concern when separated from their main caregiver and no concern when reunited.
 - **Resistant attachment** this is where an infant shows distress when separated from their main caregiver but pushes them away when reunited.

Measuring Individual differences in attachments - Ainsworth's strange situation

AINSWORTH created the strange situation as a way of assessing the quality of attachment between a main caregiver and an infant.

In this study (sample was 100 middle-class Americans) a mother and an infant were placed in a room which would have been unfamiliar to the infant. Ainsworth observed the infant's reaction to 8 stages. Within these eight stages at one point the infant was SEPARATED from their main caregiver (to see the infant's response) - known as 'separation anxiety'. The infant's reaction to being re-united with the mother, reaction to a stranger and willingness to explore their surroundings were all observed.

This study was carried out in the USA the results:

- 65% Securely attached
- 21% Avoidant
- 14% Resistant

Evaluation of the Strange Situation:

☺ Easy to replicate due to systematic procedures used. As the situation is the same each time, you can compare results easily. It is easy to identify cause and effect as the environment is the same each time but only the child differs.

☺ Variety of measures for assessing the attachment relationship; this is good as had it only been based on a single measure then false impressions could have been made. For example if a child cried when being moderately separated from their main caregiver we would assume that infant was securely attached. However when the infant and caregiver are re-united we are able to tell more about the actual attachment type.

☺ Research seems to suggest that having a secure attachment is beneficial for a child's later development whereas insecurely attached children are more likely to become hostile and socially inadequate. Thus the strange situation may be a valuable tool in early development

☹ Lacks ecological validity: it has been criticised for being unrealistic - as the setting is not necessarily true to life, as a result it may not be possible to generalise the results to real-life settings. Research

indicates that attachment appears stronger in the Strange Situation than at home (Bronfenbrenner study) clearly because the situation at home is less unfamiliar.

⊖ There are ethical issues to consider e.g. is it right to put infants into an unfamiliar room and then separate them from their main caregiver - which results in them being overly distressed. However then again it could be argued that the benefits outweigh the costs e.g. short term distress but could help their later development.

⊖ The strange situation and classification types were created in the USA this raises the question as to whether these can be applied to another culture.

Cross-cultural differences in the Strange Situation

Van Ijzendoorn and Kroonenberg aimed to investigate cross-cultural variation in attachment using information from previous studies.

They looked at 32 studies of the strange situation which had been carried out in 8 countries in total. They carried out a meta-analysis (using findings from several different studies to draw a conclusion). They found that in all cultures 'SECURE attachment' was most COMMON. However there was a slight difference in the number of avoidant and resistant types. In **western** cultures **avoidant** attachments were the second common form. Whereas in **non-western** cultures **resistant** attachments tended to be the second common form.

Evaluation:

⊖ Argued that the Strange Situation does not measure the quality of attachment in different cultures. This is because the way in which a child is raised can affect results. For example:

Germany results: 58% secure, 35% avoidant and 7% resistant.

One reason why there was a high number of avoidant attached infants was due to the Germans encourage children to be independent; therefore infants are use to being left alone. Thus there is no surprise that some infants show no concern when being left alone from their main caregiver. Additionally it seems that what the Americans classify as representing 'secure' attachments, Germans view as representing a 'clingy' behaviour. This raises questions as to whether the strange situation is a culturally applicable method of assessing attachment types.

Japan results: 68% securely attached, 32% resistant and 0% for avoidant.

However the reason why there were such high numbers of infants in Japan was classified as having a 'resistant' attachment is purely a reflection of child-rearing practises (how people raise their children). For example in Japan infants are never left alone and their parents rarely leave them in the care of anyone else. Therefore it is not surprising that when these children are put in the strange situation they become overly distressed. For instance in Takahashi's study he had to stop his experiment as some infants were that distressed. This raises the question about whether the strange situation is actually measuring the quality of attachments in different cultures.

⊗ It is argued that the Strange Situation is ethnocentric (when a procedure or set of results only applies to the culture it was created or found in) as the procedure and results are only applicable to the USA

⊗ Sample used was too small (2000) as it was supposed to represent billions of people so we may not be able to generalise results

⊗ **Grossman and Grossman** in (north) Germany found avoidantly attached were later linked to high dependency and poor peer relationships at age 10. Those who were securely attached were more confident and independent at age 10. This led to changes in child rearing practices (i.e. parents told to be responsive, less withdrawing of support)

Disruption of attachment - separation, deprivation and privation (including Institutionalisation)

Separation - refers to physical disruption of the caregiver-child bond. This does not necessarily lead to negative long-term effects

Disruption - refers to when the child has lost emotional care usually provided by the caregiver and this loss is not compensated by suitable levels of care from another person. Can lead to serious long-term problems.

Short-term effects of separation

The protest-despair-detachment model

When a child is separated from its main caregiver, the first response is likely to be crying. Some children stop quite quickly and turn their attention elsewhere. If separation continues then the child is likely to respond in a sequence of stages. Bowlby and Robertson's proposed the protest-despair-detachment model. This proposes that in response to separation, a child may go through the following stages.

1. **Protest** - the child cries but can be comforted. The child is fearful and angry. The child tries to find their attachment figure.
2. **Despair** - the child becomes calmer and appears apathetic; showing little emotion and interest in their surroundings. The child no longer looks for attachment figure, shows little interest in comfort offered by others and may seek self comfort through thumb sucking or rocking.

3. **Detachment** - this stage may occur after prolonged separation. The child appears to be coping well and responds to other people. However, the child seems emotionally detached; not really involved in relationships with others. Little interest is shown when the attachment figure eventually reappears.

It is important to know that a) this is only one possible response to separation and b) if a child goes through the first stage they do not necessarily go on the second and third.

CASES OF HOSPITALISATION

1) Jane, Lucy, Kate and Thomas

Four children all under three years of age and placed in foster care for a few weeks with the Robertsons whilst their mothers were in hospital. The Robertsons tried to sustain a high level of substitute emotional care and keep routines similar to those of home. Fathers' visits were arranged regularly to maintain emotional links with home. Also one of the children was taken to visit her mother in hospital and was much more settled after this. All the children seemed to adjust well. They showed some sign of distress e.g. one of the children rejected attempts to cuddle him but in general slept well and did not reject his mother when reunited.

2) Case of John

In contrast to the four children above, John's experiences were quite different. John was placed in a residential nursery for nine days while his mother was having a baby. During the first two days in the nursery the film shows John behaving fairly normally. Gradually this changes as he makes determined efforts to get attention from the nurses but cannot compete due to the other children. Nurses are always friendly but often too busy. When John fails to find anyone who will respond to him he seeks comfort from an oversized teddy bear but this isn't enough.

Over the next few days he gradually breaks down and refuses food and drinks, stops playing, cries a great deal, and gives up trying to get nurses attention. Nurses change shifts regularly so there is no constant care. In the first week he greets his father enthusiastically but by the second week he just sits quietly when his father is there and doesn't say anything. For long periods of the day he lies with thumb in mouth, cuddling his large teddy bear. On the ninth day when his mother comes to take him home, John screams and struggles to get away from her. For many months he continued to have outbursts of anger towards his mother.

Evaluation of the Robertson's findings:

☺ These findings were based on video clips. This is useful as another psychologist can see if the results are indeed accurate.

☹ However the sample is very small to make any real conclusions.

☺ This study should be credited as it was very influential in highlighting the possible ill effects of separation. This study led to changes in visitation rights during hospital separation. For example in the 1950's hospital visits were not allowed.

PRISON STUDY BY SPITZ AND WOLF

123 babies from prison mothers kept with mum until 9 months then for 3 months placed in nursery with high level of care. Babies showed signs of distress (e.g. crying, weight loss). Spitz and Wolf believed it was due to absence of mothers and loss of love. Babies returned to normal behaviour when returned to mothers.

Long-term effects of separation/deprivation

There are many reasons why long term separation might occur e.g. serious illness, divorce or parental death.

Bifulco (et al 1992) studied a group of 249 women who were separated from their mothers before they were 17 either through separation for more than a year, or through mother's death. The group as a whole had a hard time. The group as a whole had twice the normal rate of depression and anxiety disorders in adulthood. Additionally those who were under six when their mothers died had a particularly high rate of depression. This was not true of those who were merely separated from their mother before the age of six. This suggests that permanent separation has a more negative impact on a child's development than temporary separation.

Failure to form attachments - Privation

1) Case of Genie

Genie was locked in a dark room for about 13 years until she was "found". Her father requested that her mother and brother do not speak with her. When she was found, she was unable to speak or walk properly and she had clearly experienced some form of stunted growth.

When psychologists tried to help Genie it was clear that there were her developmental was limited.
Cognitive development: Although she was able to learn a range of words she was unable to put them into sentences, thus she experienced issues actually acquiring language. Her IQ score was below average at 20 (but had improved considerably) and she was able to communicate with sign language.
Social development: Genie was able to form relationships with the main psychologist that worked with her but had issues socialising with others.

Evaluation:

☹ Based on one person, so we cannot generalise results to the general population

⊖ It is difficult to determine cause and effect. Was Genie unable to develop as a result of privation or mental retardation?

⊖ It is suggested that Genie was not able to recover as she was found too late (e.g. she was 13 meaning that she had passed the critical period and as a result was unable to form attachments)

2) Case of Czech twins

Spent 7 years locked up in a cellar by stepmother deprived of food, exercise and sunshine. They were rescued at age 7 and were considerably short for their age and could hardly walk or talk. When rescued, they were cared for by two sisters who provided love and a secure family. Soon the twins put on weight and began to walk and talk.

By age 14, they had near normal intellectual and social functionality. By age 20, they were above average intelligence and had excellent relationships with members of the foster family. They went on to get married and have their own children.

Evaluation:

⊕ This study suggests the effects of privation are not that severe as the twins had clearly recovered, able to socialise and catch up academically.

⊖ It could be argued this is not a true case of privation as the twins had each other for support and that they were rescued at the age of 7 which was earlier than e.g. Genie and this may have been the reason why they recovered.

⊖ Based on 2 people only so we cannot generalise results to general population

3) Tizard and Hodges study on institutional care - a case of Institutionalisation

Aim: To investigate the effects of privation on a child's development.

Method: Longitudinal and natural experiment. Tizard et al focused on a sample of 65 infants who had been in institutional care from an early age. The carers at these institutes were told to not form attachments with any of the infants. As a result these children had a complete lack of emotional care. At the age of 4 some of these infants were adopted, some of them were restored, meaning they were taken back to their original homes. The others remained in the institutional care. Tizard and Hodges then followed this sample again at the age of 8 and 16.

Results: It was found that those infants who had been adopted had formed good relationships with their adopted adoptive parents. Whereas those who had been restored had experienced difficulty forming relationships with their original parents. However, both groups had trouble with peer relationships (e.g. less likely to have a special friend and were quarrelsome).

Conclusion: This suggests that the effects of privation had a negative effect on a child's development which is irreversible. Also that adopted children form better relationships with families than restored

children (probably because adopted children have a greater desire of parents and restored children feel resentment).

Evaluation:

- ⊗ A biased sample was left at the end of the study because greater numbers of well adjusted restored children and adopted children dropped out, so this would have affected results
- ⊗ Adopted children were more likely to be cute, friendly and social than others, therefore more likely to recover better than others anyway
- ⊗ This study merely finds a relationship between privation and later issues - there may be other factors involved

The effects of day care on a child's social development

Social development: This considers the way in which children interact with each other e.g. whether one child is aggressive or shares toys, or is shy etc

Negative effects of day care

1) NICHD

Method: Carried out in America, longitudinal study. Over 1000 children from diverse families and from 10 different locations continue to be involved. The children and their parents have been assessed at regular intervals in order to establish the effects of day care.

Results: When the sample of children was studied at age five, data showed that the more time a child spent in day care of any kind or quality, the more adults rated them as assertive, disobedient and aggressive

2) Belsky

Children in full-time day care were almost three times more likely to show behavioural problems than those cared for by their mothers at home. The behavioural problems included temper tantrums, lying, & hitting. Belsky found after these children finished their primary education there was a link between day care experience and increased aggression.

3) Sylva

Sylva who found that children who went day care before attending school tended to show increased independence and sociability than those who had not

Positive effects of day care

1) Clarke-Stewart et al

Method: Looked at peer relationships of 150 children aged 2-3 years, who came from different social backgrounds. This study was made up of a series of separate observations, to examine the effect of day care.

Results: The 2-3 year olds who had experienced day care were good at coping with social situations and negotiating with each other (for example they were more independent, showed obedience at dinner time and complied with requests)

Essentially they were more socially advanced than children who had stayed at home with their mothers.

2) Shea's study on peer relationships

Method: Infants aged between 3-4 were video-taped in the playground during their first 10 weeks at nursery school.

Their behaviour was assessed in terms of:

- **Rough-and-tumble play**
- **Aggression**
- **Frequency of peer interaction**
- **Distance from the teacher**
- **Distance from the nearest child**

Results: Over the 10 weeks the children's peer interaction increased and their distance from the teacher decreased.

There was a decrease in aggression but a noticeable increase in rough-and-tumble play.

Conclusion: Day care causes children to become more sociable and less aggressive.

Evaluation: This was a naturalistic observation meaning that the study has high ecological validity because none of the behaviour was manipulated.

However, it means that the results could have been affected by extraneous variables.

The behaviour was open to interpretation, so the findings could be biased - e.g. it could be difficult to differentiate between 'aggression' and 'rough-and-tumble play'.

3) Field on peer relations

Found that the amount of time spent in full-time day care was positively correlated to the number of friends children had once they went to school.

Evaluation of studies which have focused on the social effects of day care:

Quality of day care:

The effects of day care are likely to be negative if the provision is of a low standard (e.g. staff-to-child ratio is poor or high staff turnover as it makes it difficult for child to form bonds with staff)

In fact NICHD found that low-quality day care was associated with poor social development

Age of child and time spent in day care:

The age at which a child attends day care can determine whether the effects are good or bad. For example, Gregg et al found that negative effects were more likely to be found in children who are placed in day care before they were 18 months old.

How long a child spends in day care is an issue as well (e.g. a child who spends 30 hours a week compared to 20 hours may lead to more negative effects)

Individual differences

1) SHY

Some children may find day care harder to deal with than others. For example children who are shy may become withdrawn within a day care setting.

2) SECURE AND INSECURELY ATTACHED CHILDREN

Research also suggests that children who have secure attachments may find separation difficult, whereas insecurely attached infants seem to benefit.

3) TEMPERAMENT/PERSONALITY OF THE CHILD

Some children may just be more aggressive than others, and this has nothing to do with day care (e.g. family relations)

Implications of research (into attachments and day care) for child care practices

Implications considers the value of research

SEPARATION - HOSPITAL ARRANGEMENTS and PRIVATION

1) **Hospital arrangements:** Robertson and Robertson's study showed the negative effects of emotional disruption and gave ways in which this could be avoided

- Make sure substitute emotional care is provided
- Make sure attempts are made to make child visits the main caregiver

Implications: This has led to major changes in visiting arrangements for parents and children in hospital. Also affected foster care provisions

2) **Privation:** During Hodges and Tizard's study, there was a policy in institutions not to form attachments. Led to negative peer relations

Implications: Better care provided in institutional care e.g. more responsive workers

CHILD ADOPTION

Another application of attachment research has been to child adoptions. In the past, mothers who wanted to give their babies up for adoption were encouraged to nurse their baby for a significant period of time.

By the time the baby was handed to the adopted family it had past its sensitive period, making it difficult to form secure attachments.

Bowlby's research led to changed in adoption procedures. Today most babies are adopted within the first week of birth and research shows that such babies are just as securely attached as non-adoptive families.

QUALITY OF PARENTING

Research has also led to improvements in the quality of parenting. For example programmes such as 'Circle of security' aims to help carers learn to respond more sensitively to their young children and thus promote secure attachment. Grossman and Grossman's study also led to changes in child rearing practices (i.e. parents told to be responsive, less withdrawing of support)

QUALITY OF DAY CARE

Research into day care has also helped psychologists determine what makes quality day care. This can then help existing day cares improve their current provisions.

- E.g.1. Low child to staff ratios (e.g. 3:1 so they can provide more sensitive and consistent care)
- E.g.2. Minimal staff turnover - found that consistency of care was the most important factor in determining good outcomes (e.g. if consistent, infants are likely to form attachments)
- E.g.3. Qualified staff - the more qualifications that staff had the better the outcomes of day care