CAREGIVER-INFANT INTERACTION
STAGES OF ATTACHMENT
He placed great emphasis on child attachment on one particular caregiver, different and more important than others. Caregiver = mother, not needed to be the biological mother. More time spent with primary attachment figure the better. Monotropic = one particular attachment is better than others. Social releases: babies born with innate ‘cute’ behaviour like smiling, cooing, and gripping encourage attention from adults. This is social releases – purpose to activate adult attachment systems. Reciprocal process, baby mother innate predisposition to become attached and social releases trigger response in caregiver. Early week of life. Critical period around 2 years, infant attachment system is active. This is viewed as a sensitive period = child is maximally sensitive at age of two, attachment not formed in this time, harder to form one later. Internal working model: mental representation of relationship with primary caregiver. Serves as model of what later relationships will be like. Powerful effect on child later relationships. Loving relationship with caregiver = lasting and reliable, bring these qualities to future relationships. First relationship – poor treatment = poor treatment from one, poor treat them that way affects child’s ability to be a parent to themselves. Parenting behaviour on own experiences of being parented. Children functional families – similar families themselves.

Mixed evidence of monotropy = Bowlby, one attachment to their caregiver, special, different to later relationships, after this attachment later ones could form, not supported by Schaffer and Emerson (1964) most babies attach to one person first, minority could form multiple at same time, unclear something unique about first attachment, attachment to mother and father mother is more important in predicting later behaviour, stronger to primary caregiver than other attachments, not different in quality. Support for social releases = infant behaviours initiate social interactions and that doing so is important to baby, Brazleton et al (1975) mothers and babies interacting, noting existence of interactional synchrony, extended observation to experiment, primary attachment figures told to ignore their social releases, babies show continued attachment continued to ignore baby some responded curling up or lying motionless, responded so strongly, supports Bowlby’s idea about significance of infant social behaviour. Support for internal working models = predicts patterns of attachment will be passed on to generations, Bailey et al (2007) tested – 99 mothers, 1 year old babies, quality of their attachment, to own mother using standard interview, assessed attachment of babies to mother observation, mothers reported poor attachment – children classified as poor in observations, supports Bowlby saying passed down through families.
Mary Ainsworth (1969)

Aim: To investigate the quality of attachment in relationships between caregiver and child.


Findings: Found a distinct pattern in the way the infants behaved. Identified three main types of attachment. Secure attachment, Type B. Insecure-avoidant, Type A. Insecure-resistant, Type C. Secure Attachment – explore happily, regularly go back to caregiver, proximity seeking and secure base behaviour. Usually show moderate separation distress moderate stranger anxiety. Require and accept comfort from caregiver in reunion stage. About 60-75% of British toddlers are secure. Insecure-avoidant attachment, explore freely don’t seek proximity or show secure base behaviour. Show little or no reaction when caregiver leaves and make little effort to make contact when at reunion stage. 20-25% of toddlers. Insecure-resistant, seek greater proximity than other but are unsure of caregiver’s availability. 3% of toddlers. 15% were insecure-resistant. 5% were securely attached: showed distress with mother upset when left happy when reunited, avoided strangers. 15% insecure-resistant (Type C) – uneasy around their mother upset if she left, resisted strangers also hard to comfort when mother returned.

Conclusion: Infants showing different reactions to their caregivers have different types of attachments.

Support for validity – strongly predictive of later development, babies assessed as secure typically have better outcomes in many areas, success at school romantic relationships and friendships in adulthood. Insecure-resistant attachment associated with worst outcomes including bullying in later childhood (Kokkinos 2007) and adult mental health problems (Ward et al 2006), evidence for validity of concept explain subsequent outcomes.

Good reliability – inter-rater reliability. Different observers watching same children in Strange Situation agree on attachment type classify them with, because takes place under controlled conditions because the behavioural categories are easy to observe. Bick et al (2012) inter-rater reliability in team trained observers found agreement attachment type 94% tested babies, can be confident attachment type infant identified does not depend on who is observing.

Culture bound – does not have same meaning in countries outside Western Europe and USA, two reasons, cultural differences in childhood experiences likely to mean children respond differently, caregivers different cultures differently. Takahashi (1990) noted that test not really work in Japan, Japanese mothers are rarely separated their babies that would expect, very high levels of separation anxiety, reunion stage Japanese mothers rushed baby scooped them up, meaning child’s response hard to observe.
Aim: Investigate the long term effects of maternal deprivation on people to see whether delinquents have suffered deprivation.

Procedure: 44 criminal teenagers stealing, interviewed for affectionless psychopathy – lack of affection, lack of guilt, lack of empathy. Families interviewed, early separation from mothers, control group, non-criminal but emotionally disturbed young people how often maternal deprivation occurred in child not thieves.

Findings: 17 of thieves frequent separation from mother before 2, compared with 2 in control, 14 thieves diagnosed ‘affectionless psychopaths’ 12 of 14 had separation from mother.

Correlation vs Causation – shows link between deprivation and criminal behaviour but we don’t know which way causes it.

Other factors = poverty causes the stealing, Counter evidence = Hilda Lewis (1954) – replicated 44 thieves larger scale, 500 young people, history of prolonged separation from mother, did not replicated criminality, difficulty forming attachment, problem for maternal deprivation, suggests other factors.

Poor Evidence = Goldfard poor quality orphanages, flawed war orphans traumatised, poor after care, other factors cause of development difficulties than separation. When growing up birth – poor institutions deprived parents not just maternal, 44 thieves study, Bowlby carried out assessment for affectionless psychopathy, family interviews = knowing what hoped to find.

Detailed information = retrospective data may be unreliable.

Damage is not inevitable = Jarmila Koluchova (1976) twin boys, Czechoslovakia isolagte age 18 months, 7 years old, looked after 2 loving adults, recovered fully, Bowlby identified critical period but could actually be sensitive as not critical as not inevitable, flaws Bowlby as Bowlby says its inevitable.
Robertson and Robertson 1968

Procedure: In a naturalistic observation, several children who experienced short separations from their carers. Observed and filmed. For example, a boy called John aged around 18 months stayed in a residential nursery for nine days while his mother had another baby.

Results: For the first day or two, John protested at being separated from his mother. He then started trying to get attention from the nurses, but they were busy with other children so he gave up trying. After another 3 few days, he began to show signs of detachment --he was more active and content than he had been previously at the nursery. But, when his mother came to collect him, he was reluctant to be affectionate.

Conclusion: The short-term separation had very bad effects on John, including possible permanent damage to his attachment to his mother.

John’s reaction might not have been due to separation—it could have been down to his new environment or the fact that he was getting much less attention than he was used to. There will have been little control of variables, and it would be difficult to replicate each individual situation.

Study took place in a natural setting, results will have ecological validity but will be less reliable.
Rutter et al (2011)

Aim: To investigate whether attachments are affected by institutionalisation.

Procedure: 165 Romanian orphans adopted in Britain, extent good care makes for poor early experiences of institutionalisation. Physical, emotional and cognitive development tested at ages 4, 6, 11, and 15. 52 British children adopted same time served as control.

Findings: First arrived UK, adoptees showed mental retardation, majority severely undernourished, age 11 adopted children differential rates of recovery related to age of adoptees. Mean IQ before age of 6 months 102, compared with 86 adopted between 6 months and 2 years, 77 for after 2 years, remained at age 16. Attachment appeared to be different in outcome related whether adoption before after 6 month, children adopted after 6 month signs of particular attachment disinhibited attachment, attention seeking, clinging, social behaviour directed indiscriminately towards all adults, both familiar and unfamiliar. Children adopted before 6 month rarely displayed disinhibited attachment.

Conclusion: The effects of privation can be reversed if attachment starts from before 6 months, long-term effects more permanent if attachment doesn’t start before 6 months. Maternal Deprivation on own doesn’t cause permanent effects because UK adopted children have been separated but didn’t show any problems.

NOTES

Real-life application- enhanced understanding of effects of institutionalisation, led to improvements in way children are cared for in institutions (Langton 2006), now large number of caregivers for each child, instead ensure constant care, smaller number of people, central role for child, key worker, means children have change to develop normal attachments and helps avoid disinhibited attachment, shows research immensely valuable.

Fewer extraneous than other orphan studies – often studies of loss or trauma when institutionalised, experienced neglect, abuse, or bereavement, hard to observe effects of institutionalisation in isolation because children dealing with multiple factors functioned as confounding participant variable, possible to study without main confounding variables in Romanian study, means findings increased internal validity.

Romanian orphanages are typical-useful data, possible conditions so bad results poor understanding impact of better quality institutional care in any situation as children experience deprivation, particularly poor standards or environment forming relationships with children, low levels of intellectual stimulation, unusual situational variables, lack generalisability.

Randomly assigned, researchers didn’t interfere with adoption process, those children adopted early may been more sociable ones, confounding variable, control-major investigation fostering vs institutionalisation didn’t use random allocation, Bucharest early intervention project, randomly allocated institutional care or fostering, methodologically better removes confounding variable, children chosen by parents, raises ethical issues.