

Center for Family Development

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Dyadic Developmental Psychotherapy for Adults and Couples

TREATING ADULTS

In our work with adults, we focus on patterns of attachment, working models, and how the past remains alive in the present in a manner that is rigid and not conducive to healthy and secure relationships. We then provide opportunities to integrate and heal these obstacles to growth and happiness.

The experience we have with our caregivers and our early life experiences become the lens through which we view our self-worth and our capacity to be empathic, caring, and genuine. As children, our parents are the "all powerful" center of our universe. If they think badly of us, then it must be true, and we come to feel that way about ourselves. A child has no perspective from which to cast doubt on this assessment. We then "internalize" their negative opinion and incorporate it into our view of ourselves. If we were regularly criticized or demeaned we can easily develop a damaged sense of self-worth.

Harmful childhood experiences (even those not remembered consciously) can force us to close our hearts in an attempt at self-protection from further pain. There is no such thing as perfect parents. We all have "baggage" from our pasts, and we construct walls of emotional scar tissue to close over our unhealed wounds. This protective barrier locks us in and others out and can inhibit our ability to develop close connections with others. The degree of this self-protection is equal to the severity of our perceived wounds.

We develop a tailor-made program to meet the individual's needs through on-going assessment and treatment.

The primary goal of treatment is positive change - new choices, perspectives, options, behaviors, coping strategies, and relationships. The primary outcome is a more flexible approach to oneself and relationships. Rigidity in working models and relationships is one indicator of earlier difficulties.

Attachment Styles and Relationships

The attachment styles that develop in childhood stay with us for a lifetime, unless amended and changed by therapeutic intervention. These styles influence our feelings of security, the personal meaning given to our experiences, and the ability to develop and maintain intimacy with others. We all have perceptions and behaviors across the continuum of attachment styles; however, we tend to adopt one primary style based on early attachment relationships. (Note the following has been adapted from the significant research of Mary Main, Ph.D. and Erik Hesse, Ph.D., both at the University of California at Berkeley. They have published numerous significant research papers on Adult Attachment and its effect on the developing child).

Secure Adults

Securely attached adults were raised in a consistent, reliable, and caring way. They learned early that the world is a safe and accessible place and others are viewed as dependable and supportive. They feel able to

love and they feel loveable. They are compassionate and responsive to others. They are flexible thinkers and able to explore options and ask for advice. They are accepting of differences and trusting in love.

Attachment injuries can occur when needs for comfort, closeness and security are not adequately met. The following attachment styles are influenced by varying degrees of attachment traumas.

Avoidant Adults. Dismissing Style

These individuals have a dismissing state of mind with respect to attachment. They often have vague and non-specific early childhood memories. They avoid intimacy and close affective involvements. These individuals experienced caregivers as unnurturing, dismissive and critical. Avoidant adults are uncomfortable with closeness and intimacy. They are emotionally distant, uncomfortable expressing needs or asking for help. Often they do not recall much of their childhood experiences. They can be cool, controlled, ambitious and successful. They avoid conflict and tend to be passive-aggressive and sarcastic. They don't want to rely on anyone, fearing dependency or a perception of being weak.

Ambivalent Adults. Preoccupied Style

These individuals have a preoccupied state of mind with respect to attachment. They have over-detailed stories and continue to reexperience past hurts and rejections in a manner suggesting a lack of resolution. These adults had parents who alternated between warmth and availability and coldness and rejection for no apparent reason. Ambivalent adults are bossy and controlling and do not like rules and authority. They are impatient, critical, and argumentative. They like to "stir the pot" and often sabotage getting what they want. They also can be creative, exciting, adventuresome, and charming.

Disorganized Adults

These individuals have a disorganized state of mind with respect to attachment. They do not have an organized approach to relationships. Often these adults exhibit behaviors that suggest a diagnosis of borderline personality disorder. They run very hot and cold and are quite mercurial. As children they had histories of abuse, neglect, or severe loss. Their parents were unresponsive, inconsistent, punitive, and insensitive. They learned to view others as unavailable, threatening and rejecting. They are afraid of genuine closeness and see themselves as unworthy of love and support. Disorganized adults show many antisocial behaviors such as lack of empathy and remorse. They are selfish, controlling, refuse personal responsibility for their actions, and disregard rules. Their experience of severe attachment trauma makes them much more vulnerable to a variety of emotional, social, and moral problems. They are at high risk for alcohol and drug abuse, abusing their own children and other forms of criminality.

COUPLES TREATMENT

We are biologically organized to seek and maintain attachments with others through which we learn the lessons of love, inter-dependence, and trust. The quality of our core relationships has a profound effect on our health and well-being. Studies show that the level of marital happiness is the strongest predictor of overall life satisfaction.

When we enter into relationships, both partners bring along all their unresolved conflicts, fears, hurts and expectations. There is a strong tendency to recreate abusive, neglectful, or in other ways hurtful relationships from childhood with our adult partners. These old dysfunctional patterns become indistinguishable from current emotional triggers. A stacking of emotions can occur whereby an event in a current relationship triggers the unleashing of old feelings and reactions, creating a confusion of powerful old hurts and new ones. If our emotions in a situation are disproportionate to the provocation, we are probably bringing up an old hurt.

The tendency to unconsciously attract relationships that reenact past conflicts and beliefs is called "repetition compulsion." This drive to repeat familiar patterns, no matter how painful or self-defeating, is very powerful. For example, adult children of alcoholics frequently marry alcoholics, and an abused child with a high tolerance for

maltreatment may grow up and attract high levels of stress and conflict in his/her marriage. We unconsciously are attracted to people who allow us to revisit our childhood issues in an attempt to get it right.

To be successful in relationships, we must also learn how to blend our differences. When couples fall in love, differences are easily tolerated, and both work hard to please each other. However, as we become more familiar and the stresses of life take their toll, our best behavior is quickly eroded. Soon our little differences become annoyances and our predominant attachment style emerges. Partners commonly have different styles, which guides their attitudes and behaviors in relationships. We often attempt to change the other person to fit more comfortably with our own beliefs. This rarely works. The following is how the various adult attachment styles look in relationships.

Attachment Styles and Relationships

Attachment styles learned in our early years can be changed. We provide appropriate corrective emotional experiences whereby more "secure" attachment styles can be learned. These modifications can redefine the couple's relationship in many significant ways. Learning to create a healthier relationship provides an arena to heal old wounds and to establish a meaningful bond for the future.

Secure Adults

Securely attached adults have the ability to connect and feel close, and also to honor their own and their partner's need for separateness. They are responsive and empathic to their partner's feelings and can easily forgive. They have appropriate boundaries and are confident, trusting, and loving mates.

Avoidant Adults

Avoidant adults become physically and emotionally distant in relationships. They prefer detachment rather than connection, because of a very strong unconscious fear of dependency, which they believe will lead to rejection. They are unresponsive and intolerant to the needs and feelings of their mates. They are rigid and lack spontaneity. They are often angry, controlling, and critical. They need considerable reassurance and praise, but do not ask for it. They do not do well disclosing feelings or being intimate. They can be a responsible partner if you do not make many emotional demands of them.

Ambivalent Adults

Ambivalent adults are up and down in relationships. One moment they might be available and the next rejecting. They love arguments and rarely get resolution on issues. They are over-close in relationships. Their needs are always changing, yet they expect their partners to know what their needs are and to meet them. They tend to want to control in a critical, demanding and volatile manner, yet rely on their partners to keep the family going. They are quick to blame others and can tantrum when they do not get their way. They might hit below the belt in a fight. They fight hard and play hard and are never dull, keeping their mates off guard with an unpredictable and charming nature. They need a grounded partner to keep them in check.

Disorganized Adults

Disorganized adults have chaotic relationships. They do not give love and affection easily and are unresponsive and insensitive to their partner's needs. Abuse and neglect is common in their families. They have explosive rages and lack empathy and compassion for their mates. Because of their damaging early experiences, they have a great need for safe and secure relationships, yet lack the trust in their partners to help create it.

ADULT / COUPLES THERAPY ISSUES AND GOALS

Learn Relationship Skills

Adults who grew up in families where problems were not openly discussed lack an effective model for how to solve problems and resolve conflict. We emphasize the teaching of skills that enhance the couple's ability to work out their differences in a healthy way.

Resolve Old Grief

We often need to go through a process of grieving our childhood losses and pain in order to properly move into adult roles. Otherwise, we bring these unresolved feelings into our intimate relationships. We offer an opportunity for healing and mastering the original hurts rather than re-enacting them by withdrawing or attacking.

Experiential Approach

Intellectual understanding is not enough to convince our emotions to change. Our feelings rule our interactions and determine our attitudes, judgments, and perceptions. We provide a safe, collaborative environment in which to cut through defenses and try out new more productive behaviors.

Attachment Communication Training

Effective communication is a key ingredient in successful relationships. We provide the conditions and structure necessary to create safe and constructive confiding, opening, and connecting. This is accomplished by practicing sharing and listening skills, which increases positive patterns of interacting. Being attuned to one another's needs and feelings promotes empathy, warmth, and genuineness. Current relationship patterns are tied to prior family-of-origin attachment patterns. We assist couples in developing healthy confrontation, problem solving and conflict management skills.

Since our well-being and survival depends on securing the protection of attachment figures, that relationship is our central concern throughout childhood, and its unresolved insecurities linger into adult life, including marriage. John Bowlby wrote in *Attachment and Loss* (1973, p.369):

No variables have more far-reaching effects on personality development than a child's experiences within the family. Starting during his first months in his relation to both parents, he builds up working models of how attachment figures are likely to behave towards him in any of a variety of situations, and on all those models are based all his expectations, and therefore all his plans, for the rest of his life.

There is a direct link between childhood attachment patterns, adult attachment styles, and functioning in intimate and romantic relationships. Confidence in the availability of attachment figures develops during childhood. The expectations and belief systems ("working models") that develop during these early years tend to persist throughout life. These beliefs guide our perceptions of others and behaviors, and we often recreate patterns of attachment previously experienced. That is, early childhood patterns are unknowingly recreated in our adult relationships (e.g., marriage).

Consistent, sensitive, and loving parenting leads to secure attachment and positive beliefs. Others are viewed as dependable and supportive, and the self is viewed as worthy of love and support.

Adverse caregiving experiences (e.g., abuse and neglect) lead to insecure attachment and negative beliefs. Others are viewed as unavailable, threatening and rejecting, and the self is viewed as unworthy of love and support.

The absence of secure attachment creates considerable distress, resulting in vulnerability to a variety of physical, emotional, social and moral problems. Attachment experiences and patterns extend into adult life, and influence: 1. feelings of security, 2. personal meaning given to experiences and relationships, 3. the ability

to develop and maintain close affectional bonds, and 4. conflict and feelings of isolation commonly experienced by couples.

ATTACHMENT AND COUPLES

Adult intimate relationships are often defined by emotional responsiveness - when needs for closeness, support and security are either met or not met. Attachment security occurs when partners can provide comfort and support to one another during emotionally difficult times.

Attachment injuries can occur when needs for comfort, closeness and security are not met. These injuries or traumas create barriers to the ongoing security of the relationship, and result in negative emotions and a cycle of distressing interactions.

Partners commonly have differences in their attachment styles and internal working models (belief systems). These working models, based on past relationships, guide their current perceptions and construction of reality.

Attachment styles and working models, learned in our early years, can be changed. Such change can redefine the couple relationship in significant ways.

Adults with a history of trauma (e.g., abuse, neglect, severe loss) typically have a greater need for safe and secure relationships. However, they also have difficulty trusting their partners. Learning to create a healthy relationship provides an arena to heal old wounds and establish a meaningful bond for the future.

Anxiety and anger are responses to perceived inaccessibility of attachment figure. Even when the individual attempts to withdraw, it is angry or spiteful withdrawal.

Negative reactions to perceived unavailability of attachment figure.

Negative reactions to perceived lack of responsiveness of attachment figure.

Generalized anger toward attachment figure.

The Adult Attachment Interview was used to assess parents' patterns of attachments [Main et al., 1985]. This interview procedure elicits details of early family life, relationships with parents, and unresolved emotional issues. It assesses the adult's early attachment experiences and their current "state of mind" about attachment. Based on their responses, adults are assigned to one of four categories, each equivalent to and predictive of infant/childhood attachment patterns.

1. Secure-autonomous

- Coherent view of attachment.
- Secure base provided by at least one of their parents.
- Do not portray their childhood as trouble free.
- Objective regarding the positive and negative qualities of their parents.
- Able to reflect on selves and relationships (little self-deception)
- Comfortable talking about attachment issues.
- Communicate in a clear, direct, and honest manner.
- Worked through painful issues from childhood and can discuss these issues without much anxiety or stress.
- Insight into the effects of early negative emotional and family experiences.
- Understanding and some level of forgiveness towards their parents.
- Able to depend on others.
- Accept the importance of relationships in their lives.
- Most of their own children were rated as securely attached.

2. Dismissing

- Unable or unwilling to address attachment issues in coherent and serious way.
- Dismiss the value and importance of attachment relationships.
- Guarded and defensive answers.
- Often not able to accurately remember their childhood.
- Do not want to reflect on their past.
- Idealized their parents.
- Deny true facts and feelings associated with negative parental behavior (e.g., abuse and neglect).
- Avoid the pain of early rejection and their need for love and affection through various defensive strategies.
- Three-fourths of their own children were avoidantly attached.

3. Preoccupied

- Confused and incoherent regarding memories.
- Unresolved about early hurt and anger in family relationships.
- Childhood characterized by disappointment, frustrating efforts to please their parents, and role reversals ("parentification").
- Remain emotionally enmeshed with parents and family-of-origin issues.
- Unaware of own responsibility in current relationship problems.
- Most of their own children have ambivalent attachments.

4. Unresolved

- Experienced severe trauma and early losses.
- Have not mourned lost attachment figures and not integrated those losses into their lives.
- Frightened by memories and emotions associated by early trauma.
- May dissociate to avoid pain.
- Confused and incoherent regarding past events.
- Extremely negative and dysfunctional relationships with their own children, including abuse and neglect.
- Script their children into past unresolved emotional patterns and dramas.
- Produce disorganized-disoriented attachments in their children.

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