The impact of attachment insecurity on emotion regulation

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Attachment theory provides a framework for understanding how early relational dynamics with caregivers contributes to stability in adulthood. emotional Disruptions in early relationships can function as a vulnerability factor for psychological distress, primarily because insecurity interferes with effective emotion large body of research regulation. A demonstrates that early attachment orientations filter through to adulthood (see Collins & Allard, 2001, and Mikulincer & Shaver, 2003, for reviews), and the following review discusses how these orientations impact on individuals' capacity to emotionally regulate.

Secure Attachment

Responsive caregiving usually produces a secure attachment orientation, in which children develop positive representations of themselves and the world and confidence that others will be available in times of need (Bowlby, 1973). As adults, securely attached individuals are comfortable with both intimacy and autonomy and have the ability to manage negative feelings constructively (Bowlby, 1988). Finding it easy to get close to others, securely attached adults are most report positive likely to relationship experiences with parents, friends, and partners (e.g., Hazan & Shaver, 1987), make positive attributions about others' motivations and behaviour (e.g., Collins & Allard, 2001), and tend to see themselves as generally likeable and loveable (e.g., Hazan & Shaver, 1987). When distressed, those with a secure attachment orientation are able to seek support, and accept help with problem solving (e.g., Kobak & Sceery, 1988; Simpson, Rholes, & Nelligan, 1992).

Insecure Attachment

Less responsive caregiving can lead to an insecure attachment orientation that develops in response to an unfulfilled need for closeness, and afflicted individuals find it difficult to trust others, particularly when distressed (Bowlby, 1973). Insecure attachment has been further clarified to dimensions capture the two of anxiety/ambivalence and avoidance (Ainsworth, Blehar, Water, & Wall, 1978; for a comprehensive review see Brennan, Clark, & Shaver, 1998). Anxious/ambivalent develops attachment in response to inconsistent caregiving and is characterised by abandonment fears, self doubt, and high anxiety about trusting close others (Ainsworth et al., 1978). As adults the primary goal for these individuals is to be in a relationship, no matter what (Hazan & Shaver, 1987). Because they tend to be preoccupied with the availability of their attachment figures, anxiously attached individuals often interpret ambiguous behaviour as rejection, and they are ambivalent about the ability of their partners to be relied upon, especially during times of distress (Mikulincer & Shaver, 2003). In avoidant orientation contrast. an of attachment can develop in the context of rejecting neglecting or caregiving (Ainsworth et al., 1978). As adults these people are fearful of emotional intimacy and deny any need for it, appearing to have no anxiety about abandonment. Resigned to believing that their psychological needs will not be met, these individuals often suppress their needs and become emotionally distant. In times of distress they are less likely to seek help and support from others, but rather defensively suppress their emotional

Sarah completed her clinical training in 2011 and has since been working as a Clinical Psychologist for WDHB, in West Auckland's Adult Mental Health Service. She has a strong interest in the application of attachment theory within clinical practice. affect (e.g., Simpson, Rholes, & Nelligan, 1992).

Where abuse or other traumas have featured in an individual's early years the individual may demonstrate high attachment anxiety *and* avoidance, referred to as disorganized attachment (see Main & Solomon, 1986) and often a vulnerability factor for personality disorders (e.g., Holmes, 2010).

Emotion Dysregulation

Mikulincer and Florian (1998) summarised attachment security as a core protective factor akin to resiliency, while attachment insecurity functions as a risk factor for distress in the face of difficult life events. Reactions to a distressing event can be determined by the individual's cognitive appraisal of the event, the subsequent insult to their self esteem, and the coping strategies adopted to manage any distress; all processes which are influenced by attachment orientation (Alexander, Feeney, Hohaus, & Noller, 2001; Roberts, Gotlib, & Kassel, 1996). For insecure individuals, dealing adaptively with distress may be obstructed by various relational difficulties due to the activation of the attachment systems and related behaviours (Kobak & Sceery, 1988). Those with a secure orientation of attachment tend to have a greater capacity to acknowledge, tolerate, and express their distress, and subsequently engage in coping strategies that support interpretation and management of the situation most consistent with maintaining stability of mood (Shaver & Mikulincer, 2007). In contrast, however, studies demonstrate a general pattern in which individuals high in attachment anxiety overestimate the threat associated with a situation while those high in attachment avoidance tend to underestimate it (see Mikulincer & Shaver, 2008, for reviews).

Anxiously attached individuals come to expect that people are unpredictable and inconsistent and are afraid of being abandoned in times of need. They are thus motivated to seek closeness when distressed and default to hypervigilant strategies, dealing with distress by clinging to close others and devaluing their own ability to manage to increase bids for attention from others and the likelihood of their unmet attachment needs being met (Mikulincer, Dover, & Shaver, 2004). Coping strategies tend to be ruminative and emotion-focused as anxious individuals find it difficult to suppress or regulate their emotional experiences and are unable to limit their distress moving into other areas of their lives (Gillath, Bunge, Shaver, Wendelken, & Mikulincer, 2005; Mikulincer & Orbach, 1995). This coping style is similar to the position of "active passivity" (Linehan, 1993), in which the individual approaches difficulties passively or helplessly, while actively enlisting others to come to their aid. Over time, the individual may become so reliant on other people for problem solving that they are unable to self-regulate.

Avoidant individuals are also fearful, although as they are more familiar with emotionally unresponsive or critical caregiving, their apprehension is about emotional expression and closeness, which they associate with being hurt. They are most concerned with protecting their self concept and do so with *deactivating* strategies such as withdrawal, denial, and suppression of their attachment needs when confronted with difficult events (Mikulincer et al., 2004). A lack of regard for their own feelings may present as a veneer of coping well, akin to "apparent competence" 1993), which (Linehan, describes а behavioural pattern of appearing "deceptively more competent" (p. 10) than they really are in some contexts while they may be falling apart in others. People high in attachment avoidance demonstrate greater defensiveness around their emotions, and cope by detaching, denying, and inhibiting distress their affective response to (Mikulincer & Orbach, 1995; Shaver & Mikulincer, 2007). However, this "compulsive self-reliance" (Parkes, 1991) may actually perpetuate distress.

This article has explored how insecure patterns of attachment can interfere with individuals' capacity to emotionally regulate. Holding an understanding of affective instability within the context of relational

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dynamics can inform our work with clients with mood and personality disorders, by providing further insight into the development of coping strategies that may provide initial safeguards to pain but ultimately promote further distress.

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