Establishing Healthy Parental Attachments

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Establishing Healthy Parental Attachments

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Abstract

The research will show that children who experience healthy attachments with their parents early in life are likely to be successful at coping with life skills in adulthood. Bowlby’s Attachment Theory describes deep emotional bonds between a parent and child, from the infancy stage on through adulthood. Establishing healthy parent-child attachment early in life is more likely to increase structured environments and manage coping skills as they mature into their adulthood. Identifying healthy parent and child attachment methods along with providing unhealthy parent and child attachment methods is the underlying purpose for this paper. Research and studies have been gathered from several sources that explain the Parent and Child Attachment Theory, and offer supporting facts to support healthy findings in the area of parent and child attachment theory.

Children who experience healthy parent attachments with caregivers are most likely to succeed in coping with life skills in adulthood and over their life span.

Keywords: secure attachment, insecure attachment, caregiver roles, mindfulness.
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Establishing Healthy Parental Attachments

This paper will present evidence about healthy parental attachment as it relates to relationships throughout one’s life. Key information will be shared about the different attachment styles, theories, interventions, and difficulties of establishing parental attachment. By examining the early works of Bowlby’s Attachment Theory, the paper forms a solid framework for understanding how one relates, perceives, and exists based on their early infancy attachment.

The origins of Attachment Theory is the joint works of John Bowlby and Mary Ainsworth. These two theorists and researchers conducted numerous studies among infants, toddlers, and children to understand attachment styles between parent and child. Their findings have set the center stage for how child psychologists, psychiatrists, therapists, behavioral scientists, and the organizational communicator uses this information to interpret and understand human behavior (Bretherton, 1992). Both researchers were greatly influenced by the works of Sigmund Freud. Bowlby’s work was focused on medicine and psychiatry, while Ainsworth’s work focused on attachment security. Combining their research and findings, they were able to conclude that early family attachment determined how the child and later adult would behave socially, emotionally, and mentally.

Bowlby’s empirical evidence concluded that in order for a child to grow up mentally healthy, “the infant and young child should experience a warm, intimate, and continuous relationship with his mother (or permanent mother substitute) in which both find satisfaction and enjoyment” (Bretherton, 1992, p. 7). Other factors that affect this mutual enjoyment of a well-functioning mother-child relationship are economics, social networks, and health. There are four categories of attachment: secure (insecure), avoidant (insecure), anxious/ambivalent, and disorganized (insecure). Attachments are formed during the early stages of infancy and persist
as the child develops because parents tend to treat children in the same way, also because such patterns tend to be self-perpetuating (Snyder, Shapiro, & Treleavan, 2012, p. 710).

Secure attachment is more beneficial to the child, while insecure attachment presents development risks later in life. When a child feels secure (attachment) he/she is more willing to venture and return to safety. The mother nurtures the child both emotionally and physically when in distress, and reassures him when he/she is afraid. In order to offer this type of attachment (secure), the parent must show attunement, empathy, affective resonance, gaze sharing, entrained voice rhythms, and mutually shared pleasure.

A study conducted in Minneapolis observed children who showed secure attachment patterns at the age of 1 and followed them until the age of 4.5. These children showed signs of cheerfulness and popularity in comparison to a different control group of insecure children who were seen as unhappy and alienated (Snyder, Shapiro, & Treleavan, 2012, p. 710). The deepening issues were insecure children demonstrated more risk for impaired social, psychological, and neurobiological functioning over time. As a result, it increases the chances for the children to develop psychopathology in one’s lifespan. Insecure attachment has also been associated with depression and inability to handle stressful situations. Insecure attachment pattern, children are less frequent to be cheerful, maintain intimate relationships, and tend to be vulnerable in conditions of adversity. Difficulties persist if they marry or have children of their own.

A mother’s personal experiences influence her ability to relate well to her infant child or children. These experiences share her emotional health and mental wellbeing which in turn is carried on to her offspring. These experiences often relate to the mother’s upbringing (her parents). This is called intergenerational transmission of attachment. The process begins early
on, possibly even prenatally (Sydner, Shapiro & Trevelan, 2012, p. 711). Many mothers show the same attachment styles as their mother. Hence, mothers interact with their infants in much the same way as their mothers interacted with them; passing on this same type of attachment pattern (relationship). It does not tend to be permanent if an individual desires to change.

Another important topic is the mother’s secure attachment style provides the child with “affect regulation”. Affect regulation allows the child the ability to calm, soothe, or regulate their emotions based on the early parent-child relationship. The mother provides an early template for affect regulation through her ability to regulate her own affect in daily life (Snyder, Shapiro, & Treleavan, 2012, p. 711). Affect regulation is significant because of the mother’s increased vulnerability to difficult emotions. This is pertinent to maternal and children’s mood. If the mother shows sign of depressive/negative mood disorder, in return the mother teaches the child these same emotions and lays the foundation for future development that impedes the child’s attachment security. When mothers suffer from affect regulation they are shown to have less positive feelings towards their infants and to lack the ability to adequately mirror their infant’s emotional states and respond to their cues (Snyder, Shapiro, & Treleavan, 2012, p. 712).

Bowlby’s Attachment Theory of safe and secure attachment (Bretherton, 1992) in relation to interventions helps to keep relationships healthy and corrects conflicts, ranging from attachment through adolescence and onto adulthood. Parental attachment helps form the groundwork that people use to create relationships every day. Bowlby’s Attachment Theory (Bretherton, 1992) is the foundation on which studies and research are established. His theory has paved the way for understanding the relationship between caregiver and infant. Healthy attachment allows the infant to explore his or her world from a secure base and provides a safe
haven when the child becomes anxious. Bowlby’s early findings give enlightened perspectives on the evolutionary function of the child-caregiver relationship (Ma, 2006).

The Attachment Theory has been further advanced and improved by other researchers and several supportive empirical studies can be found such as Mary Ainsworth’s research that describes in detail the characteristics of a caregiving arrangement that are necessary to promote the development of the attachment relationship (Bretherton, 1992). Her studies further explore the effects of insensitive and inadequate parenting and the types of interventions that can be used to reverse improper attachment. So there is hope for change as it relates insecure attachment and other forms of attachments that are unhealthy to the development of the child.

To further provide more emphasis, secure healthy attachment is a bond formed in infancy between the child and primary caregiver (Ma, 2006). A secure base is a good indicator the child is positioned to develop effectively in socio-emotional and cognitive. Further, the primary caregiver gives the child an early start to learning effectively by exploring the outside world. This should be a goal of every parent or caregiver to provide a “healthy secure bond” for the child especially when the child is frightened, ill, or tired according to Bowlby’s Attachment Theory (Ma, 2006).

Ma (2006) states preventive measures and interventions are also discussed when looking at the many facets of the attachment relationship. Single mothers who receive less education and have fewer financial options, two-parent households where the parents have above average income and education, and adolescent parents who are in need of a support system, can all need help in their attachment relationship with their child (Miller, 2015). Other factors to consider as they relate to attachment is racial make-up, environment and gender can also have an effect on attachment. It is important to note, community-based and professional interventions can have a
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profundely positive and/or negative result on correcting attachment issues. Hence, parenting skills, self-awareness and mindfulness add value to the complexity of choosing an effective route with helping to achieve a healthy attachment relationship (Miller, 2015).

As children grow, they learn from their parental attachment how to form relationships as adults. As adults and parents, healthy attachment gives them the tools to cultivate proper relationships with not only their children, but also their peers. Understanding and interpreting the signs in relationships they develop and respond to according to their roots in a healthy parental relationship. The early roots for a child is important to understand because it gives evidence to the kind of relationships they will form in adulthood. For example, attachment theory is highly relevant in the aetiology of depression (Ma, 2006). If a child experiences early loss, separation and rejection by the parent or caregiver, it conveys a message that the child is unlovable which could lead to insecure attachment (Ma, 2006). These early associations and experiences in a sense pre-condition the child for relational success later in life. Therefore, it is important to establish healthy bonding and appropriate relationships under all costs and seek self-awareness.

John Bowlby’s Attachment Theory defines attachment as the deep and enduring emotional bond between one person to another across space and time (Bretherton, 1992) This does not mean that both individuals share the bond, though Bowlby’s theory is a primary way to describe the mother/infant relationship (Bretherton, 1992). The theory suggests an understanding of why an infant is anxious when separated from its mother, even when being cared for by another caregiver. The ‘Circle of Security’ theory describes a child’s needs in terms of attachment and exploration, and the role of the adult in meeting these needs. This theory suggests how lasting relationships are formed and maintained. Once learned, these
emotional/relationship patterns are carried into relationships with other people and can inhibit
later success with relating to others in a positive and more meaningful way. Needless to say, it is
in the best interest of parent-child to build strong healthy bonds so later relationships among
peers and romantic partners do not suffer negative outcomes because of their insecurities,
depressive state, or sense of worth (wellbeing).

Literature Review

Caregiver Role Attachments

Today’s mothers are not all homemakers. Many mothers today have full-time careers or
other demands placed on their time that may take them away from the important bonding process
that creates a successful attachment between a parent and child. Other identified caregivers
(educators or school teachers) will need to take up the mantle to provide a positive setting so that
the attachment can transfer and be successful (Miller, 2015). Here is where the problem arises.
The caregiver may have several children; the mother’s levels of attachment differ, as well as the
caregiver environment (Miller, 2015). A child exploring, trying to stay close and secure to the
caregiver, will find it difficult to do so if the caregiver is preoccupied with another child. The
caregiver has to find the time to play and communicate well with all the children under their
care. Caregivers also need to be supported in understanding the importance of their role in
caring for young children and the impact of their interactions (Miller, 2015).

In a perfect world, each child would have its own personal caregiver, someone who
would tend to its needs (Miller, 2015). The challenge arises when trying to care for two or more
infants can become daunting, but also much more difficult when you have several children vying
for the caregiver’s attention. At this instance, the caregivers will have a hard time maintaining
an environment that is less stressful for them and the children (Miller, 2015). Quality educated
caregivers may be hard to arrange for or find, and with mothers juggling careers and parenthood, it is sometimes difficult to provide the successful environment that will create the desired behaviors in the child (Miller, 2015).

Also, a single parent, low income, or dysfunctional family may face harder times providing the proper environment (Miller, 2015). It is apparent that mother/child relationship must reach a certain effective point to carry over into adulthood and attain success. A traumatic event in a small child’s life can easily derail that child from having a successful attachment relationship (Miller, 2015). Continuity and consistency does not only refer to caregiver attachment, but also to the changes in the home life of the child (Miller, 2015).

Over the past decade, studies have addressed inadequate or insensitive parenting and possible corrective measures through intervention. In AG Broberg’s (2000) article “A Review of Interventions in the Parent-Child Relationship Informed by Attachment Theory” insight is given in regards to attachment theory, but also some of the various ways to correct parent-infant (child) relationships that are not ideal under the attachment theory (Miller, 2015). It defines the terms used to describe the attachment theory and parent-infant relationship, along with references and studies that have explored ways to maintain and correct the child-caregiver relationships.

An attachment system is defined as a behavioral system that promotes survival and reproductive success, bolstered by providing a close proximity to the caregiver, who in turn, responds to a real or perceived stress or danger (Miller, 2015). The relationship that develops between the infant and the primary caregiver is evolution based. This is called the attachment relationship. Although most infants develop this relationship, not all can use the caregiver as a secure, safe haven from which to explore. It continues with caregiving and sensitive parenting. The caregiver relationship describes this as an adaptive function of protection of the young, and
ultimately enhancement of the caregiver’s own reproductive fitness (Broberg, 2000). The article states that a caregiver not only provides a safe and secure environment, but must also read the signals the child is giving and responding to. Allowing the child to lead communicative interactions between the caregiver can adjust and steer the child towards the desired behavior, all while providing the child the proper atmosphere in which to explore.

Another important study conducted by Van den Boom & Hoeksma (1994) examined the differences between irritable and non-irritable infants. The findings reported that irritable infants were more likely to experience in growth trajectory of visual contact, effective simulation, physical contact, soothing, noninvolvement, and nonresponsive to positive signals. This information is linked to maternal behaviors as well. Non-irritable infants’ maternal behavior was more positive and infants in return responded back in terms of their developmental temperament.

Personal Development

What weight does Bowlby’s Attachment theory hold in the development of a child and parent’s relationship? “Attachment is when emotional bonds with caregivers form the foundation for all future interpersonal connection” (McCornack, 2013). Many parents with a child over a decade younger than older siblings tend to create a knowledgeable bond with the younger sibling due to past experiences with older siblings (Miller, 2015). The dynamics of this shows that attachment can be either helpful or harmful in the growth of the child/children involved. Early on, into the stage of an adult parent and scholars will inform you that a parenting instruction manual does not descend out of the sky as soon as a child is born. It is a learned experience through trial and error as well as past experiences. However, psychologists and researchers having been trying to figure out methods to better the interaction between a parent and child at the early stages, to ensure a healthier platform as the child grows into young
adulthood (Miller, 2015). When a child becomes an adult, if they experience attachment disorders, this can only be triggered from early childhood experiences during infancy (Miller, 2015).

The nature of the relationship between a parent and youngest child after a huge space of time often can be more personable with younger than older siblings (Miller, 2015). The older siblings are in a more self-sufficient stage in their lives, and attachment to the older siblings is also influential in the younger sibling’s life. The younger child will model some of the behavior conveyed by the older siblings (Miller, 2015). Secondly, the parent can be less pressured regarding time, allowing them to forge positive relationships with the younger sibling that may or may not have been established with older siblings (Miller, 2015). Examples of this include the need to multi-task attachment relationships with other siblings in the home, focusing on the strengths and weaknesses of more than just one sibling in the household (Miller, 2015).

“Children’s earliest relationships with their parents are considered to create a template that shapes our expectations for future relationships” (Snyder, Shapiro, & Treleaven, 2012, p. 710). The stresses that can come with having a younger child at a time when older siblings are almost out of the house can be very overwhelming. Education in child development as well as communication can offer a parent the successful tools to help better the future of the child as well as the parent. “While birth is generally viewed as a positive experience, it can also be accompanied by negative life changes as in disturbed sleep patterns and possible job and income loss” (Snyder, Shapiro, & Treleavan, 2012, p. 711). Women in particular at this time have been found to have an increased risk of mood disorders such as anxiety and depression. Mothers suffering from such difficulties have also been shown to have less positive feelings towards their infants and lack the ability to adequately mirror the infant’s emotional states and respond to their
cues. This can, in turn, lead to a negative feedback loop in which the infant begins to provide less clear cues; the mother experiences heightened stress in not knowing what the infant needs, and the negative loop intensifies. Therefore, it is important for mothers to develop skills for self-awareness and emotional regulation, in order to interrupt this pattern. Mindfulness practice is one avenue for self-awareness and emotional regulation that may be of significant benefit to new mothers (Snyder, Shapiro, & Treleaven, 2012).

According to a story related to mindfulness, the child’s fevers, headaches and infection oozing out constantly, had gotten worse; the thermostat in the house, in June-July, was set to heat at eighty-five degrees. The child’s infection grew worse and the licensed professional mental health counselor noticed a change in the child’s mental and physical progress. The mother was losing the ability to utilize all the tools that had been put in place to help her strengthen the relationship with the child. After two long weeks in the hospital, the parent returned and the mental health counselor began working with the mother and child to ensure that the programs that were set in place to improve the emotional, mental, and physical wellbeing in the beginning of the health challenge before the mother was released from the hospital were still in place and the family was able to have support while the mother was on a low road. At the end the parent and child relationship was stronger than ever, a secure attachment had been built through a strong foundation. This supports that, “mindfulness research could expand to include not only a focus on symptom reduction of stress, but also includes the positive and beneficial qualities that may be cultivated by the practice” (Snyder, Shapiro, & Treleaven, 2012, p. 701).

This example relates to mindfulness because it taught the mother to take focus off the situation per se and use the tools given by the licensed mental health counselor to remove stressors. Furthermore, this example reinforces Bowlby’s Attachment Theory in the way we
understand the relationship between infant and caregiver(s) (Bretherton, 1992). An infant cannot explore its surroundings if the caregiver does not provide a safe and secure base from which to do so.

**Therapeutic Interventions**

Fonagry and Barbe (2002) define attachment system as a behavioral system that promotes survival and reproductive success, bolstered by providing a close proximity to the caregiver, who in turn, responds to a real or perceived stress or danger. This is called the attachment relationship. Insensitive parenting is addressed in the research. For example, over the past decade research has renewed interest in inadequate parenting and the psychology behind it. Fear plays a major role as a motivator to attachment, conflict behavior, and incompatible behavior systems are cited through the work of Main and Hesse (2006). Main and Hesse (2006) maintain that understanding an infant’s response to situations that arouse anxiety is critical to understanding attachment disorganization (Broberg, 2000). A frightened or frightening caregiver can cause a child to both want close proximity while exploring their environment and also cause the child to become anxious. Lastly, intervention into the behavioral system to correct the attachment is discussed. Several studies have started to evaluate the possibility that insensitive or even inadequate parenting can be effectively ameliorated by interventions (Broberg, 2000). Enhancing maternal sensitivity is a form of preventive intervention according to Mary Ainsworth (Bretherton, 1992). To achieve this objective, many interventions are aimed at changing the parent’s behavior in a variety of settings (Broberg, 2000). These interventions also include the parent’s “inner life”.

Therapeutic intervention or parent-infant psychotherapy is used in cases where the parent-child relationship is seriously disturbed. The underlying assumption is that such work is
necessary to help the parent to see the child as a person in his/her own right – as someone separated from, yet dependent on, the parent. (Broberg, 2000). It is concluded that the evidence for different infant-parent psychotherapies is weak and that infant interventions that attempt to enhance the parent-infant relationship in clinical populations themselves are still in their infancy stage (Broberg, 2000). This leads to meta-analysis of controlled studies. These are mostly preventive in nature.

Many researchers pose the question which intervention is best at achieving ideal infant-parent attachment goals? Preventive interventions are narrow in focus and look to enhancing maternal sensitivity. Therapeutic interventions address the parent’s psychiatric troubles or if the parent was traumatized during their own attachment experiences.

Preventive interventions, according to Van den Boom & Hoeksma (1994), studied 100 irritable infants from lower-class families and their mothers. The intervener visited these mothers a total of three times in the home and focused on the infant’s unique cues, mainly negative cues, such as crying. This seemed to be a small amount of time to observe and adjust the mother’s behavior and the infant’s attachment insecurities. The research states that the mothers became more receptive to their children’s cues, post-test, than the control mothers. It also says that 68% of the infants were secure by 12 months as opposed to 28% of the control infants.

Additional studies by Gakermans-Kranenburg (2010) are detailed and the time spent intervening is short (Miller, 2015). Four home visits, lasting 1.5 to 3 hours with intervening periods of 3 to 4 weeks are a little better than Van den Boom & Hoeksma (1994). These interventions were also carried out in a laboratory environment. They included a control group, a video with written information about sensitive parenting and personal video feedback group, and
a video and discussion group with additional discussions about the mother’s own attachment experiences.

It would seem difficult to make meaningful observations and adjustments without daily, controlled interventions. The intervener could see a difference in the infant’s behavior between visits, but as the child ages, their curiosity to explore should increase naturally. Secure environment or not, the level of positive attachment would be difficult to gauge.

Therapeutic intervention studies where the mothers were depressed and the child was a toddler were also examined. Sixty-three mothers took part in these studies. Randomly, twenty-seven mothers with depressive disorders were assigned to the depressed intervention group or a depressed control that consisted of 36 mothers. An additional forty-five mothers were also a part of a non-depressed control group in the study. The intervention consisted of psychotherapy intervention. The invention lasted 59 weeks with a mean number of 46 visits. At the start, 44% of the depressed intervention, 36% of the depressed control, and 13% of the non-depressed control group show insecurities. Post intervention studies showed that 26% of the depressed intervention, 47% in the depressed control, and 20% in the non-depressed control showed insecurities. These successes were attributed to the fact that the most of the mothers were married and had some post-high school education and were of a higher socioeconomic status.

The research describes in detail the techniques used in the interventions. The examples that are given don’t include how the mother’s behaviors were adjusted. It would be impossible to duplicate the results without knowing exactly what the interventions were. The research is well written, but states facts without explaining how the results were achieved.

Researchers Pinto, Verissimo, Gatinho, Santos, and Vaughn (2015) present evidence that self-esteem and peer acceptance stem from different areas of the parent-child relationship. The
study produced evidence that by the age of five, if the mother’s self-esteem was lower, the child was likely to have low self-esteem. In comparison, the father’s role affected the child’s peer acceptance and involvement. Both parents playing similar roles in the child’s development and pattern of growth and development. Historically, researchers do not provide as much relevance to the father-child relation on attachment. But, recent studies are starting to give more attention to the father’s role in the attachment/growth cycle such as this one.

**Importance of Playfulness**

It could be assumed play between parent and child does not or could not teach important skills/qualities and secure parent-child attachment. Gordon (2014) concludes that play builds healthy attachment between parent-child. Also, playfulness enhances lifelong attachment for the caregiver’s and child’s wellbeing. Furthermore, the research explores the notion that play involves exploration and attachment which contributes significantly to lifelong play and development in adults (Gordon, 2014).

The concept of play in attachment has been ignored by many scientists, but further recent research suggests that play is very important to secure parent-child attachment (bonding). It teaches both parties physical activity, social interaction, and creativity. These learned experiences lend themselves to adult qualities that will later be important with emotional stability, working as a team, and making the meaning of learning.

Simpson and Rholes (2002) research examines how attachment plays out in adult relationships and their response to stress, chronic pain, and failure. The evidence supports how attachment affects partners of the insecure partner – their ability to provide support during separation and difficult times. Furthermore, depending on the attachment style the adult may or may not deal well with stressful life events. It is even more important to have a secure
attachment to handle these issues effectively especially with so many heterosexual couples dealing with temporary separations (Simpson & Rholes, 2000). Another important factor related to the research is adult attachment styles can be modified; however it requires a close secure relationship with their therapist and the process is still likely to be difficult. The reason being is clients’ insecure working models may lead them to misinterpret therapists’ caring and nurturing behaviors as judgmental and rejecting. Also, the therapist attachment behavior may influence their ability to help or hinder the client’s attachment change.

**Mindfulness**

When a mother is experiencing difficulty regulating her emotions, which in return changes her mood, she is unable to effectively respond to her infant child’s cues and needs. As a result, the infant child needs are unmet and a negative feedback loop begins. The mother starts to experience heightened stress in not knowing what the infant needs, and the negative feedback loop intensifies (Snyder, Shapiro, & Treleavan, 2012). Therefore, it is important that mothers learn how to self-regulate their emotions as well as practice self-awareness. In order to accomplish this goal, mindfulness practice is one way to benefit new and existing mothers.

The relationship between mindfulness and regulating emotional stress caused from parenthood/motherhood is reported as being a primary tool for success along with early parenting skills (Snyder, Shapiro, & Treleavan, 2012). Mindfulness teaches individuals to pay attention to their present-moment experience, enabling practitioners to increase self-awareness and the ability to “perceive” experiences to prevent habitual self-identified reactions. As a result, the relationship between mindfulness and parenting has exponential benefits and show to decrease stress, regulate emotions, and provide a more positive environment for mother-child. Also, the research explores the relationship between mindfulness, attachment style, maternal
health, and children’s development. Researchers believe teaching mindfulness to mothers before a child is born (during pregnancy) is likely a positive way to increase healthy attachment.

Mindfulness is described as being intentional in three major ways: intention, attention, and attitude. Intention provides purpose for why one is paying attention and it sets the direction for the practice. Attention refers to the conscious attention towards the “present moment – here and now”. In return, healthier behavior is cultivated and more adaptive ways of responding to life circumstances (Snyder, Shapiro, & Treleavan, 2012). Attitude refers to how one pays attention, infusing attachment with a quality of acceptance, openness, and discernment. Attitude is better described as an “approach-based strategy” which enforces the sense of staying present (grounded) with the emotional state rather than moving away from it because of painful or aversive feelings, but rather learning to have deep acceptance of what is happening, and is being released from much suffering.

Mindfulness is a form of deep meditation that can actually change the structure of the brain. Studies have shown that mindfulness can lead to alterations in the brain in the areas that responsible for empathy and self-observation. Researchers describe mindfulness as one’s ability to observe his or her own mental processes known as “metacognitive” ability. Further benefits of practicing mindfulness are pain reduction, improved body image, decreased mood disturbance, and psychological issues such as depression and anxiety. The relationship of mindfulness to parental attachment is it promotes a healthy well-being between parent-child bonding/relating and reduces or prevents insecure attachment issues.

**Interventions**

Intervention into the behavioral system to correct the attachment is warranted. Several studies have started to evaluate the possibility that insensitive or even inadequate parenting can
be effectively ameliorated by interventions (Broberg, 2000). To achieve this objective, many interventions are aimed at changing the parent’s behavior in a variety of settings (Broberg, 2000).

Attachment-based interventions could have an encouraging effect on a child’s anxiety. There is some proof that a combination of child-focused behavioral therapy, along with parent-focused intervention, provides a more favorable result in the managing of child anxiety than child-focused cognitive-behavior therapy alone. Many of the study’s results varied from researcher to researcher. Some were convinced that treatment of children with anxiety disorders is more effective when parents are involved (Colonnesi et. al., 2011).

Community-based interventions are fairly new and their effectiveness addressing attachment is still untested. Parents may be hesitant to seek professional help, but there are community agencies that may provide support to include: Human & Health Services, Parents’ Advocacy Groups, and Parent Peer Support group at both the national and local level. The outcomes support the prospects that mothers who completed the program related higher levels of parenting efficacy and felt that their children were more secure.

It is estimated that 50% to 60% of children develop secure attachments with their parents. Substantial evidence points to the fact that secure children are more socially competent, have fewer emotional and behavioral problems, are healthier and score better on tests, than insecure children. Researchers such as Kenneth Ma also established the correlation between a positive secure attachment and adult functioning (Scharfe, 2011).

Insecure parents would have trouble asking for help and think certain kinds of assistance is offensive. Particularly, avoidant people might feel as if they are being singled out if professionals emphasize a specific approach for their children. The appeal of the community-
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based programs, especially among avoidant persons, might be because they are designed to concentrate on practical skills of good parenting. The parents do not feel as if they are being judged as they learn new types of ways to interact, play and soothe their child (Miller, 2015).

It is often thought by the parents that the cause of child-parent conflict lies with problems that the child is experiencing. Intervention is often directed at solving the issues of the child and not giving enough weight to the relationship of the parent(s) and the child. These interventions are questionable, in that the child-parent relationship plays a major role in the child-parent conflict. The child-parent conflict is a result of the lack and/or existence of the attachment bond from both the child and the parent(s) (Kindsvatter & Desmond, 2013).

Children’s disruptive and antisocial behavioral problems are a concern for individual children, their families, and society at large. Many researchers has shown that harsh, power-assertive parental control styles are a definite instrument in a child’s antisocial development. These behavior problems, if severe enough, can lead to oppositional defiant disorder, conduct disorder, or later, antisocial personality disorder. The lack of or impoverished parental warmth, positive affect, responsiveness, and nurturance have been connected to an increased risk for antisocial conclusions.

The main focus the aforementioned research conducted was on the differences in the relationships among parental power, the child’s resistance, and the child’s antisocial behavior, in insecure and secure children. The main effects of security were also explored. Early security had a lasting and considerable effect on the parent-child relationship. In the post-infancy years, insecure attachment was the reason for the breakdown of the parent-child relationship that in turn led to antisocial behavior. This cycle of mistrust puts children at risk for antisocial behaviors. Early secure attachments were effective in preventing these cycles of coercion from happening.
One such successful preventive measure is the ‘Through the Looking Glass’ program. The Through the Looking Glass program is considered effective, especially among the participating families. So much so, that it was used post-intervention. Though the Looking Glass (Colmer, Rutherford, & Pam, 2011) asserts that with infants and toddlers, the caregiver takes care of the routine needs. These include diaper changing, sleep, and meals. They also play and communicate and are accessible during times of strong emotions. The child then stays in close proximity and explores when returned to the primary caregiver. With older children, proximity is not as important as understanding that the primary caregiver is available to them emotionally. For older children, the significance of their primary caregiver lies in the educator's role in helping children to manage their feelings (Colmer, Rutherford, and Pam, 2011).

Implications can be made that improve parental relationships with practice. It is obvious from the studies that parents and children were helped by the community-based program and the program was as effective as professional programs in remedying parent-child attachment troubles. According to Bowlby, children should have a sense of security and contentment when in the presence of their caregiver and if threatened, should seek closeness to their caregiver as a safe haven (Bretherton, 1992). Although the purpose for attachment is the same for all children, the methods for seeking proximity are governed by caregiving practices. These differences in attachment are assumed and influence the reactions to social events through their lifetime.

Another attachment interventionist model is discussed as Elaine Scharfe’s (2011) article “Benefits of Mother Goose: Influence of a community-based program on parent-child attachment relationships in typical families”, concentrates on a prevalent community-based parent-child program. The project assessed a non-clinical sample of families. The participants took part in a 10-week Parent-Child Mother Goose Program broken down into two groups; program families
and waitlist families. The waitlist families completed questionnaires assessing their parenting efficacy, satisfaction and also their perception of their child’s, as well as their own, attachment styles at the program’s inception, end and six month after the program’s completion.

Mothers in the program group stated that there was a more positive change in their parenting efficacy and an increased change in their child’s attachment. The children in the program group were likely to be categorized as more secure than the waitlist children as time passed. In this program, parents acquired skills that furthered their relationship six months after the program’s end.

It is estimated that 50 to 60% of children develop secure attachments with their parents. This study focused primarily on typical two parent families as opposed to high-risk families that are in need of intervention. Substantial evidence points to the fact that secure children are more socially competent, have fewer emotional and behavioral problems, are healthier and score better on tests, than insecure children. The researchers also established the correlation between a positive secure attachment and adult functioning.

Even though it is approximated that 50% to 60% of children from typical two parent families have secure attachments with their caregivers, intervention research has mostly focused on high-risk families with numerous problems. Scharfe (2011) found that women who were not classified as being at risk for mood disorders after giving birth and at-risk women stated that they favored community-based as opposed to professionally facilitated interventions. This study focused on the effect that the community-based program had on parenting efficacy, satisfaction and child attachment in a typical family. Although the purpose for attachment is the same for all children, the methods for seeking proximity are governed by caregiving practices. These
differences in attachment are assumed and influence the reactions to social events through their lifetime.

A significant amount of studies show that mother-infant classifications have a medium to high level of stability when the caregiving encounters are secure. Additionally, several studies looked at the impact of the variables associated with attachment and the changes that are caused by life events. Although there are numerous studies examining parent-child attachment stability, more research is necessary in the realm of interventions to influence attachments, especially for typical non-clinical families.

The question is posed; which interventions are most effective, professional or community-based? The benefits of the use of community-based interventions are fairly new and their effectiveness addressing attachment is still untested. Parents may be hesitant to seek professional help, but there are community agencies that may provide support. The inexpensiveness and popularity of these programs were the basis of this study. The outcomes of the findings support the prospects that mothers who completed the program related higher levels of parenting efficacy and felt that their children were more secure than the mothers on the waitlist. Although there were improvements over the course of the 10-week program, the results obviously helped the participants learn skills that continued to have an effect on their relationships with their children six months after the end of the program (Miller, 2015).

Implications can be made that the results of this study can improve parental relationships with practice. It is obvious from the results that parents and children were helped by the community-based program and the program was as effective as professional programs in remedying parent-child attachment troubles. This program was also a more cost effective way to intervene with parents who were not at risk but their children could nevertheless take advantage
of enhanced parenting skills. Moreover, if persons are having difficulties with parenting, it’s more likely that secure individuals would seek support, be more accepting that they need help, and be more appreciative of the support given.

Insecure parents would have trouble asking for help and think certain kinds of assistance as offensive. Particularly, avoidant people might feel as if they are being singled out if professionals emphasize a specific approach for their children. The appeal of the community-based programs, especially among avoidant persons, might be because they are designed to concentrate on practical skills of good parenting. The parents don’t feel as if they are being judged as they learn new types of ways to interact, play and soothe their child. The cost effectiveness of the programs is a way to inexpensively keep parents of high-risk families, while working to increase their self-assurance with parenting.

Researchers once believed that the adolescent period was too late to introduce interventions to help parent-child conflict. However, in recent year this thought process has changed significantly. Researchers now understand that even in the adolescent stages, interventions can teach healthy youth development (Toumbourou & Gregg, 2001). The research focused on helping sole-parent households avoid or remedy parent-child conflict due to lack in communication or breakdown of the family on time pressures associated with the sole-play working and other demands on the family. Toumborou reports teaching conflict resolution skills during this stage are very healthy to future youth development. Intervention designed is focused on ecological and systems theories directed at youth ages ten to 24. Also, family interventions strategies have been extremely helpful in reducing parent-child conflict as well as restoring or building secure parent attachment; huge focus is placed on parent education. In 2000, an 8-week parent intervention group was conducted, within a few weeks it was reported the parent felt less
depressed, more satisfied with parental roles, and assertive parenting behaviors increased making family cohesion more successful.

**Difficulties**

Kindsvatter and Desmond (2013) research suggests that parent-child conflict issues are a result of insecure attachment. These issues can be attributed to internal disturbance or deficit central to the intrapersonal functioning of the child. The conflict occurs when unmet parent-child attachment is not addressed properly. For example, the parent or child may experience unmet attachment issues such as being shown affection, love, or care. This can be directly related to insecure attachment for the child and the same is true for the parent’s family of origin. The parent may also have been incapable of providing the child with secure attachment because of their internal or attachment issues.

The research further suggests that parent attachment issues as adult may be unresolved as well as go unnoticed. Counseling is highly recommend to help the parent come to a better understanding of why the child is unattached or existing behavioral issues with them or outside of the family. For example, children with unmet attachment needs suffer from emotional deregulation, defiant disorder, as well as low self-esteem. The parent may also be faced with parental insecurities from their children which therapy/counseling will be effective in addressing to help both the parent-child resolve their conflicts and come to a more meaningful attachment bond between the two of them. It is important to note the research reaffirms that a secure base as it relates to attachment is described as the parent’s willingness and ability to respond in a calm, attentive, consistent, and supportive manner to children’s and adolescent’s expression of needs, fears, frustration, anger, and distress (Kindsvatter & Desmond, 2013).
It is can be fairly assumable that organizational communication is interrelated to healthy parental attachment. Culture plays a major part in how a parent responds to a child. In comparison, a child takes those responses learned from the parent in their culture and it is communicated in other settings; particularly throughout their adult life span. The culture in which parent-child is associates also sets established espoused values that is extensively discussed in author Katherine Miller’s research (Miller, 2012). “Value represent preferences or what ‘ought’ to happen” (Miller, 2012, p. 91). Even if these values are not healthy, they are still communicated and shared among group experiences. For example, an individual with a value for hard work will probably work long hours at the office. A manager who values innovativeness will reward workers who come up with fresh ideas. The level of culture represents a mosaic of beliefs about how things should get done in an organization (Miller, 2012). This model of culture lends itself to further understanding of how difficulties present among the parent-child attachment. Schein’s model of culture is defined as a pattern of shared basic assumptions that the group learned as it solved its problems of external adaptation and internal integration, that has worked well enough to be considered, valid, and therefore, to be taught to new members as the correct way to perceive, think, and feel in relation to those problems (Miller, 2012).

**Fathers and Daughters**

Another impactful relationship on parent-child attachment style is the interpersonal relationship between fathers and daughters. Past research has failed to adequately report the significance this relating has to human development (Punyanunt-Carter, 2007). Furthermore, family research has ignored the interactions between father-child. The purpose of Punyanunt-Carter’s (2007) work was to study the attachment style on communication motives between
father-child. What was revealed that father’s roles are increasingly significant and equally important as any other parent-child relationship (i.e. mother-child). Positive father-child relationships especially to their daughters produced that daughters were more confidence (competent), as well as an immediate impact on their social and cognitive skills. Generally, fathers communicate less than mothers but they’re relating is due to the motives in comparison to the message, which translates more clearly to lasting outcomes. In closing, fathers’ roles are needed and play a significant part in a child’s development, specifically that of daughters. The work further examines how the attachment styles affect this relationship.

In 2015, a study assessed 295 children between the ages of 31 to 70 months all from father-resident homes, with 52% being girls. The findings reported that direct father contact with leisure activities help child develop positive social competence. Also, with boys it reduced externalizing problems and factors (i.e. behavior). (Torres, Verissimo, Monteiro, Riberio, & Santos, 2015).

It is very significant to emphasize that research between father-child attachment is limited. According to research conducted by Narissra Maria Punyanunt-Carter (2007), more weight has been placed on researching mother and daughter attachment verses father and daughter attachment. Therefore, there is very little information to available at this time. One would hope to see more research on the subject of father and daughter attachment in the future.

Impact of Attachment over Life Span

This section will primarily discuss findings from McCormack’s (2013) readings relating to later attachment styles formed as a result of insecure parental attachment. As referenced in the research, secure attachment is a healthy positive early bond between parent-child during infancy in which individuals are low on both anxiety and avoidance. In other words, they are comfortable
with intimacy and seek close ties with others. Several factors influence the attachment ranging from socioeconomic, culture, cognitive abilities, attachment style, awareness, anxiety, support, affection, mental health, as well as interpersonal communication. It is important to understand and realize types of adult attachment as it relates to parent-child in order to build a working knowledge of the concept.

In contrast, there are other attachment styles that contrast with secure attachment. Preoccupied attachment adults are high in anxiety and low in avoidance; they do desire closeness but are frequently plagued with fear of rejection (McCornack, 2013). These individuals may use sexual contact to mask intimacy in order to satisfy their desire for genuine closeness and need to feel loved. From a relationship standpoint, they long to feel loved can drive relationship partners away, these individuals resemble insecurities, and chronically worry they are unloved which contributes to their inability to maintain long-term involvements.

Fearful attachment is both high in attachment anxiety and avoidance. The adult child with attachment issues fears rejection and do not form relationships. They prefer to avoid the pain they believe is inevitable during intimate relating. If the person believes the relationship can guarantee a lack of rejection such as caring for a disabled person or dependent individual, they are more likely to form a close tie. However, they chronically suffer from lack of faith in themselves, their partners, and the relationship itself (McCornack, 2013). Lastly, dismissive attachment views close relationships as unimportant, instead it “prizes” and “prioritizes” self-reliance. The adult child are most likely than other attachment styles to casual sexual relationships and believe that sex without love is a positive way of relating to others (McCornack, 2013).
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Centered around these later (adult) attachment styles as an extension of secure attachment are two important concepts: attachment avoidance and attachment anxiety. Attachment avoidance is the degree to which someone desires close interpersonal ties but has little interest in intimacy. Often, they prefer solitude instead, “quiet space or time”. Attachment anxiety is the degree to which a person fears rejection by relationship partners. If you experience high anxiety, your perceive yourself as unlovable and unworthy – thoughts that may result from being ignored or even abused during youth. In close relationships, you experience chronic fear of abandonment. If you are the low spectrum or end of attachment anxiety, you feel lovable and worthy of attention; these are reflections of a supportive and affectionate upbringing. Resulting in feeling comfortable and confident in your intimate involvements (McCornack, 2013).

Fraser (2007) gives evidence that leadership styles are related to attachment, specifically how they view self, others, and relate. Research suggests that the four types of attachment styles: secure, insecure, ambivalent, and disorganized can be found in leadership styles/chain within organizations today. Also, the research presents evidence that bosses “parent” leaders based upon their attachment styles which presents different outcomes and characteristics.

Researchers have discovered that even though a child may exhibit insecure attachment patterns, there is hope for change as adults or later adolescents. Theorists believe over time, an individual can “earn” a secure attachment style often called “earned security”. Earned security occurs when a person recognizes the impairments of their past through self-reflection, which may include therapy, and supportive relationships. These factors influence this process and it does not have to remain fixed. Like negative influences impair an individual, positive influences can restore and heal old wounds, nurturing the insecure attachment pattern (person)
back to good health. This process requires one to retrace their past, become self-aware, and reflect upon it.

Leadership theorists are now exploring how attachment style impacts the interpersonal and internal workings of a leader. Researchers in this field are interested to learn more about how a leader resolves conflicts, relates to others, and strategizes based on their attachment style (Bresnaham, 2007). It is believed that understanding the relational theories of attachment would give more insight and support into addressing leader-follower dynamics. For example, current attachment theory research looks at adult functioning in such areas as: trust, conflict resolution, and how the individual views others in the world – all vital tools in an attempt to understand what makes an authentic leader (Bresnaham, 2007). As individuals evolve in their personal and professional lives, they are constantly learning how to adapt their attachment style to the world around them. More research into this topic could provide leaders with a better internal working of themselves and the needed information to become stronger leaders based on understanding their attachment style/behaviors/patterns.

Researchers of leadership-attachment theory now understand that they are different types of leaders based on their early attachment styles. Some leaders are intellectual, understanding, practical intelligence, wisdom, etc. These different traits and relating abilities, give the leader their interpersonal orientation that is flexible, willingness to learn, and an ability to deal with making difficult decisions. Attachment theory provides the sounding board for an individual’s interpersonal, cognitive, and emotional capacities to meet adult and life challenges.

Understanding leadership as it relates to attachment theory will help researchers better understand the leader-follow complexities and perhaps reduce them as well. There is so much to know about how a person forms opinions, relates to others, and creates solutions – being privy to
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this information from a research perspective gives way to a big picture view of leadership and attachment from a relational perspective.

Analysis

Establishing healthy parental attachment, whether through proper parenting skills or interventions, is necessary in creating good relationships. Bowlby’s Attachment Theory is the root from which most studies and research derive (Bretherton, 1992). Prevention and interventions, whether through professional or community-based programs, are tools to help correct behavioral issues and get attachments back on track. Other factors, such as, family dynamics, mental health, education, financial status, parenting skills and environment can contribute to improper attachment. These issues are just a few of the things that can cause problems in relationship development.

Creating healthy parental attachment can be beneficial to building relationships as a child grows into adulthood. What a child learns through healthy parental attachment can be useful to them as they develop relationships in their adult life. Without healthy parental attachments, many suffer from low academic performance, anti-social behaviors, harmful self-identity issues and actions, and lack proper closeness with parent(s).

Many mothers like myself, have experienced some or all of these issues stated above. As a mother having to experience unemployment, divorce, single-parenting, and dealing with a high-risk pregnancy, not really knowing if both of us (parent and child) would make it through the pregnancy in good health; the odds were stacked against both the child and me. My unborn child was having heart issues; it was detected by Vanderbilt University Healthcare in the first trimester and continued throughout the whole pregnancy. Vanderbilt offered helpful advice to ensure that most of the stress that my child and I were experiencing would be manageable.
Having to cope with a high-risk pregnancy, with no consistent forms of support family (attachment) could have caused a greater risk for a mood disorder such as depression. Recognizing that it is never a bad idea to seek professional or personal help in matters that are important to you, and asking for help in a time when one’s morale is low, is usually good and allows others to help you to come to a greater resolve.

After my child was born, an awful sickness set in my body that further made attachment difficult to accomplish. This made everyday tasks such as cooking, cleaning, and caring for my other children, almost impossible to manage. Also dealing with a child with a heart condition was very unsettling. Vanderbilt again made every effort to ensure that the child would get the best care possible and she so desperately needed it. A nurse visited twice a week to monitor the child’s needs. Also, the parent home health care would visit twice a week to ensure that the parent was healing properly. Vanderbilt provided a health care counselor to help cope with the counseling aspects and the needs of parent and child relationships, which improved attachment during this endeavor. More family support was activated immediately and provided another form of help that was good to have if needed. This reminded me of the practice of mindfulness in the reading because it points to bends in the road. “A low road is acting without self-awareness and a high road is choosing to handle issues using a moral compass or self-awareness, and acting on them” (McCornack, 2013).

Reviewing other important works to the research listed, the gift of active listening is one of the greatest presents you can give your children. Active listening creates interpersonal opportunities (McCornack, 2013). What is the foundation of secure attachment? It is relating well to the children. Therefore, a parent must devote a significant amount of time to listening well to the children in order to understand their needs, wants, and desires. If the parent refuses
or chooses not to listen to the child, the relationship can be weakened. I admit, addressing to the needs of a child presents issues especially when the parent-child bond has been broken or damaged due to past failed communication or other circumstances (trauma, health challenges). This can also happen due to former disagreements, poor communication, or lack of communication. Attempting to communicate well (active listening) after past broken communication is more difficult, but obviously not impossible if the parent follows certain protocols such as using the gift of active listening. Active listening is different from narcissistic listening, selective listening, or aggressive listening because it requires the parent to truly hear to what is being said by the child. The listener (caregiver or parent) removes distractions and truly focuses on the child’s “inner” voice so to speak in order to gain a better footing into their world and needs. Needless to say, this is not an easy job. Active listening requires an active mind because it requires dedication to mastery of knowledge, hard work in practicing skills, and the motivation to continually improve (McCornack, 2013). The true beauty and enrichment of listening well especially in a parent-child relationship which can strengthen the attachment bond making it a healthy one is “when we actively listen, the words and worlds of others wash over us, providing us with rich and unanticipated opportunities to move beyond the constraints of our thoughts and beliefs and to forge interpersonal connections with others” (McCornack, 2013, p. 171).

Strategies for listening well in a parent-child relationship to increase healthy parental attachment include concentrating on important aspects of encounters and controlling factors that impede your attention (remove distractions); communicating your understanding to others in a polite, obvious, appropriate, clear, and quick manner; improving your recall abilities by using mnemonics or linking new information to senses, visuals, or features; developing an awareness
of primary listening functions in various situations; and practicing shifting listening styles quickly, depending on the demands of the encounter (McCornack, 2013).

Finally, I have found after parenting four children, I did not always listen well to them. It was not that I did not want to listen, but I allowed outside distractions to occupy my attention. For example, doing chores or tasks when trying to listen to the child. I have discovered through the research that healthy parent-child attachments are built by constant positive interactions as well as interpersonal communication. As humans, we assume interpersonal communication involves talking, but it also involves listening. As a caregiver, we must learn to listen well in order to meet the challenges of parenting as well as to help the child be successful. Listening may sound like an easy task, but it is incredibly hard when the caregiver is juggling multiple responsibilities, which could include attending school, working part-time or full-time, or caring for the house independently or codependent with another adult/parent.

I have discovered through observation of many parent-child interactions – some with my own children, family, and friends – that healthy parent-child attachments are sustained through strong interpersonal communication. Although, I am not an expert at this subject, after studying the research, I can affirmatively state I understand the theories and supporting research more clearly now and find that it has heightened my awareness in understanding how attachment styles and bonds are established and nurtured, as well as lends itself to leadership and organizational communication and development. The research in many ways has motivated me to become a better parent in order to ensure my children, especially by youngest child who is only five, receives a healthy secure parent-child attachment bond with me despite underlying difficulties. In a nutshell, there is always a way to make things work more effectively with interventions or mindfulness.
I never understood the larger reasons why research is so important until writing this paper. Research provides a historical background and guides clearer thoughts and understanding in order to grow one’s self, knowledge base, and ultimately impact shared experiences with others. I am grateful for the opportunity to research this topic and find relevance to my own parenting missteps as well as learn new strategies to improve the parent-child relationship as it relates to attachment and interpersonal communication. As a result, I am more confident in my abilities to relate well to my own children through the research and inform others how they may communicate in a healthier and personal way to increase the parental attachment bond.

Recommendations

Researchers should continue to make an ongoing concerted effort in understanding father and child attachment theory to enable a better rapport between father, mother, and child attachment as a whole. Father and child attachments are equally important to the development of mother and child attachments. However, the research conducted herein did not find enough adequate sources to support this topic. Additionally, researchers should consider the relationships within two-parent families in comparison to sole-parent families as it relates to attachment. Studies may establish more assessment-based evidence that provides information that single-mother families can produce equal competence among children and normalize them into society without issues. This may be especially true if the father-non resident is actively involved in their lives. Researchers should also introduce more parental education programs for adolescents to “catch up” on attachment issues that may have occurred in early infancy. Increasing evidence during recent years, suggests that is not too late to help adolescents avoid relational, behavioral, and mental health issues through effective parental advocacy programs.
Researchers should devote more time to assessing and understanding leadership and attachment styles/patterns. From the research herein, this is a growing area among leadership theorists. Expanding on current findings is greatly needed and would be beneficial to the leadership community. It is believed that attachment styles give a deeper understanding to how leaders relate, form relationships, foster growth among others, and solve problems. If researchers are able to relate these areas more closely to attachment, it provides a broader picture of attachment to leadership and gives researchers the cutting edge information to develop and sustain successful leadership models. I believe leadership training events as they relate to attachment would be a great opportunity for Fortune 500 companies and similar organizations to create in order to properly assess, train, and help them evolve as organizational leaders and communicators. So often people are unaware of their true character/behavior traits, and as a result they may make poor decision as leaders, throughout their life. If we are to improve leaders, this research would be vital the leadership research community as well as to the leader.

Furthermore, more advocacy skills research should be conducted to empower parents and future parents to seek assistance in identifying the adverse impact of non-healthy parental attachments. As a result, this will allow others to gain insight during difficult times in parenting in order to get the proper help that is needed when things become hard to navigate. One should never believe at your lowest point in life that you cannot bounce back from a situation in order to get back on track to parenting well. I am a firm believer in this concept and have experienced it on a personal note in my life cycle journey as a child, a parent, and an adult. Parental education programs and early interventions before a child is born, should be addressed in more exponential ways to advance the field, but more importantly to educate parents.
Personally, in the 21st century, we are experiencing more and more younger generation parents. Many are poorly equipped to handle the multiple challenges of being a parent ranging for covering expenses, working, and teaching their children the right responsibilities for growing into healthy adults, which the research herein has discussed deals heavily with emotional and relational support. The source of parental education, advocacy programs, as well as intervention initiatives would provide much needed support to this population of new-age parents. The research community should continue to develop new ways to reach younger parents and encourage them to learn more about attachment styles and better equip them to care for their young children. I am saddened that without adequate information, people (parents) form unhealthy behavioral traits which affect the innocent lives of their children. In many ways, it is unknown to them the effects such as lower self-worth, relational issues, and aggression will have on their lives now and into the immediate future. Researchers have a duty to provide these services to parent(s) in order to ensure future generations have a greater chance to be successful in life. The statistics of juveniles in the justice system are staggering along with other hardening facts about today’s youth. Based on the research presented, one could reasonably conclude that these things can be associated with attachment style to their primary caregiver or mother.

Conclusion

The research collected analyzed what healthy parental attachment resembles. This paper takes a deeper evaluation into the parental attachments and relationships as they relate to negativity and indifference in order to understand the effects it plays on a child, parent, adult, and caregiver roles. Further, this paper points out the foundational steps for establishing healthy parenting attachments in order to build a good working model of secure attachment versus insecure attachment theories to further educate the reader.
In conclusion, I attest to how attachment can affect the parent and child relationship through my own personal struggles in this area. This paper has helped me to better understand the methods that were in place were to enable success in a healthy relationship with not only a parent and child, but for all parties involved. I have a great respect for those that are in the field, and the expertise in the mission of finding ways to build successful families. Also, writing this paper I am more aware of how researchers and psychologists, through communication, work hand and hand. When I was raising my younger siblings, I never knew how big of a part attachment played in the development in adolescents and adults. Attending college has opened up a new way of thinking and how to interact with others as it relates to parenting attachment.

This paper has caused deeper reflection on how the information relates to interpersonal communication skills. As a parent, I realize the important role communication plays between caregiver and child. Children learn through role-playing, interactions, and their daily environment how to relate, feel, and share life. If the caregiver sets a positive example and gives a “secure” interaction by communicating well (ongoing and positive), the child is likely to grow in a more positive way in comparison to a child who is not given adequate attention (communication). I am much more aware of the impact interpersonal communication has on a child based on the findings within this research. For example, listening to your child is as equally important as the caregiver talking with the child. I believe many caregivers do not truly listen to what is being said by the child. As a result, the child may feel he or she is being ignored, and the perception is given that their voice does not matter. This could translate into insecure attachment and lead to insecure attachment issues.

Children generally respond well to ongoing consistent positive communication that reinforces their growth and development and reaffirms them as a productive individual to
society. This has been my personal experience as a parent, as well as observing the research findings. Both parents, mother and father, play a vital role in their child’s life, equally responsible for ensuring the child grows up in a positive healthy environment. Of course, this does not always happen and as a result problems arise that cause the child or adult child to feel inadequate, insecure, emotionally unstable, mentally disordered, and other sorts of problems. What is amazing is the research is consistent with attachment theory being primarily based on the mother-child relationship. When the mother or primary caregiver does not bond securely with the child, it is almost guaranteed later emotional, mental, and behavior issues will present. These issues may not be easily resolved and therapy/counseling must be utilized in order to bring normalcy back to the child or adult child. I agree with the presented research and have personal experience relating to it. I do not believe it is any parent’s intention to “mislead” their children in the wrong direction. Honestly, many parents are inexperienced and finding “themselves” while raising their children. This is not justification for insecure attachment, but provides insight into what happens in families of origin as it relates to healthy parental attachment.

Bowlby’s Attachment Theory is very important to understand from a parental perspective and as an organization communication practitioner. One must be able to link the early traces to a person’s starting point (childhood) in order to understand why behavior present, emerge, or continue. In order to correct the behavior, one must first understand the root cause(s) in order to implement effective interventions to remedy the situation.

The research has given me a wealth of understanding on how to establish healthy parental attachment and how to avoid future issues. Although, the information presented is concise and organized, it is not an exhaustive work. Further, the research gives the reader a great starting point for understanding why attachment style is important to the way one relates, believes, and
achieves. The paper examines different constructs to add more value and deeper understanding. The reader walks away with measurable information that is historical and contemporary. A long history of evidence and effective strategies is presented to inform the reader that if secure attachment is not realized, it is not a total lost for parent-child or the adult child; there are ways to resolve presenting issues. Also, the paper represents a complete work of understanding parental attachment from many lenses in terms of culture and organizational communication. This information is extremely valuable because in a workplace or academic (school) setting, one can realize that people relate differently because of their upbringing and may find ways to relate better with effort and support. Too often, we do not consider the source or find effective ways as business leaders and communication organizational practitioners to resolve behavior or communication issues. Understanding social, child, and behavioral psychology allows us to better understand each other and find strategies for working together as a cohesive group.

In conclusion, the research supports the purpose statement that if healthy attachment is not formed in infancy or the early childhood years, the “adult child” will not form healthy relationships later in life. Evidence has been presented to support this statement. It is essential that a secure parent attachment be established and continues through the child’s life into adulthood to remove emotional or mental distress. It is understood that parental attachment patterns are learned behaviors from the parent’s own upbringing and personal experiences, however it is not an excuse to leave the child feeling unloved and unsecure. This is vitally important because when a child feels insecure attachment to their parental base, he or she will continue to struggle in their own personal and professional relationships because of “attachment insecurity.”
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