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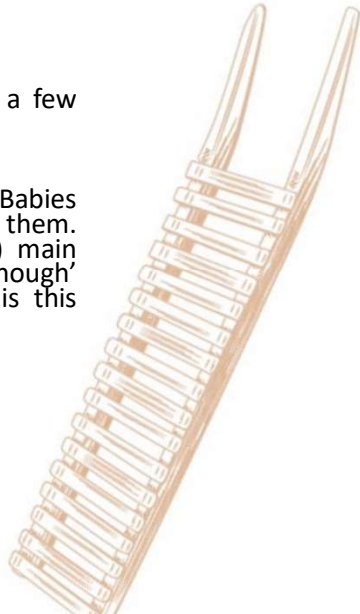
Introduction

Why talking about attachment?

Ainsworth & al., 1978 ; Bowlby, 1982

- Most of us can remember a special link with someone (or with a few people!) from our childhood.
- In fact, relationships are important for us humans living in society. Babies could not survive by themselves. They need for someone to care for them. They are active* in reaching out to whom they perceive as (a) main caregiver(s) to fill their needs. Main caregivers, when in a 'good enough' situation, perceive these needs and answer them. **Attachment** is this bond created between a baby and main care giver.
 - It is this « **emotional glue** » between them
 - It is this special enduring emotional relationship with a special person
 - It brings security and safety within the context of the relationship

*at first by crying


 A stylized illustration of a wooden comb, shown from a side-on perspective, with its teeth pointing upwards. It is rendered in a light brown or tan color.

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Introduction

Why talking about attachment?

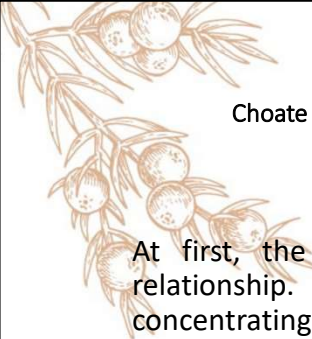
Ainsworth & al., 1978 ; Bowlby, 1982

- So, from birth on, we are building our relationships with others.
- The quality of the early experiences of relationship will influence the quality of the relationships one develops through life, although there are other future relationships that can also have their influence.
- This quality of our early relationships also has a huge impact on how satisfied and happy we are in our lives.
 - It involves familiarity, comfort, soothing and pleasure.
- It affects our capacity to trust when we grow up and to build meaningful relationships.

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Attachment

Choate & al., 2019; Carriere, J., & Richardson, 2009; Root, 2018.



At first, the research on attachment was about the mother-baby relationship. And overall, in the western perspective, we are often concentrating on this specific attachment created with 1 special person.

We will see later that the notion of attachment is now being considered in a broader sense to include the influence of other relationships.

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Attachment

How does it look exactly?

Ainsworth & al., 1978; Bowlby J., 1982.

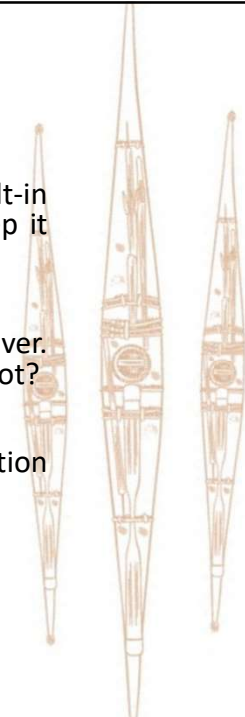
- From birth to 3 years of age, children experience themselves and the world around them based on the interaction they have with their primary caregivers.
 - If you have had mostly good experiences with people during this developmental period, you will perceive others as mostly good —your relations will be mostly positive, you will be able to trust people (you developed a feeling of safety because your needs were taken care of, you could trust things would be ok).
 - However, if your main caregivers frightened you, neglected you, or harmed you in some ways, your relations will tend to be less positive. You might be much more likely to be suspicious, frightened of intimacy, sensitive to rejection, or defensive when it comes to getting close to someone.
- Caregivers do not need to be perfect, but they need to be good enough.
- **With a good attachment: we feel safe exploring**
- **With bad attachment: we do not feel safe exploring**

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Attachment Phases

Bowlby, 1982

- 0-2 months: Indiscriminating social responsiveness. Built-in responses (or signals) designed to draw caregiver near and keep it near (e.g. crying) to answer needs (food, etc.).
- 2-6 months: Developing attachment with primary caregiver. Developing cognitive representation: is the caregiver reliable or not?
- 6 months – 2yrs : Experiment and expending to others. Separation protest.
- 2 yrs +: repeating attachment patterns in all relationships.



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Attachment Types

Ainsworth & al., 1978 Bowlby, 1982

Depending on our specific early experiences, we fall into one of these categories of attachment:

- Secure
- Anxious ambivalent
- Anxious avoiding
- Anxious disorganized

Don't worry, it is not static!

It is possible when we grow up to 'repair' our attachment and to trust again. It is not easy, it takes time and a trustful person.

We will see this later.

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<p style="text-align: center;">Secure</p> <p>Parents</p> <ul style="list-style-type: none"> • Safe, well balanced, emotional connection between caregiver and child; • Caregiver is attuned and responsive to the child's needs. <p>Child</p> <ul style="list-style-type: none"> • Responds to the caregiver with affection; • Accepts guidance from adult; • Feels safe to explore; • Believes that their needs will be met; • Later, it is easy to make friends. 	<p style="text-align: center;">Anxious Avoidant</p> <p>Parents</p> <ul style="list-style-type: none"> • Parents give little attention to the child or are overly strict; • Distant and disengaged. <p>Child</p> <ul style="list-style-type: none"> • Child responds by avoiding contact; • Not very explorative ; • Believes that parents probably will not meet needs.
<p style="text-align: center;">Anxious ambivalent</p> <p>Parents</p> <ul style="list-style-type: none"> • Sometimes give attention, sometimes does not; • Inconsistency . <p>Child</p> <ul style="list-style-type: none"> • Child becomes hyper demanding to ensure parents' attention; 	<p style="text-align: center;">Anxious Disorganised</p> <p>Parents</p> <ul style="list-style-type: none"> • Are erratic • Can be negligent and/or violent • Don't comfort the child • Passive or intrusive <p>Child</p> <ul style="list-style-type: none"> • Could be avoidant or ambivalent, but with elements of fear

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Attachment	
What happens when they are teenagers / adults?	
Ainsworth & al., 1978 ; Bowlby J., 1982; Erikson & al., 1985	
Secure <ul style="list-style-type: none"> • They easily engage in relationship; • Trusting adult (i.e. 'they become adults able to trust others'); • Positive self-image; • Flexible behaviour. <p>"it is ok, you are there for me".</p>	Anxious avoidant <ul style="list-style-type: none"> • Difficult to be in relationships; • Avoids relationships; • Rigid boundaries and beliefs; • Detached and cold; • Negative self-image. <p>"it is not ok to be emotional".</p>
Anxious ambivalent <ul style="list-style-type: none"> • Unpredictable and moody; • Can be intense in they want to be in a relationship; • Difficulty to believe they can be loved; • Seek constant validation; • Impulsive; • Self-image is not positive. <p>"I want comfort but it does not seems to help me ".</p>	Anxious disorganised <ul style="list-style-type: none"> • Feel unworthy of love; • They want interpersonal contact but they also expect to be hurt; • Pessimistic; • Tendency to destroy their relationships; • Self-image is very negative. <p>"I am frightened".</p>

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Attachment	
Normal Vs not normal	
Some youth's behaviors may look like an attachment disorder but are not! Be careful not mixing up an attachment disorder with a "normal" youth behaviour.	
Normal behavior	Behavior that could indicate an attachment disorder
Testing the adults and institutional limits: <ul style="list-style-type: none"> • Not following/testing the rules; • Trying forbidden things (smoking pot). 	<ul style="list-style-type: none"> • Not being able to trust adults (caregivers or professionals); • Fear of being abandoned.
Mood swings up to a certain level: <ul style="list-style-type: none"> • Adolescence can be a difficult period, youth are building their identity and are going through many emotions (first break-up, disillusion, etc.). 	<ul style="list-style-type: none"> • Depression, high level of anxiety, continual sadness, feeling of incompetency, feeling of being a burden.
<ul style="list-style-type: none"> • Running away can be a search for autonomy too! We have to validate why they did it. 	<ul style="list-style-type: none"> • Engaging in high risk behaviours over a long term period: prostitution, daily alcohol consumption, repeatedly running away.

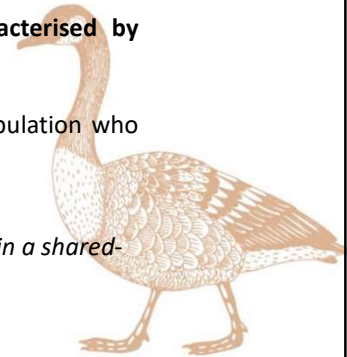
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Thinking attachment outside a dyadic relationship

Benzies, 2014; Carriere, J., & Richardson, C., 2009.; Root, 2018

- Research on attachment has gone from concentrating on early life relationship with one caregiver to expanding to look at:
 - The influence of other significant relationships on attachment patterns;
 - The evolution of it during one's life.
- **Attachment may be 'experienced' differently according to one's culture : collective vs individual society.**
 - **In many cultures (or societies), the education of children is characterised by collectivist practices: shared-parenting.**
- A strict application of the traditional attachment theory can stigmatize population who are already stigmatized.
 - By not recognizing the different forms of parenting and their value.

"The primacy of a purely dyadic mother-infant relationship does not exist in a shared-parenting model" (Benzies, 2014, p. 383).



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Who can be important in the life of an inuk
baby / child / youth?

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Important concepts when thinking about attachment in a non-dyadic relationship

(Pauktuutit Inuit Women of Canada, 2006).

- **Traditional adoption**
 - Enlarged notion of parenting.
- **Sauniq**
 - A spiritual bound with someone;
 - The child carries the kinship links of their sauniq and the bonds created through this naming system is meaningful.
- **Ilagiit**
 - Being part of a family that goes beyond father, mother and children, and that includes the extended family.
- **The community**
 - Being involved in something bigger than us: being a part of the community;
 - Importance of traditions, history and resilience.
- **Kinship**
 - Bonds that are established at birth and by sharing the name of someone;
 - Traditionally, these bonds ensured that virtually all people in the camp were related to each other in some way. Combined with an intricate system of reciprocal obligations and responsibilities, the community was tightly knit and interdependent. *"These relations were part of Inuit identity and it brought with it the responsibilities towards the community"* (Pauktuutit Inuit Women of Canada, 2006).

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Have you observed those concepts in your practice?

Can you see how you could integrate those concepts to your interventions?

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What could be the impacts of colonization on attachment?

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Colonization and Cultural sensitivity

(Lafrance, J. & Collins, D., 2003; Root, 2018)

Impacts of colonization on parenting

A clear relationship between colonization (rapid change in the configuration of communities, denial of identities, etc.) and the education of children.

- Fragilization of traditional models of parenting (and sometimes no recognition from institutions).
- Being parents while dealing with traumas and history of ruptures: The residential school system meant separating children and youth from their community and families and fragilized the transmission of parenting models. This has influenced more than one generation.



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The Ecocentric Self : Never alone

(Kirmayer & al., 2009)

- The Ecocentric Self is an indigenous conception of the individuals. It considers that the **community** and the **environment** are central in the development of the child and the adult.
- Research shows that being part of a community, something bigger, helps feeling useful, loved and **not alone**.

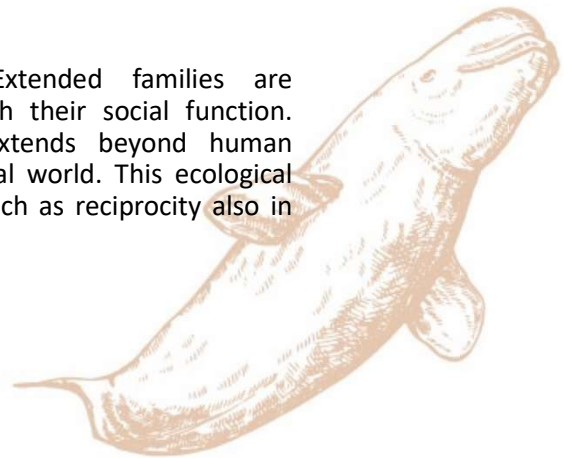
"The Inuit concept of the person has been called "ecocentric" in that it gives a central role to connections among individuals and to place in the health and well-being of the person (Stairs 1992; Stairs and Wenzel 1992). Inuit notions of the person view the individual as in constant transaction with the physical environment." (Kirmayer & al., 2009, p. 292)

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Environment and mental health

(Carriere, J., & Richardson, C., 2009; Kirmayer & al., 2009)

- Food and territory are tightly link to mental health and well-being (going on the land, going fishing, eating country food, community activities, etc.).
- Kinship as a **spider-web** of relations. Extended families are interconnected and provide a balance through their social function. Within this ecocentric worldview, kinship extends beyond human relationships to include kinship with the natural world. This ecological view of kinship categorizes social obligations such as reciprocity also in relationship with plants and animals.



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Tips to intervene with children, youth (and even adults!) who have attachment issues

Hossain, B., & Lamb, L., 2019; Root, 2018; Swanson, 2006

- **The good enough** relationship to heal.
 - Don't forget that **attachment can be "healed"** and is not only about parents
 - Can you think of other people in the entourage/community of the children/youth that are important on the long run?
 - Extended family member;
 - Teacher;
 - Hockey trainer;
 - Etc.

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- **Offer structure: Routine, consistency, guidance**
 - Explain what you do (e.g. why they have to go to their room, why this rule, etc.);
 - With young children, they need to know you will come back: If they have to go in their room to relax, tell them for how long and do come back;
 - Help them identify emotions. Very important when emotions are not adequately expressed (e.g. crying, screaming, etc.);
 - Don't make promises you are not sure to keep (e.g. I will be at work tomorrow).
- **Long term engagement: Be patient, it takes time to gain trust-**
 - Don't quit if they don't immediately respond to your interventions: With the high turnover of workers in Nunavik, it is not easy for youth (and adults!) to trust workers. Fear of being disappointed;
 - Don't insist but let them know you are present.

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- **Nurture physical and emotional wellness**
 - Show that you care about them and help them care about themselves;
 - Make compliments (that you believe);
 - Help them feel good and comfortable.
- **Recognize the parent's competency : it is not easy to take care of a child with attachment issues. Caregivers need support too.**
 - Ask them about their vision of parenting and childhood;
 - Ask them about what they want to transmit to their children;
 - Tell them about things they do well;
 - Encourage them.
- **Help the person connect with the community and feel supported (going to the family house, participating in feasts, etc.)**
 - A strong connection to the community is one of the best indicator of wellbeing;
 - It helps to increase the feeling of competency.

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