ATTACHMENT THEORY AND DISABILITY: HOW IS ATTACHMENT THEORY BEING UTILIZED IN TREATMENT PERTAINING TO PEOPLE WITH DISABILITIES?

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Presentation Outline

- Presentation Goals
- Definition of Treatment
- Overview of Attachment Styles
- Professional/People with Disabilities Relationships
- PWD and Family Relations
- PWDs and Caregivers
- PWD and Relationships
- PWD and Healthcare Treatment
- Disability, Attachment, and Pain
1.) Connect Attachment Theory with its role in conceptualization of relationships of people with disabilities with their caretakers, friends, and families.
2.) Connect Attachment Theory with its role in treatment pertaining to people with disabilities.
3.) Explore how Attachment Theory relates to attitudes and perceptions of people concerning people with disabilities.
Thoughts of Self

Low Avoidance

Positive

Secure
Comfortable with intimacy and autonomy

Preoccupied
Preoccupied with relationships

Negative

Dismissive
Dismissing of intimacy
Strongly independent

Fearful
Fearful of intimacy
Socially avoidant

Thoughts of Partner

Positive

Low Anxiety

Negative

High Anxiety

High Avoidance
CIRCLE OF SECURITY
PARENT ATTENDING TO THE CHILD’S NEEDS

I need you to...
- Watch over me
- Delight in me
- Help me
- Enjoy with me

Support My Exploration

Welcome My Coming To You

Always: be BIGGER, STRONGER, WISER, and KIND.
Whenever possible: follow my child’s need.
Whenever necessary: take charge.

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circlesofsecurity.org
Kate is a 31 year old Caucasian, bi-sexual female. She has multiple learning disabilities. Kate also has trouble remembering to do things at times (lock the house door when she leaves, close her car door or house door, put away food, bring her house key when she leaves the house). Kate talks with her parents of wanting to have a child with someone. When asked, Kate says that she is thinking about having a man get her pregnant and then raise the child with a woman (believing that the man would just be the sperm donor and nothing more to the child).
thinking about interrelationships—the relationships that bind…. What would your initial impression of Kate be as a counseling professional if she were your client? How would you approach her situation to help Kate help herself and in the process form a secure bond with Kate instead of making Kate feel fearful, insecure, or avoidant of receiving help with her current situation?
Tim is a 16 year old African American male. He has Type 1 diabetes. He was diagnosed when he was 10. His parents are very supportive and he has a very secure relationship with them. However, Tim acts out and has trouble in his classes. When he is speaking to the school counselor about his behavior, Tim tells the counselor, “I’m different from the other kids, they make fun of me because I have diabetes.”
Food for Thought

If you were Tim’s counselor, how would you approach his situation? Thinking about interrelationships, the relationships that bind… What are some approaches you could use to help Tim be more secure about forming relationships with his peers?
Research suggests that psychiatric caregivers and the psychiatric institutions may be viewed as attachment figures for people with psychiatric disabilities.

(Adshead, 1998)
Through utilization of attachment theory when listening to patients’ stories, psychiatric caregivers may provide a basis for helping to ameliorate patients’ anxieties and allow for a safe haven that patients with a psychiatric disability may utilize to help with the management of their disability.

(Adshead, 1998)
Parents who have intellectual disability

If taught and treated with respect by professionals - allows for better adapting to parenthood

Negative perception leads to reciprocal negative perception

Secure base of support from professionals lost or strained

(Joreskog & Starke, 2013; McConnell, Llewellyn, & Bye, 1997)
Negative preconceived conceptualization:

- affects how professionals treat PWD
- relates to attachment style between professional and PWD

(Joreskog & Starke, 2013)
Some people with Intellectual Disabilities are perceived to lack empathy

Thus relates to and could affect: child/parent bonding

(Joreskog & Starke, 2013)
There are organizations that provide support for PWD.

(i.e., Disability Issues Office, Families Helping Families).

(American Psychological Association, 2015; Families Helping Families, 2015)
Attachment styles of professional caregivers are associated with and affect:

- effective response to cues
- quality of life
Direct Service Caregivers should

- Assess their relationships with PWDs
- Try to determine better ways to interact

(Schuengel, Kef, Damen, & Worm, 2010)
Internal views of self are related to attachment and relationships with others (Johnson & Whiffen, 2006, p. 240).

Some people with disabilities

- more than people without disabilities experience negative self-image, depressive symptoms, and suicidal ideations.

(e.g., children and adolescence with spina bifida)

(Appleton et al, 1997)
The children’s perception of the support parents gave significantly related to:

- depressed mood
- global self worth

(Appleton et al, 1997)
Findings suggest interventions aim to:

- Promote child/parent communication
- Help children with disabilities to feel competent despite their disability
- Help the child address negative self-schema of body image.

(Appleton et al, 1997)
People with different types of disabilities (i.e., depression, schizophrenia, alcoholism) were perceived negatively by individuals according to a study done in the U.K.

(Crisp, Gelder, Rix, Meltzer, & Rowlands, 2000)
Research shows evidence linking genes (i.e., dopamine, scrutinin, oxytocin) to social behavior and disability (i.e., generalized anxiety disorder).

(Gillath, Shaver, Baek, & Chun, 2008)
Children with learning disabilities reported less secure attachments in close relationships and more anxiety and avoidance

Versus

Children who have normal development who reported more secure attachment in close relationships

(Al-Yagon & Mikulincer, 2004)
There have been cases of parents with disabilities having their rights of being parents taken away from them (i.e., Native American community).

(National Council on Disability, 2015)
Attachment style is related to reported symptoms of some PWD in healthcare.

Women with fearful and preoccupied attachment

- Reported higher somatic symptoms versus secure and dismissive patients
- Fearful and dismissive women had less utilization of healthcare

(Ciechanowski, Walker, Katon, & Russo, 2002)
Why did females with fearful and preoccupied attachment report higher somatic symptoms versus secure and dismissive patients?

The authors suggest it is related to self esteem due to earlier caregiving relationships.

(Ciechanowski, Walker, Katon, & Russo, 2002)
Human rights of people with mental disabilities are a global concern advocated for by The World Health Organization (WHO).

The stigma associated with mental disability breeds prejudice among healthcare professionals and the public.

(WHO, 2007)
How well people deal with perceived pain levels, in combination with levels of comfort about being close to another person…. 

- moderates the level of perceived disability.

(Meredith, Strong, & Feeny, 2006)
People who have an insecure attachment style have vulnerability to developing disability after experiencing acute pain.

(Meredith, Ownsworth, & Strong, 2008)
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Questions?
Reference List


