

What do couple relationships have to do with infant mental health and secure attachment?

SUMMARY

- Children who develop an insecure attachment to their parents or caregivers are more likely to have difficulty sustaining close personal relationships, suffer more from low self-esteem and are more likely to break down under stress;
- Parental (especially maternal) sensitivity and responsiveness towards infants is key to the development of secure attachment;
- Research suggests that poor parental relationship quality, and parental relationship conflict, is associated with the development of insecure attachment between infants and parents;
- Increased marital conflict seems to be particularly related to decreased attachment security between babies and their fathers;
- Children of insecure mothers who have low levels of relationship satisfaction are more likely to be insecurely attached;
- Incidence of disorganised attachment between parents and infants is greater in highly-conflicted parental relationships and particularly pronounced when parents are living apart.

What is attachment and why does it matter?

The founder of what has become known as attachment theory, the psychoanalyst and psychiatrist John Bowlby, proposed that infants develop certain expectations regarding the availability of others, and about their own self-worth, as a consequence of the kind and quality of care they receive from those who look after them.

These often unconscious expectations (or 'internal working models' as he called them) have a profound influence on social development (Sroufe, 1998). In essence, secure attachment develops when an infant builds up expectations of other people based on the repeated and reasonably consistent experience of their parents or caregivers responding sensitively to their needs.

Such experiences, and the security of attachment which results, establish good foundations for children's emotional, psychological and social development; the benefits of a secure attachment include greater social competence (NICHD Early Child Care Research Network, 2006), conscience development (Kochanska, 1997), fewer internalizing and externalizing problems (Lyons-Ruth, 1997), better problem-solving abilities and greater competence with peers (Elicker, 1992) (Sroufe, 1985).

Children who develop insecure attachment – owing to a variety of factors, including inconsistent, unresponsive or confusing care by their parents – are less likely than securely attached children to be able to form and sustain stable and supportive relationships as adults. They are likely to have difficulties expressing or regulating their feelings and drawing on potentially supportive social relationships, and are vulnerable to low self-esteem and breaking down under stress (Sroufe, 1999).

Insecure attachment in infancy, which is evident in avoidant and clinging patterns of behaviour, can be understood as strategies for maintaining emotional equilibrium. While adaptive in infancy, such strategies, continued into childhood and the world of adult relationships, can prove to be highly counterproductive and ineffective. Disorganised attachment, where there is no strategy for maintaining emotional equilibrium other than dissociation or control, can have particularly devastating consequences in adult life.

Why focus on marital quality in relation to infant attachment?

A range of factors have been identified by research as having a significant bearing on the development of secure attachment. Broadly fitting under the heading of sensitivity, these include a parent's ability to perceive their baby's signals accurately, a parent's skill at modulating their baby's emotional state, a parent's responsiveness to their baby's cues, and the extent to which interaction between mothers/fathers and babies is reciprocal (see, for example, De Wolff, 1997).

While these aspects have been identified as direct pathways to secure attachment, numerous researchers have stressed the need to examine what contributes to indirect pathways; that is, which factors create the conditions in which the sensitivity of the parents as individuals to infants is optimised. The co-parenting relationship has been suggested by a number of researchers as one such indirect pathway worthy of further investigation (Belsky & Fearon, 2008) (Cowan, 1997) (Wong, 2009) (Ciulow, 2009), while others have stressed the need to embrace and understand family functioning in all its complexity (Parke, 1998) (Dickstein, 2009) (Cowan, 1997).

Marital satisfaction/conflict and infant attachment

Although some studies that have looked at marital quality/conflict and parent-child attachment security have failed to find any association (Shaw, 1996) (Braungart-Rieker, 1999) (Doyle, 2000) (Clarke-Stewart, 2000) the majority of studies which have looked at these links have reported links between them.

For example, in the earliest study drawn upon for this briefing, researchers looked at seventy-five families with one 20-month old child to investigate the significance of the husband-wife relationship for early child development. They concluded that secure child-mother and child-father attachments were most likely to occur in families in which husbands and wives were highly satisfied with their marriages, whereas insecure child-parent attachments were most likely to occur when marital adjustment was poor (Goldberg, 1984).

A slightly later study of 20 families with children between the ages of 1-3 years found that, for mothers, high satisfaction, low conflict and high communication quality were related to child security of attachment and sociability; whereas for fathers, higher levels of premarital conflict and lower levels of communication quality were linked to having children who were overly-dependent (Howes, 1989). These findings suggest that in the face of marital distress, fathers may withdraw from their children in a way that negatively affects the child's development of autonomy. See below for further discussion about infant-father attachment and marital quality.

The findings of a 1995 study of 45 mothers and their children (average age = 33 months) have significant, but largely ignored, implications for policy-makers and practitioners alike. Among the children of insecure mothers, those whose mothers reported high marital adjustment were significantly more secure than those whose mothers reported low marital adjustment, while no such association was evident among children of secure mothers (Das Eiden, 1995). These results indicate that providing relationship support to insecurely attached mothers may be highly beneficial to the attachment security of their children, and should therefore prompt us to invest in promoting good relationship quality between partners.

In their meta-analysis, Van IJzendoorn and colleagues (1999) established a statistically significant relation between marital conflict and infant disorganisation. Of the insecure attachment categories, disorganised attachment is the one that leads to most difficulties (both interpersonally and societally), being associated with chaotic, insensitive and abusive patterns of behaviour and relating. This finding therefore highlights how vital it is that policies are put in place to support relationships in order to bring about a reduction in the incidence of disorganised patterns of attachment in infants.

Furthermore, a recent study which reported an association between relationship conflict and disorganised

attachment has social policy implications since it found that the link between conflicted parental relationships and infant-mother attachment disorganization was particularly pronounced only when parents were living apart (and there was no such link when parents were living together) (Finger, 2009). "These findings", the authors write, "suggest a particular need to develop and implement treatment approaches for highly conflicted non-co-residing parents living in high-risk environments, perhaps by targeting the co-parental relationship through successful negotiation of parental roles." TCCR's Parenting Together service provides such an approach; practical, evidence-based and brief, this therapy works to develop and strengthen the parenting alliance between couples who have separated and who cannot make collaborative arrangements to parent their children. It is based on mentalization-based treatment which was originally designed for work with people with borderline personality disorder (and who have disorganised attachment).

Father-infant attachment and marital quality

Infant attachment security appears to be relationship-specific rather than something that generalises across relationships within the family (i.e. a baby can have a different attachment relationship to each of his/her parents) (Van IJzendoorn & de Wolff, 1997), although the concept of the 'internal working model' assumes that these specific experiences are then organised into an hierarchical model of attachment assumptions that is generalised.

Research on infant attachment has to a large extent focused on mother-infant attachment relationships however. It is of particular interest therefore that a number of the studies which inform this briefing suggest differential associations between mother- and father-infant attachment in relation to marital quality.

For example, a 2009 study found that fathers who viewed the paternal role as important were more likely to have securely attached infants, but this association was significant only when marital quality was high (Wong, 2009);

while Belsky found that fathers of infants securely attached to them experienced their marriages more positively (Belsky, 1996) and Owen that fathers who reported more marital conflict were rated as less warm and sensitive with their three-month-old infants and that increased marital conflict was directly related to decreased attachment security for the infant-father but not the infant-mother relationship (Owen, 1997).

Similarly, another study reported that warm and engaged marital interactions were associated with infant-father attachment security only (i.e. not mother-infant) (Frosch, 2000). These researchers suggest that “husbands’ withdrawal from the marriage may be associated with husbands’ withdrawal from their children” and that “in couples characterized by greater interpersonal engagement and enjoyment, fathers may be better able to serve as a secure base for their children”.

A study published this year additionally underscores the importance of marital quality during pregnancy, finding that expectant fathers’ perceived marital intimacy during pregnancy predicted the father-infant attachment after childbirth. That these researchers state that “if expectant fathers face marital problems prenatally, it is likely to harm the father-child attachment after childbirth” (Yu, 2012) suggests that policies directed at supporting couples during the transition to parenthood are vital.

Conclusion

The precise mechanism by which marital satisfaction or marital quality may influence attachment relationships is contested by different researchers. Some suggest that infants exposed to greater marital conflict are more likely to develop insecure attachment relationships with their parents, independent of their parents’ sensitivity (Davies and Cummings, 1994)), while others take the view that parents who are in more conflicted marriages are less likely to provide sensitive care for their infants, which in turn undermines attachment security (Belsky & Jaffee, 2006).

While a discussion of these differing theories is beyond the scope of this

briefing, what is clear from the research is that poor relationship and marital quality, and relationship conflict, have significant and alarming consequences for the psychological and social development of infants and children, consequences that society as a whole is ill-equipped – emotionally, financially and structurally – to deal with.

What policies does the evidence in this briefing suggest should be adopted at national and local levels?

- Further investment in services for highly-conflicted separate parents is required;
- Further investment is needed in relationship support services targeted at couples in the transition to parenthood and during early parenthood – results of a Government pilot of such a service will be keenly awaited;
- Parenting work needs to encourage communication between parents as opposed to teaching parenting skills - this amounts to a major shift in focus;
- Where there are two parents, engaging both and focusing on the quality of the parental relationship should become central aims of frontline services such as health visiting, social work and children’s centres. The training curricula of these professions should be revised so that frontline workers feel equipped, and supported, to focus on the importance of the parental couple relationship in their work with new parents;
- Intensive interventions such as and programmes to help ‘troubled’ or ‘complex’ families must pay particular attention the relationship between those in the transition to parenthood if they are to truly turn lives around and reduce the transmission of poor attachment from one generation to another;
- Further research on the connections between the quality of co-parenting relationships and attachment in childhood is needed.

Couple relationships: why are they important?

Few would dispute the suggestion that the quality of our closest relationships profoundly affects how we feel about ourselves. Much less widely acknowledged however – although just as true – is the fact that the quality of these relationships has material and measurable consequences for our lives and those around us, affecting the emotional, cognitive and physical development of our children, our capacity to work and to be fulfilled in work, and our physical and mental health as we get older.

Policy-makers, commissioners of health and social care services and frontline staff delivering care, amongst others, have an invaluable opportunity to make the quality of couple relationships a central focus of their work. This series of briefings from TCCR aims to inform and support them to do this, since no serious attempt to improve the nation’s health and well-being can afford to overlook the fundamental role which the quality of our close relationships has on our lives.

Established in 1948, The Tavistock Centre for Couple Relationships is recognised in its field as a centre of advanced practice and study, both nationally and internationally. Our ethos is to develop practice, research and policy activities which complement and inform the development of services to couples.

We run a variety of practitioner trainings, ranging from introductory courses to doctoral programmes in couple counselling and psychotherapy. Our courses are accredited by the British Association of Couple Counselling and Psychotherapy, the British Psychoanalytic Council and the College of Sexual and Relationship Therapists. Our trainings are validated by the University of East London (UEL).

TCCR also supports the work of frontline practitioners, and aims to foster an approach to family support and mental health service provision which takes the impact of couple relationships on child and family functioning into account.

In addition, we undertake research and policy activities which encourage the development and growth of effective and innovative relationship support services.

TCCR also provides services to couples and parents throughout London. We operate a range of affordable counselling and psychotherapy services supporting clients experiencing challenges in their relationships, their sexual lives and their parenting.

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