

The current scientific consensus on attachment-based

'parental alienation'

Article 1: The Pathology

A child rejecting a parent surrounding divorce is fundamentally an attachment-related pathology. The attachment system is the brain system governing all aspects of love and bonding throughout the lifespan, including grief and loss (Ainsworth, 1989; Bowlby, 1969; 1973; 1980; 1988);

From Ainsworth:

"I define an "affectional bond" as a relatively long-enduring tie in which the partner is important as a unique individual and is interchangeable with none other. In an affectional bond, there is a desire to maintain closeness to the partner. In older children and adults, that closeness may to some extent be sustained over time and distance and during absences, but nevertheless there is at least an intermittent desire to reestablish proximity and interaction, and pleasure –often joy –upon reunion. Inexplicable separation tends to cause distress, and permanent loss would cause grief."(Ainsworth, 1989, p. 711)

"An "attachment" is an affectional bond, and hence an attachment figure is never wholly interchangeable with or replaceable by another, even though there may be others to whom one is also attached. In attachments, as in other affectional bonds, there is a need to maintain proximity, distress upon inexplicable separation, pleasure and joy upon reunion, and grief at loss."(Ainsworth, 1989, p. 711)

A child rejecting a relationship with a parent following divorce represents a pathology in the love-and-bonding system of the brain, in the attachment system.

The attachment-related pathology of a child rejecting a normal-range parent surrounding divorce (traditionally called "parental alienation" in the popular culture) is the product of "pathological mourning" (Bowlby, 1980) by an allied narcissistic or borderline personality parent (Kernberg, 1975).

From Bowlby:

"The deactivation of attachment behavior is a key feature of certain common variants of pathological

mourning.” (Bowlby, 1980, p. 70)

“Disturbances of personality, which include a bias to respond to loss with disordered mourning, are seen as the outcome of one or more deviations in development that can originate or grow worse during any of the years of infancy, childhood and adolescence.” (Bowlby, 1980, p. 217)

The narcissistic/(borderline) personality parent in the family is unable to mentalize their experience of sadness (Brüne, Walden, Marc-Andreas, Dimaggio, 2016; Briand-Malenfant, Lecours, & Deschenaux, 2012). As a result, they are unable to process their feelings of sadness surrounding the divorce and instead translate their sadness into anger and aggressive impulses toward the other spouse rather than the actual experience of sadness.

From Kernberg:

“They [narcissists] are especially deficient in genuine feelings of sadness and mournful longing; their incapacity for experiencing depressive reactions is a basic feature of their personalities. When abandoned or disappointed by other people they may show what on the surface looks like depression, but which on further examination emerges as anger and resentment, loaded with revengeful wishes, rather than real sadness for the loss of a person whom they appreciated.” (Kernberg, 1975, p. 229)

From Briand-Malenfant, Lecours, and Deschenaux:

“The results suggest that the experience of suffering (of dysphoria) found in our BPD participants’ description of relationship episodes is not yet sadness, being maybe its precursor such as a state of generalized distress or, in other words, an unmentalized form of sadness... This could mean that BPD patients are lacking an access to sadness, creating incapacity to be sad, due to a deficit in mentalization.” (Briand- Malenfant, Lecours, & Deschenaux, 2012, p. 952)

The stability of the self-structure organization of the narcissistic personality is vulnerable to rejection by the attachment figure, and the stability of the self-structure organization of the borderline personality is vulnerable to abandonment by the attachment figure. Divorce involves both the rejection and abandonment of the narcissistic/(borderline) spouse and parent by the attachment figure of the other spouse, and divorce exposes to public view the personal inadequacy of the divorced spouse that is leading to their public rejection and abandonment.

From Beck:

“The core belief of narcissistic personality disorder is one of inferiority or unimportance. This belief is only

activated under certain circumstances and thus may be observed mainly in response to conditions of self-esteem threat. Otherwise, the manifest belief is a compensatory attitude of superiority.” (Beck et al, 2004, p. 249).

For the narcissistic personality: “The failure to be superior or regarded as special activates underlying beliefs of inferiority, unimportance, or powerlessness and compensatory strategies of self-protection and self-defense.” (Beck et al, 2004, p. 241)

For the borderline personality: “The specific themes are loneliness, unlovability, rejection and abandonment by others, and viewing the self as bad and to be punished.” (Beck et al., 2004, p. 192)

Divorce will inherently activate both the rejection and abandonment vulnerabilities of a narcissistic/(borderline) personality parent. The inherent rejection and abandonment by the attachment figure surrounding divorce will threaten to collapse the structure of the narcissistic and borderline personality into an immensely painful inchoate state of disorganization.

In order to stabilize their collapsing personality structure that is being threatened with collapse as a result of the inherent rejection and abandonment surrounding the divorce, the narcissistic/(borderline) personality parent will seek to project their own rejection and abandonment onto the other spouse/(parent) by triangulating the child into the spousal conflict through the formation of a cross-generational coalition with the child against the other parent from which the child is induced into rejecting the other parent (Bowen, 1978; Goldenberg & Goldenberg, 2013; Haley, 1977; Minuchin, 1974; Titelman, 2003), turning the targeted-rejected parent into the rejected parent/(spouse)/(person).

From Haley:

“The people responding to each other in the triangle are not peers, but one of them is of a different generation from the other two... In the process of their interaction together, the person of one generation forms a coalition with the person of the other generation against his peer. By ‘coalition’ is meant a process of joint action which is against the third person... The coalition between the two persons is denied. That is, there is certain behavior which indicates a coalition which, when it is queried, will be denied as a coalition... In essence, the perverse triangle is one in which the separation of generations is breached in a covert way. When this occurs as a repetitive pattern, the system will be pathological. (Haley, 1977, p. 37)

From Minuchin:

“The boundary between the parental subsystem and the child becomes diffuse, and the boundary around the parents-child triad, which should be diffuse, becomes inappropriately rigid. This type of structure is called a rigid triangle... The rigid triangle can also take the form of a stable coalition. One of the parents joins the child in a rigidly bounded cross- generational coalition against the other parent.” (Minuchin, 1974, p. 102).

The inability of the narcissistic/(borderline) personality parent to mentalize the experience of sadness surrounding the divorce leads to their pathological mourning in which they translate feelings of sadness and mournful loss into “anger and resentment, loaded with revengeful wishes” toward the attachment figure of the other spouse who is failing to meet the emotional and psychological regulatory needs of the narcissistic/(borderline) spouse.

From Beck:

“Thus, he or she is apt to approach any number of situations feeling automatically entitled to personal gratification. If others fail to satisfy the narcissist’s “needs,” including the need to look good, or be free from inconvenience, then others “deserve to be punished”... Even when punishing others out of intolerance or entitlement, the narcissist sees this as “a lesson they need, for their own good.” (Beck et al., 2004, p. 252).

The narcissistic/(borderline) parent then transfers their own disordered mourning and aberrant mentalization of sadness surrounding the divorce to the child through techniques of psychological manipulation and psychological control of the child within the cross- generational coalition this parent forms with the child.

In his book regarding parental psychological control of children, *Intrusive Parenting: How Psychological Control Affects Children and Adolescents*, published by the American Psychological Association, Brian Barber and his colleague, Elizabeth Harmon, identify over 30 empirically validated scientific studies that have established the construct of parental psychological control of children. Barber and Harmon provide the following definition for the construct of parental psychological control of the child:

“Psychological control refers to parental behaviors that are intrusive and manipulative of children’s thoughts, feelings, and attachment to parents. These behaviors appear to be associated with disturbances in the psycho-emotional boundaries between the child and parent, and hence with the development of an independent sense of self and identity.” (Barber & Harmon, 2002, p. 15)

According to Stone, Bueler, and Barber:

“The central elements of psychological control are intrusion into the child’s psychological world and self-definition and parental attempts to manipulate the child’s thoughts and feelings through invoking guilt, shame, and anxiety. Psychological control is distinguished from behavioral control in that the parent attempts to control, through the use of criticism, dominance, and anxiety or guilt induction, the youth’s thoughts and feelings rather than the youth’s behavior.” (Stone, Buehler, & Barber, 2002, p. 57)

Soenens and Vansteenkiste (2010) describe the various methods used to achieve parental psychological control of the child:

“Psychological control can be expressed through a variety of parental tactics, including (a) guilt-induction, which refers to the use of guilt inducing strategies to pressure children to comply with a parental request; (b) contingent love or love withdrawal, where parents make their attention, interest, care, and love contingent upon the children’s attainment of parental standards; (c) instilling anxiety, which refers to the induction of anxiety to make children comply with parental requests; and (d) invalidation of the child’s perspective, which pertains to parental constraining of the child’s spontaneous expression of thoughts and feelings.” (Soenens & Vansteenkiste, 2010, p. 75)

Research by Stone, Buehler, and Barber establishes the link between parental psychological control of children and marital conflict:

“This study was conducted using two different samples of youth. The first sample consisted of youth living in Knox County, Tennessee. The second sample consisted of youth living in Ogden, Utah.” (Stone, Buehler, & Barber, 2002, p. 62)

“The analyses reveal that variability in psychological control used by parents is not random but it is linked to interparental conflict, particularly covert conflict. Higher levels of covert conflict in the marital relationship heighten the likelihood that parents would use psychological control with their children.” (Stone, Buehler, & Barber, 2002, p. 86)

Stone, Buehler, and Barber provide an explanation for their finding that intrusive parental psychological control of children is related to high inter-spousal conflict:

“The concept of triangles “describes the way any three people relate to each other and involve others in emotional issues between them” (Bowen, 1989, p. 306). In the anxiety-filled environment of conflict, a third person is triangulated, either temporarily or permanently, to ease the anxious feelings of the conflicting partners. By default, that third person is exposed to an anxiety-provoking and disturbing atmosphere. For example, a child might become the scapegoat or focus of attention, thereby transferring

the tension from the marital dyad to the parent-child dyad. Unresolved tension in the marital relationship might spill over to the parent-child relationship through parents' use of psychological control as a way of securing and maintaining a strong emotional alliance and level of support from the child. As a consequence, the triangulated youth might feel pressured or obliged to listen to or agree with one parent's complaints against the other. The resulting enmeshment and cross-generational coalition would exemplify parents' use of psychological control to coerce and maintain a parent-youth emotional alliance against the other parent (Haley, 1976; Minuchin, 1974)." (Stone, Buehler, & Barber, 2002, p. 86-87)

The psychological control of the child occurs in a pathological parent-child context of an "invalidating environment, "described by Linehan and Koerner, that interferes with the child's mentalization of self-experience.

From Linehan and Koerner:

"A defining characteristic of the invalidating environment is the tendency of the family to respond erratically or inappropriately to private experience and, in particular, to be insensitive (i.e., nonresponsive) to private experience... Invalidating environments contribute to emotional dysregulation by: (1) failing to teach the child to label and modulate arousal, (2) failing to teach the child to tolerate stress, (3) failing to teach the child to trust his or her own emotional responses as valid interpretations of events, and (4) actively teaching the child to invalidate his or her own experiences by making it necessary for the child to scan the environment for cues about how to act and feel." (Linehan & Koerner, 1993, p. 111-112)

The narcissistic/(borderline) personality parent's inability to mentalize and thereby psychologically process the experience of sadness created by the divorce results in their "pathological mourning" of the divorce that is then transferred to the child's experience through manipulative techniques of psychologically controlling the child within a relational environment that invalidates the child's authenticity to create a cross-generational coalition of the narcissistic/(borderline) parent with the child against the targeted parent, in which the child is manipulated and induced to terminate the child's relationship with the targeted parent.

A structural family diagram of this cross-generational coalition and the cutoff in the child's relationship with a parent created by the cross-generational coalition is provided on page 42 of Salvador Minuchin's book *Family Healing* (1993) with co-author Michael Nichols.

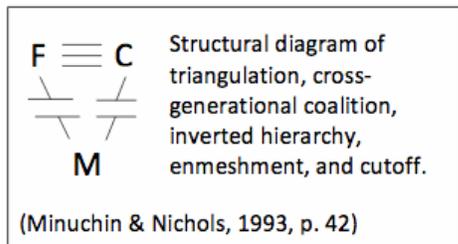
As noted by Bowlby in his description of pathological mourning, the disordered mourning is created in the distorted childhood experiences of the parent that created this parent's personality pathology. The

current attachment-related pathology, expressed as the child's rejection of a normal-range parent following divorce, represents the trans-generational transmission of attachment trauma from the childhood of the allied narcissistic/(borderline) parent to the current family relationships, mediated by the personality disorder pathology of the parent that is itself a product of this parent's childhood attachment trauma.

The childhood attachment trauma of the narcissistic/(borderline) parent that is creating this parent's incapacity to mentalize and process sadness, leading to this parent's pathological mourning surrounding the divorce, is contained in internalized schemas of attachment expectations (called "internal working models" of attachment by Bowlby, 1969; 1973; 1980).

From Beck:

"Evaluation of the particular demands of a situation precedes and triggers an adaptive (or maladaptive) strategy. How a situation is evaluated depends in part, at least, on the relevant underlying beliefs. These beliefs are embedded in more or less stable structures, labeled "schemas," that select and synthesize incoming data." (Beck et al., 2004, p. 17)



"The content of the schemas may deal with personal relationships, such as attitudes toward the self or others, or impersonal categories...When schemas are latent, they are not participating in information processing; when activated they channel cognitive processing from the earliest to the final stages... When hypervalent, these idiosyncratic schemas displace and probably inhibit other schemas that may be more adaptive or more appropriate for a given situation. They consequently introduce a systematic bias into information processing."(Beck et al., 2004, p. 27)

"In personality disorders, the schemas are part of normal, everyday processing of information."(Beck et al., 2004, p. 27)

"When particular schemas are hypervalent, the threshold for activation of the constituent schemas is low: they are readily triggered by a remote or trivial stimulus. They are also "prepotent"; that is, they readily supersede more appropriate schemas or configurations in processing information."(Beck et al., 2004, p.

28)

From Bowlby:

“No variables, it is held, have more far-reaching effects on personality development than have a child’s experiences within his family: for, starting during the first months of his relations with his mother figure, and extending through the years of childhood and adolescence in his relations with both parents, he builds up working models of how attachment figures are likely to behave towards him in any of a variety of situations; and on those models are based all his expectations, and therefore all his plans for the rest of his life.” (Bowlby, 1973, p. 369).

The childhood attachment trauma that creates the damaged self-structure of pathological narcissism and borderline personality pathology can emerge from a variety of childhood attachment trauma experiences, but increasing research is focusing on the role of disorganized attachment created by a parent who is simultaneously a source of threat and a source of nurture.

From Beck: “Various studies have found that patients with BPD are characterized by disorganized attachment representations (Fonagy et al., 1996; Patrick et al, 1994). Such attachment representations appear to be typical for persons with unresolved childhood traumas, especially when parental figures were involved, with direct, frightening behavior by the parent. Disorganized attachment is considered to result from an unresolvable situation for the child when “the parent is at the same time the source of fright as well as the potential haven of safety” (van IJzendoorn, Schuengel, & Bakermans-Kranburg, 1999, p. 226).” (Beck et al., 2004, p. 191)

“Some traumatic experiences may have taken place at a very early age, notably the kind of punishing, abandoning, rejecting responses of the caretaker that led to disorganized attachment.” (Beck et al., 2004, p. 191)

“Arntz (1994) hypothesized that childhood traumas underlie the formation of core schemas, which in their turn, lead to the development of BPD.” (Beck et al., 2004, p 192)

From Stepp, et al.:

“Individuals with BPD tend to have attachment styles classified as disorganized and unresolved (Levy, 2005)”(Stepp, et al., 2011, p. 3)

Levy, K.N. (2005). The implications of attachment theory and research for understanding borderline personality disorder. *Development and Psychopathology*, 17, p. 959-986

From Trippany, Helm, and Simpson:

“Research shows that disturbances with attachment and bonding in early childhood affect personality development and healthy interpersonal functioning as an adult, often resulting in the development of personality disorders such as BPS.” (Trippany, Helm, and Simpson, p. 100)

Increasing research is also linking the formation of borderline personality characteristics to sexual abuse victimization during childhood (Ogata, et al., 1990; Sieswerda, Arntz, Mertens, & Vertommen, 2006; Trippany, Helm, & Simpson, 2006; Bailey & Shriver, 1999)

Childhood attachment trauma becomes instantiated into the neural networks of the attachment system as schemas (internal working models) of attachment expectations, that then guide future responding to attachment-related challenges that reactivate these internalized trauma networks.

From van der Kolk:

“When the trauma fails to be integrated into the totality of a person’s life experiences, the victim remains fixated on the trauma. Despite avoidance of emotional involvement, traumatic memories cannot be avoided: even when pushed out of waking consciousness, they come back in the form of reenactments, nightmares, or feelings related to the trauma... Recurrences may continue throughout life during periods of stress.” (Van der Kolk, 1987, p. 5)

“Victims of trauma respond to contemporary stimuli as if the trauma had returned, without conscious awareness that past injury rather than current stress is the basis of their physiologic emergency responses. The hyper arousal interferes with their ability to make calm and rational assessments and prevents resolution and integration of the trauma... People who have been exposed to highly stressful stimuli develop long-term potentiation of memory tracts that are reactivated at times of subsequent arousal.

This activation explains how current stress is experienced as a return of the trauma; it causes a return to earlier behavior patterns.” (Van der Kolk, 1989, p. 226)

From Beck:

“The conceptualization of the core pathology of BPD as stemming from a highly frightened, abused child who is left alone in a malevolent world, longing for safety and help but distrustful because of fear of further abuse and abandonment, is highly related to the model developed by Young (McGinn & Young, 1996)... Young elaborated on an idea, in the 1980s introduced by Aaron Beck in clinical workshops (D.M.

Clark, personal communication), that some pathological states of patients with BPD are a sort of regression into intense emotional states experienced as a child. Young conceptualized such states as schema modes.” (Beck et al., 2004, p. 199)

“Young hypothesized that four schema modes are central to BPD: the abandoned child mode (the present author suggests to label it the abused and abandoned child); the angry/impulsive child mode; the punitive parent mode, and the detached protector mode... The abused and abandoned child mode denotes the desperate state the patient may be in related to (threatened) abandonment and abuse the patient has experienced as a child. Typical core beliefs are that other people are malevolent, cannot be trusted, and will abandon or punish you, especially when you become intimate with them.” (Beck et al., 2004, p. 199)

From Trippany, Helm, and Simpson:

“Victims of past trauma may respond to contemporary events as though the trauma has returned and re-experience the hyper arousal that accompanied the initial trauma.” (Trippany, Helm, and Simpson, p. 100)

Pearlman and Courtois identify the pattern of the attachment trauma reenactment narrative:

“Reenactments of the traumatic past are common in the treatment of this population and frequently represent either explicit or coded repetitions of the unprocessed trauma in an attempt at mastery. Reenactments can be expressed psychologically, relationally, and somatically and may occur with conscious intent or with little awareness.” (Pearlman & Courtois, 2005, p. 455)

“One primary transference-countertransference dynamic involves reenactment of familiar roles of victim-perpetrator-rescuer-bystander in the therapy relationship. Therapist and client play out these roles, often in complementary fashion with one another, as they relive various aspects of the client’s early attachment relationships.” (Pearlman & Courtois, 2005, p. 455)

Sigmund Freud also identified the repetition of trauma. According to Prager:

“Freud suggests that overwhelming experience is taken up into what passes as normal ego and as permanent trends within it; and, in this manner, passes trauma from one generation to the next. In this way, trauma expresses itself as time standing still... Traumatic guilt ---for a time buried except through the character formation of one generation after the next --- finds expression in an unconscious reenactment of the past in the present.”(Prager, 2003, p. 176)

From Freud:

“Here we may note two important points. The effects of the trauma are twofold, positive and negative. The former are endeavors to revive the trauma, to remember the forgotten experience, or, better still, to make it real –to live it once more through a repetition of it; if it was an early affective relationship it is revived in an analogous connection to another person. These endeavours are summed up in the terms “fixation to the trauma” and “repetition-compulsion.” (Freud, 1939, p. 122)

The attachment trauma pattern of the “abusive parent”/“victimized child”/“protective parent” that is embedded in the schema patterns of the narcissistic/(borderline) parent’s internal working models of attachment is reactivated by the rejection and abandonment of the spousal attachment figure in the divorce, creating the psychological context for transferring the trauma re-enactment narrative from the childhood attachment trauma of the narcissistic/(borderline) parent to the current family relationships.

The key to creating this false trauma re-enactment narrative in the current family relationships is to convince the child to adopt the role as a supposedly “victimized child” in the false trauma re-enactment narrative of the narcissistic/(borderline) parent. This is accomplished through manipulative parental communications and psychologically controlling parenting practices that incorporate a distorted parental mentalization of the child’s sadness surrounding the divorce as instead representing “anger and resentment, loaded with revengeful wishes” directed toward the other parent.

Once the child adopts the false role in the trauma reenactment narrative as the supposedly “victimized child” of the normal-range parenting of the targeted parent, this “victimized child” role automatically imposes the “abusive parent” role in the trauma reenactment narrative onto the targeted parent, irrespective of the actual parenting of the targeted parent, and the “victimized child” role simultaneously allows the narcissistic/(borderline parent) to adopt and then conspicuously display the coveted role as the all-wonderful “protective parent” in the false trauma reenactment narrative created from this parent’s childhood attachment trauma.

According to Prager:

“Trauma, as a wound that never heals, succeeds in transforming the subsequent world into its own image, secure in its capacity to re-create the experience for time immemorial. It succeeds in passing the experience from one generation to the next. The present is lived as if it were the past. The result is that the next generation is deprived of its sense of social location and its capacity to creatively define itself autonomously from the former... when time becomes distorted as a result of overwhelming events, the natural distance between generations, demarcated by the passing of time and changing experience, becomes obscured.” (Prager, 2003, p. 176)

The attachment system is the brain system that governs all aspects of love and bonding throughout the lifespan, including grief and loss. Divorce activates the schema patterns embedded in the brain's attachment networks (the internal working models of attachment) to mediate the emotional and psychological loss of the spousal attachment figure.

The divorce activates two separate sets of representational networks in the attachment networks of the narcissistic/(borderline) parent, one embedded in the trauma schema patterns of the internal working models of childhood attachment trauma, and the second set representing the current family members, the targeted parent, the current child, and the self-representation of the narcissistic/(borderline) parent.

The concurrent co-activation of two sets of representational networks in the attachment system of the narcissistic/(borderline) parent creates a psychological fusion—a psychological equivalency—of these two representational networks. In the mind of the narcissistic/(borderline) parent, the targeted parent becomes the supposedly “abusive parent” from the childhood trauma experience of the narcissistic/(borderline) parent, while the current child becomes psychologically equivalent to the “victimized child” from the narcissistic/(borderline) parent's own childhood trauma experience, and the narcissistic/(borderline) parent then adopts and conspicuously displays the coveted role as the all-wonderful “protective parent.

”In addition, the splitting pathology of the narcissistic/(borderline) parent cannot accommodate to ambivalence. When the polarization of the splitting pathology inherent to the narcissistic/(borderline) personality is added to the cross-generational coalition with the child, a particularly malignant and virulent form of cross-generational coalition is created in which the child seeks to entirely terminate the child's relationship with the normal-range and affectionally available parent.

The pathology of splitting cannot accommodate to ambivalence. In the mind of the narcissistic/(borderline) parent, when the current spouse becomes an ex-spouse they must also become an ex-parent in order to maintain the consistency required by the splitting pathology; the ex-wife must become an ex-mother, and the ex-husband must become an ex- father. This is a neurologically imposed imperative of the splitting pathology inherent to the narcissistic and borderline personality dynamics.

The attachment-related pathology commonly referred to as “parental alienation” in the popular culture involves a complex blend of four different but interrelated pathologies:

- **Attachment-Related Pathology:** Pathological mourning creating the child's rejection of a normal-range and affectionally available parent;

- **Personality Disorder Pathology:** Parental narcissistic and borderline personality pathology in which the child's induced rejection of the other parent is being created and used to stabilize the collapsing personality structure of the narcissistic/borderline pathology in response to the rejection and abandonment inherent to divorce and the public exposure through the divorce rejection of the personal inadequacy of the narcissistic/(borderline) spouse (public humiliation);
- **Family Systems Pathology:** The triangulation of the child into the inter-spousal conflict through the formation of a cross-generational coalition of the child with the allied narcissistic/(borderline) parent against the other parent and the subsequent emotional cutoff created in the parent-child relationship;
- **Complex Trauma Pathology:** The trans-generational transmission of attachment trauma from the childhood of the narcissistic/(borderline) parent to the current family relationships through the false trauma reenactment pattern of "abusive parent"/"victimized child"/"protective parent" that is embedded in the schema patterns (internal working models) of the narcissistic/(borderline) parent's attachment networks. Professional competence in the assessment, diagnosis, and treatment of attachment-related pathology surrounding divorce requires professional-level knowledge and expertise in all four of these domains of knowledge.

Article 2: The Attachment System

The attachment system is the brain system governing all aspects of love and bonding throughout the lifespan, including grief and loss. A child's rejection of a relationship with a parent represents an attachment-related pathology. The characteristic functioning of the attachment system has been extensively researched and documented in the scientific literature.

The attachment system functions in characteristic ways, and it dysfunctions in characteristic ways. In response to problematic parenting, the attachment system responds by MORE strongly motivating the child to bond to the problematic parent. This is called an "insecure attachment" (Betterton, 1992). There are various patterns displayed by insecure attachment, but they all seek to maximize the child's attachment bond to the problematic parent, depending on the nature of the problematic parenting the child is exposed to.

The attachment system is a "goal-corrected" motivational system, meaning that it ALWAYS maintains the goal of forming an attachment bond to the parent. In response to problematic parenting, the attachment system changes HOW it tries to achieve this attachment bond, but it always tries to form

an attached bond to the parent. This is because the child's attachment bond to the parent provides a significant survival advantage to the child.

The attachment system evolved through the selective targeting of children by predators. Children who formed strong attachment bonds to parents received parental protection from predators so that their genes for forming strong attachment bonds to parents increased in the collective gene pool. Children who formed weaker attachment bonds to parents became more likely to fall prey to predators (and other environmental dangers) at higher rates, so their genes for forming weaker attachment bonds were systematically eliminated from the collective gene pool. Over the millennia of systematic evolutionary pressures applied by the selective predation of children, a very powerful and highly resilient primary motivational system developed in the brain that strongly motivates children to form strong attachment bonds to parents; even to bad parents, and especially to bad parents.

From Bowlby:

"The biological function of this behavior is postulated to be protection, especially protection from predators." (Bowlby, 1980, p. 3)

Problematic parenting creates a parent-child relationship called an "insecure attachment." An insecure attachment more strongly motivates children to form an attachment bond to the problematic parent. This is because bad parenting more fully exposes children to predation and other environmental dangers. Children who rejected bad parents were more likely to die from predation and other environmental dangers, thereby removing the genes for rejecting bad parents from the collective gene pool. On the other hand, children who became more strongly motivated to form an attachment bond to a bad parent became more likely to receive parental protection, so their genes for more strongly motivating the child to form an attachment bond to a bad parent increased in the collective gene pool.

This increased child motivation to bond to an abusive parent was demonstrated in the classic bonding experiments involving maternal deprivation in monkeys conducted by Harlow.

From Seay, Alexander, and Harlow:

"All seven of these MM monkeys [motherless monkeys] were totally inadequate mothers... Initially, the MM monkeys tended to ignore or withdraw from their babies even when the infants were disengaged and screaming... Later the motherless monkeys ignored, rejected, and were physically abusive to their infants... A surprising phenomena was the universally persisting attempts by the infants to attach to the mother's body regardless of neglect or physical punishment. When the infants failed to attach to the

ventral surface of the mother, they would cling to the dorsal surface and attempt to move to the mother's ventral surface."(Seay, Alexander, and Harlow, 1964, p. 353)

From van der Kolk:

"Increased imprinting to abusing objects has been demonstrated in birds (33), dogs (34), monkeys (35, 36), and human beings (7). Sackett et al. (37) found that monkeys raised by abusive mothers cling to them more than average: The immediate consequence of maternal rejection is the accentuation of proximity seeking on the part of the infant.

After similar experiments, Harlow and Harlow (35) concluded: "Instead of producing experimental neurosis we had achieved a technique for enhancing maternal attachment." (Van der Kolk, 1987, p. 34)

From Rainecki, Moriceau, and Sullivan:

"A potential evolutionary explanation suggests selection pressures supported infants that remained attached because it increased the probability of survival. From an adaptive point of view, perhaps it is better for an altricial animal to remain attached to an abusive caregiver than receive no care." (Rainecki, Moriceau, & Sullivan, p. 1143)

The extensive research on the characteristic patterns of functioning and dysfunctioning of the attachment system all indicates that problematic parenting creates an *insecure attachment* that increases the child's motivation to bond to the problematic parent.

"The paradoxical finding that the more punishment a juvenile receives the stronger becomes its attachment to the punishing figure, very difficult to explain in any other theory, is compatible with the view that the function of attachment behavior is protection from predators." (Bowlby, 1969, p. 227)

In psychologically assessing attachment bonding, a *secure* and healthy parent-child attachment bond is evidenced by the child's relaxed willingness to separate from the parent because the child is secure in the parent's love and protection. An *insecure* parent-child attachment relationship, on the other hand, is evidenced by a hyper-bonding display between the parent and child in which the child's focus is directed toward the parent (i.e., the child is insecure in the emotional availability of the parent and so the child must constantly strive to recognize and meet the emotional and psychological needs of the parent).

From Kerig:

“In order to carve out an island of safety and responsivity in an unpredictable, harsh, and depriving parent-child relationship, children of highly maladaptive parents may become precocious caretakers who are adept at reading the cues and meeting the needs of those around them. The ensuing preoccupied attachment with the parent interferes with the child’s development of important ego functions, such as self organization, affect regulation, and emotional object constancy.” (Kerig, 2005, p. 14)

The child’s attachment bonding motivations toward a parent can, however, be artificially suppressed. Since the attachment system is a predator-driven system it is highly sensitive to parental signals of anxiety and parental threat perception. From the perspective of the attachment system, even subtle displays of parental anxiety and anxious concern for the child’s safety will trigger the child’s predator-driven motivation to remain in the protective proximity of the anxious and over-concerned parent who is signaling that there is a threat to the child.

If one parent signals to the child through this parent’s anxious concern that a relationship with the other parent represents a threat to the child, then this will trigger the child’s attachment system to terminate exploratory behavior away from the anxious-concerned parent and simultaneously motivate the child to remain in the “protective” proximity of the supposedly “protective” parent (i.e., the parent who is signaling anxiety). The supposedly “protective” parent’s emotional signals of anxiety will essentially act to define the other parent as representing a “predator threat” relative to the child’s attachment bonding motivations toward this parent.

Defining the other parent as representing a “predator threat” to the child will artificially suppress the child’s attachment bonding motivations toward the other parent. However, if the child is allowed to separate sufficiently from the anxiety signals of the supposedly “protective parent,” then the normal-range functioning of the child’s attachment system toward the other parent will resume and will once again motivate the child to form an affectionally attached bond to this parent.

Attachment-related pathology is always the product of pathogenic parenting (patho=pathology; genic=genesis, creation). Pathogenic parenting refers to the creation of psychopathology in the child through aberrant and distorted parenting practices. The construct of pathogenic parenting is an established construct in both developmental and clinical psychology and is most often used in reference to attachment-related pathology since the attachment system never spontaneously dysfunctions, but ONLY becomes dysfunctional in response to pathogenic parenting.

The diagnostic issue in assessing pathogenic parenting is to determine which parent is creating the child’s attachment-related pathology; is it the targeted-rejected parent through abusive parenting practices

(such as physical or sexual abuse of the child), or is it the allied and supposedly “favored” parent through the formation of a cross-generational coalition with the child against the other parent?

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