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Attachment in Adult Child-Older Parent Relationships: Research, Theory, and Practice

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Greater longevity has increased the years that adult children share with their older parents, yet it creates the potential for family stress situations that may be amenable to counseling intervention. In this article, the authors examined an attachment theory perspective for conceptualizing adult child-older parent issues by introducing the basic constructs of attachment theory and by demonstrating how the theory and its related research can be applied to adult children's struggles with older parental issues.

amily relationships between parent and child continue to be important throughout adult life for most individuals in North American society. In fact, the majority of parents and children will experience 50 years of their lives together, and many grandparents will know their grandchildren for 20 years or more (Hagestad, 1987). Although increases in longevity create rich potential for intergenerational relationships, such an increase in shared years also introduces unique stressors to the parent-child relationship. Changes in parents' lives, such as ill health, widowhood, or divorce, may adversely alter the behavior, thoughts, and feelings of adult children. For example, adults who are caring for an elderly parent routinely report stress-related symptoms such as anxiety, depression, or feelings of fatigue (Anthony-Bergstone, Zarit, & Gatz, 1988; King, 1993; Parks & Pilisuk, 1991). Past research indicates that most adult children, when faced with decisions with respect to aging and eventual death of their parents, are ill prepared for the emotional stress these issues elicit, and few counselors are trained to assist grown children with such concerns (Bromberg, 1983; Myers, 1988; Remnet, 1987). In addition, the meaning and impact of certain events on middle-aged adults, such as parental death, have until recently been largely ignored as research subjects (Douglas, 1990; Moss, Moss, Rubinstein, & Resch, 1993).

Although researchers have excelled in identifying and describing issues of import to later life parent-child relationships, the development and application of theories appropriate to these relationships have been sorely lacking

(Brubaker, 1990; Mancini, 1989). Applying a theoretical framework to later life parent-child relationships not only aids in the understanding of older parents and adult children but also provides counselors with a framework from which to effect therapeutic change, including more productive parent-child interaction. This article is a beginning step toward assisting counselors in understanding and dealing with conflict between grown children and their aging parents. Following Mancini and Blieszner's (1989) observation that the concept of attachment could be fruitfully applied to older parent-child pairs, this article's purpose is threefold: to provide some background to understanding issues of concern to the older parent-adult child dyad; to introduce and apply an attachment theory perspective to the understanding of this relationship; and to show how attachment theory can serve as a treatment perspective for effectively assisting middle-aged children with issues related to their aging parent.

It should be noted that this article is limited to issues concerning a middle-aged child in relation to his or her older parent. Although it is recognized that the older parent—child relationship may be viewed as a subsystem within the larger family unit, and that interactions with other subsystems in the family context (e.g., grandchildren, siblings) may influence the relationship between a grown child and his or her elderly parent, the focus of this article is on the parent—child relationship itself. Therefore, this article is not embedded in a family systems approach to counseling an older parent—child dyad, although the importance of such an approach is acknowledged and has been considered by others (e.g., Peterson, 1980; Qualls, 1988).

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THE LATER LIFE PARENT—CHILD RELATIONSHIP

The changing demography of North America's population toward increased longevity has spawned a situation in which children will have at least one living parent for most of their adult years (Barnett, Kibria, Baruch, & Pleck, 1991). Older adults are generally viewed as being 65 years of age or more, while their adult children can be young, middle age, or even old themselves (Myers, 1988). Most adult children are in the middle-age range, from 30 to 55 years of age.

From a counseling perspective, it is critical to note that the adult child's relationship with his or her parents will inevitably be influenced by the characteristics of the life stages experienced by each; developmentally, grown children and their aging parents experience different tasks and transitions. The central psychosocial crises at middle age, as described by Erikson (1950), are those of intimacy versus isolation (i.e., the establishing of intimate relationships with family and friends vs. living in isolation from intimate contact) and of generativity versus stagnation (i.e., leaving something of value to the next generation vs. becoming preoccupied with self and personal goals). For older parents, the central psychosocial crisis is one of integrity versus despair, concentrating on one's inner life and past accomplishments versus emphasis on past failures and fear of death (Erikson, 1950). Whereas the middle years are a time when the middle-aged child is challenged by the biological changes of aging, demands of his or her family, and financial obligations, the older parent is also in the process of experiencing changes as a result of retirement, decreased health, or death of a spouse.

For older people, the decline of former life roles appears to be associated with a complementary increase in the importance of family ties as a source of meaning and affirmation (Myers, 1988). Retirement, for example, may bring about reentry of an older parent into the life of an adult child, with parental expectations of frequent interaction. This may be a time when an adult child's life is filled with career and family obligations. To the extent that these obligations conflict with an adult child's perceived responsibility to his or her parent, an adult child is likely to feel guilt, frustration, or anger. Differing expectations for visiting and family involvement also may lead to disruptions in communication between child and parent.

It is almost inevitable that there will be a lack of fit between the developmental needs of a grown child and those of an aging parent, and this mismatch is likely to produce pressures and conflicts in the parent-child relationship (Walsh, 1989). In addition, the focus of the parent-child conflict will vary depending on the child's life stage; a 70-year-old parent may have an adult son in his 50s, whereas another may have an adult son in his 20s. An elderly widower, for example, may need caregiving assistance from his only child at a time when the grown child is desiring greater autonomy and considering moving out of the family home. A daughter who fears her parent's

decline may withdraw to avoid dealing with her father's illness (Qualls, 1988). Alternatively, the daughter who has high expectations of herself as a care-provider may take over her parent's life and defer her own goals or aspirations. At a time when a parent is adjusting to decreased physical strength and health, a grown child may be engrossed in numerous roles as spouse, parent, or worker, or the adult child may be preparing for her or his own old age as a retiree, a widow or widower, or a remarried spouse (Lewis, 1990).

Unlike other relationships (e.g., spouse, friend), the parent-child relationship is one that denotes a high degree of bonding across the entire life cycle (Hagestad, 1984). Many grown children seek counseling assistance for the relationship, particularly when caring for older parents becomes a source of strain (Johnson & Spence, 1982). Applying attachment theory to later life parent-child relationships not only provides a framework for understanding the parent-child bond, but it also provides a potential tool for effectively assisting adults with parent-related concerns.

ATTACHMENT THEORY

Historically, attachment theory grew out of object relations theory (Karen, 1990; Skolnick, 1986). Like object relations theorists, Bowlby (1988) believed that the actual quality of the infant-parent relationship becomes the shaping influence on the child's personality. Unlike object relations theorists, Bowlby paired psychoanalytic issues with concepts derived from ethology and cognitive development (Karen, 1990). Specifically, he viewed the attachment system as functioning to provide a secure base from which the infant can explore his or her environment (Bowlby, 1988). On the basis of experiences with the parent over time, the child develops internal "working models" containing beliefs and expectations about whether the caregiver is someone who is trustworthy and caring, and also whether the self is worthy of care and attention (Ainsworth, 1989; Sroufe, 1988). As Marris (1982) wrote, "this experience of attachment provides a model that becomes deeply embedded in the way we are predisposed to structure the meaning of relationships" (p. 194). Such models are presumed to embody either a secure, confident stance in relationships or an insecure stance characterized by either anxiety or avoidance.

Individuals will tend to impose these models on interpersonal experiences, thereby creating relationships that not only conform to these models but also confirm their expectations of the behavior and intentions of others (Marris, 1982). Thus, one's understanding of continuity in attachment styles across time, as well as the role that early caregiver relationships have in determining adult relationships, is founded on the concept of internal working models. A 50-year-old client, for example, may be viewing and responding to his or her parent out of an established internal model of their relationship.

The Continuation of the Attachment Bond

The underlying assumption in applying an attachment theory perspective to later life parent—child relationships is that the attachment bond between child and parent continues throughout life, based on internal working models developed in infancy. Although direct evidence for the continuity of attachment from infancy to the early school years has been provided by a growing body of research (e.g., Elicker, Englund, & Sroufe, 1992; Erickson, Sroufe, & Egeland, 1985; Grossman & Grossman, 1991), evidence for the continuation of attachment into adulthood is limited, albeit intriguing.

Several studies do highlight the role that internal working models serve in assimilating new relationships (e.g., romantic love, dating couples, and marital relationships) to preexisting expectations of self and others (Brennan & Shaver, 1995; Collins & Read, 1990; Feeney & Noller, 1990; Hazan & Shaver, 1987; Kobak & Hazan, 1991; Simpson, Rholes, & Nelligan, 1992). In addition, indirect support for the continuation of attachment bonds comes from a comparison of the frequency of attachment styles over time. In a summary of studies of infant security types (secure, avoidant, and anxious/ambivalent), Campos, Barrett, Lamb, Goldsmith, and Stenberg (1983) found that 62% of infants are securely attached, 23% are avoidant, and 15% are anxious/ambivalent. A later study, on a diverse sample of American adults who were asked to classify themselves as avoidant, anxious/ambivalent, or secure in relation to romantic love, found approximately similar percentages of security types (56%, 25%, and 19%, respectively; see Hazan & Shaver, 1987). In addition, individuals endorsing the different styles varied in their retrospective perceptions of early family relationships and in their endorsement of mental models in ways consistent with an assumption of continuity of attachment style. The underlying assumption of the Hazan and Shaver study was that conscious adult beliefs about romantic love are influenced by underlying and unconscious mental models formed during childhood that childhood attachment style will influence adult attachment.

Hazan and Shaver's (1987) work has since been replicated to show similar relative frequencies of persons endorsing the three attachment styles (Feeney & Noller, 1990; Wallace & Vaux, 1993). In addition, several longitudinal studies have demonstrated moderate stability of adult attachment styles over an 8-month period (e.g., Scharfe & Bartholomew, 1994; Shaver & Brennan, 1992).

Indirect evidence for the endurance of the attachment bond between parent and child comes from studies in social gerontology. Although patterns may differ in stepfamilies and in adoptive families, research has shown that, in general, adult children keep in contact with their parents on a consistent basis (Connidis, 1989; Hagestad, 1987; Troll, Miller, & Atchley, 1979), and many young adults prefer to live in residential proximity to their parents (Troll et al., 1979). Although amount of contact has been found to

be a poor indicator of the quality of parent—child ties (Lee, 1985), other research indicates that the majority of adult children report feeling "close" or "very close" to their older parents, whereas only a small percentage of adult children state that they felt "not close at all" to their elderly fathers and none felt this way toward their mothers (Cicirelli, 1981). Parents appear to continue as providers of a secure base for the child well into the child's adult life, and parents continue to provide emotional and instrumental support to adult children (Levitt, 1991; Spitze & Logan, 1992). Thompson and Walker (1984) found that high levels of support were exchanged between middle-aged daughters and their elderly mothers.

When parental death occurs, the depth and duration of the grieving process bear witness to the importance of attachment between middle-aged children and their parents (Ainsworth, 1989; Cicirelli, 1991). Men and women who have experienced early parental interaction marked by infrequent availability or responsiveness are more likely to experience depression following the death of a parent (Parkes, 1991). Consistent with an attachment theory perspective, past experiences related to attachment, separation, and loss appear to influence the way in which grown children mourn their loss.

One facet of attachment that may emerge in adulthood is that of caregiving to one's parent. Research has pointed to the importance of attachment in maintaining caregiving to an elderly parent (Cicirelli, 1983, 1986, 1993). Caregiving behavior is viewed as complementary to attachment behavior, in that it functions to protect the attached figure (Bowlby, 1979). Feelings of attachment have been found to have both direct and indirect effects on adult children's commitment to provide future help to their parent (Cicirelli, 1983). In addition, reasons for helping elderly parents are more likely based on protecting the parent from need and on love for the parent, rather than on feelings of duty (Cicirelli, 1986).

Researchers have studied adult children's perceptions of early parental attachment experiences in an effort to establish a link between early experience and current reports of relationship quality with parents. Pearson, Cowan, Cowan, and Cohn (1993), for example, found a significant degree of continuity between recalled early experiences and current reports of parent-child relationships, supporting the hypothesis that the quality of early parent-child relationships forms a working model that persists over time. Pearson et al.'s findings are consistent with earlier work by Whitbeck, Simons, and Conger (1991), who investigated the influence of early parent-child relationships on contemporary parent-adult child relationships in a sample of married men and women. Adults who recalled that their parents were rejecting toward them as children were less likely to report close relationships with their aging parents.

In summary, although there have been few systematic studies of adult children's attachment to older parents, existing research does suggest that the bond between parent and child is likely to remain in effect across the life span and plays an important role in later life parent-child relations. The existence of internal working models that link past and present parent-child relationships supports the use of an attachment perspective in counseling adult children.

APPLICATIONS TO COUNSELING

Internal Working Models and Therapeutic Change

The concept of internal working models is central to the theory of attachment, and the process by which these models change is central to counseling within an attachment perspective. During times of significant change (e.g., loss of an attachment figure), an individual's working model must be modified to accommodate new information about self and others, a process which Bowlby (1988) referred to as updating working models. The extent to which working models may be updated or revised varies from person to person. Although some individuals may be open to different experiences that challenge their working models, others may be more distrustful of new experiences, thereby limiting the opportunity to revise how they view themselves and others in relationships. Certain information that is discrepant with an individual's working model may be excluded; presumably, this is information that, in the past, may have led to increased distress.

Bowlby (1980) provided the example of a child whose attempts at seeking love and attention from a parent frequently were rebuffed and viewed as weak by the parent. Such a child would learn to inhibit his affection and caring for his parent and become, to all outward appearances, a self-reliant and tough adolescent. Lacking positive responses from parents when he most needed them, he learns to exclude attachment-related information (e.g., affection, caring) that may make him vulnerable to being rejected or disappointed again. The nature of the child's early relationship becomes a model for later relationships. When faced with his mother's increased need for companionship and attention upon the death of his father, he responds by providing household maintenance but in a somewhat distant and cold manner. Although he may have many acquaintances, he has few intimate relationships that he finds satisfying. In essence, early working models reflect cognitive biases that served to solve early attachment conflicts but, to some degree, maintain the present relationship difficulties (West, Sheldon, & Reiffer, 1989). In other words, attachment theorists would view the early biased model as central to a distressed parent-adult child relationship.

More accurate models, providing more realistic information about self and others in relationship, are constructed when new information about the self and others is incorporated in the individual's working model (Kobak & Hazan, 1991). Facilitating such change in a working model is the goal of therapeutic change within an attachment perspective. Consequently, relationship adjustment between par-

ent and grown child occurs with the cognitive and affective revision of the individual's working model toward more positive and accurate expectations of self and others. For example, as an adult child begins to incorporate a view of himself or herself as worthwhile, the child is able to recognize that his or her mother's disapproval stemmed from her own life concerns and not from the child's own inability or inadequacy. This new sense of worth provides the child with the personal strength to renew his or her relationship with the estranged mother. Bowlby (1988) indicated that people vary in the extent to which their working models are open to revision.

The counselor not only must have an understanding of a client's internal models but must also attend to individual differences in attachment styles. These attachment styles reflect differences in feelings of worth and confidence, in regulation of emotion, and in the strategies that clients use to cope with their distress. Understanding these differences provides a framework for conceptualizing the client's relational difficulties as well as for guiding intervention.

Attachment Styles

The identification of a client's attachment style has been noted as an important aspect of the therapeutic process (Dolan, Arnkoff, & Glass, 1993; Pistole & Watkins, 1995). The classification of attachment styles historically has come from research in child development, particularly on work conducted by Ainsworth and her colleagues, who identified three patterns of attachment: secure, anxious/ambivalent, and avoidant (Ainsworth, Blehar, Waters, & Wall, 1978). These three styles are closely associated with differences in caregiver warmth and responsiveness (Ainsworth et al., 1978). For example, mothers of securely attached children were found to be more responsive to the crying and feeding signals of their infants, whereas mothers of anxiously attached children were inconsistent or rejecting in their responses. The three styles also have been observed in adulthood. An individual with a secure attachment style is comfortable with closeness, feels others are dependable, and is not worried about being abandoned or unloved (Collins & Read, 1990). He or she has a good sense of self-worth, self-confidence, and an ability to be expressive (Feeney & Noller, 1990). It is believed that when securely attached persons develop emotional distress, it is most often in reaction to severe life stressors or crisis (Pistole, 1989).

Anxiously attached persons have largely negative beliefs about self and others (Collins & Read, 1990), have higher anxiety in relationships, and lack assertiveness or a sense of control. Anxiously attached individuals also are characterized by dependence and by a strong desire for commitment in relationships (Fenney & Noller, 1990). Although they long for affection, these individuals often mistrust or misinterpret others' affections toward them as transient or insincere (Dolan et al., 1993). In contrast, individuals with an avoidant attachment style are characterized by avoidance of intimacy, exhibited by either disinterest or a fear of establishing close attachments (Bartholomew, 1990).

They report high levels of hostility, dismiss distressful emotions, and are sensitive to rejection (Kobak & Sceery, 1988). In addition, avoidantly attached adults tend to be highly self-reliant (Dolan et al., 1993).

Adult attachment styles have been found to be related to attachment history in theoretically expected ways (Carnelley, Pietromonaco, & Jaffe, 1994; Collins & Read, 1990; Hazan & Shaver, 1987). Securely attached adults report that their parents were warm and not rejecting, whereas adults with an anxious attachment style report that their parents were inconsistent and cold (Collins & Read, 1990). Avoidant individuals report that their parents were disinterested or rejecting and unsupportive during times of stress (Main, 1991). Avoidant adults are particularly noted for lacking coherence in their childhood accounts, often idealizing their relationships with their parents (Hazan & Shaver, 1987). Parents of avoidant adults either freely expressed negative emotion toward their child, thus leading the child to avoid interpersonal conflict, or explicitly discouraged open expression of negative emotion, with the same results (Bartholomew, 1990).

Understanding individual differences in attachment style and being aware of a client's attachment history are important to the counselor in order to determine the therapeutic needs of the client. An individual with a secure style, for example, chooses to seek support in times of distress, makes appropriate use of self-disclosure, and is open in expressing negative emotions (Mikulincer & Nachson, 1991; Pistole, 1989). Securely attached clients are comfortable in talking about their attachment histories and are able to articulate and appreciate both negative and positive aspects of them (Goldberg, 1991). In working with a securely attached client, the counselor can use fairly high levels of warmth and empathy, while also feeling comfortable in challenging or interpreting the client's responses directly (Dolan et al., 1993). The counselor provides support and direction and assists the securely attached client to reconnect with his or her strengths and prior ability to function effectively. In addition, the counselor can validate the client's emotional experiences, such as anxiety, as an expected part of the client's present situation.

Anxiously attached persons are more likely to cling to supportive relationships, to seek approval, and to be highly anxious around experiences of separation (Bowlby, 1979). A consequence of this anxiety may be that other coping efforts that may be more effective, such as talking about the concern or trying to understand the meaning of the problem, often are not used (West et al., 1989). In working with these clients, the counselor must provide an environment that is calm and consistent. Anxiously attached clients are more sensitive to confrontation, often experiencing it as criticism. While remaining sensitive to clients' reactions, counselors can use clarification and self-disclosure to help anxiously attached individuals understand the meaning of certain client-counselor interactions that may be perceived as criticism (Pistole, 1989). Seizing opportunities within the counseling session to affirm a client's competence is also

helpful because anxiously attached individuals frequently view themselves in a negative light, vacillating between strong desires for affection and mistrust of others' affection toward them.

In contrast to the secure and anxious styles, the person with an avoidant style chooses not to seek support in times of crisis and is emotionally self-contained, frequently not acknowledging feelings of distress (Bartholomew, 1990; Bowlby, 1988). In this case, the counselor needs to be particularly careful to provide the client with room to express her or his emotions and feelings when they arise without interpreting or challenging the client (Dolan et al., 1993). It may be important for such clients to maintain a sense of control over the sessions and to set clear limits on the amount of intimacy to be experienced with the counselor. Too much warmth on the part of the counselor may be viewed by these clients as an unwelcomed invitation to dependency. Others have suggested the use of the telephone as a method for regulating distance in working with highly avoidant clients (Biringen, 1994).

Identifying individual differences in adult children's attachment styles provides the counselor with greater insight into early parent—child interactions and the influence of these styles on the present manner in which adult children form relationships. Moreover, understanding individual styles provides counselors with an important basis for modifying the way they interact with their clients to enhance the client—counselor relationship.

Case Example of Bowlby's (1988) Five Therapeutic Tasks

Bowlby (1988) recognized the relevance of attachment theory to the counseling relationship and to therapeutic change, and he formulated five key tasks that he intended for use in individual, family, and group psychotherapy: (a) establishing a safe base, (b) exploring past attachments and current relational difficulties, (c) exploring the clientcounselor relationship, (d) linking the past with the present, and (e) revising internal working models. Although these guidelines are presented in a hypothesized order, Bowlby indicated that in practice they may well be interrelated, with some tasks occurring within a single session. For example, although exploration of the client-counselor relationship cannot happen without some measure of felt security on the part of the client, the establishment of a secure base may develop as the counselor and client explore the client's current relationship difficulties and past attachment

Presentation of Bowlby's (1988) five tasks is preceded by a case example of a female client who needed to address attachment issues in resolving her relationship with her father. The case, which describes an avoidant client, is a composite of the first author's clinical experience. Although the five tasks outlined are equally applicable to a securely or anxiously attached client, the reader is reminded that different attachment styles will require shifts in emphasis and intervention.

A middle-aged single mother seeks counseling because she is dissatisfied with her relationship with her father whom she has not seen for the past 2 years. During counseling, the client, Mary, downplays the importance of her relationship with both her parents and the influence of childhood experiences on her present functioning and relationship with her father. Mary speaks about her childhood in a generalized, matter-of-fact manner, indicating that hers was a happy childhood. However, she provides very little supporting detail that suggests this to be so; rather, she refers to events that point to an unhappy and stressful upbringing.

Mary's parents were frequently in conflict with each other before their divorce when Mary was in elementary school. Even though Mary was involved in several custody hearings as a child, in which she testified and expressed the desire to live with her father, the court ruled in each case in favor of the client staying with her mother. Soon after her parents' divorce, Mary's mother remarried and welcomed two additional stepchildren into the family. Mary felt further pushed aside with the subsequent arrival of a half-brother. Mary's father was described as being absorbed in his career following his marriage breakup.

During counseling, Mary defends her parents' acerbic divorce and dismisses any emotions that might arise from her experiences. She expresses distrust and anger at the counselor for not providing solutions that would help her feel closer to her father. In addition, it is noted that a point of tension between Mary and her father is her choice of partners. Mary appears to choose relationships in which her partner is unavailable for intimacy as a result of such factors as alcohol or drug abuse or competing love attachments with other women. The client's perceptions, past family history, and behavior during counseling suggest an avoidant attachment style.

Task 1: Establishing a safe base. A significant part of the counselor's role in working with a grown child is to provide a safe base for the client from which she can explore different aspects of her relationship to her parent (Bowlby, 1979). Bowlby (1988) identified the formation of a secure base as the first of the counselor's five tasks. The counselor functions to provide safety and sensitivity, qualities that were originally sought from the parent, by being "reliable, attentive, and sympathetically responsive to his patient's explorations and, so far as he can, to see and feel the world through his patient's eyes, namely to be empathic" (Bowlby, 1988, p. 140). In the case example of Mary, the counselor strives to listen empathically and to convey respect and sensitivity to her as she discloses her thoughts, feelings, and behaviors in relation to her parents and partner.

Attempts by the counselor to move Mary further into her emotions are frequently met by the client distancing herself from the counselor during the session. The counselor provides Mary with a wide margin of control in the client–counselor relationship by encouraging her to regulate the sequence of topics to be discussed and their timing. This serves to enhance rapport between Mary and her counselor. Matching counselor behaviors to client's attachment style, particularly early on in counseling, has been identified

as an important therapeutic stance in the creation of a client-counselor alliance (Dolan et al., 1993). The importance of establishing a secure base with avoidant clients should not be underestimated. These clients may be hesitant to engage in dialogue that draws attention to attachment information (Dozier & Kobak, 1992) and may terminate counseling prematurely.

The establishment of a secure base may require different amounts of time depending on the type of client attachment style. For example, individuals with an avoidant attachment style will take longer to form a bond with their counselor than those individuals with a more secure style.

Task 2: Exploring past attachments and current relational difficulties. Given that Mary wanted to reestablish her relationship with her father, the counselor's second task is to assist Mary to explore both the memories of her past relationships with her attachment figures and the current aspects of her life that are troublesome. The patterns of feeling and thought that are identified during this process may be used by the counselor to help the adult child gain a better understanding of her internal dialogue and emotions (Liotti, 1991). From this exploration, the client's inner working models of self and others may be inferred. Bowlby (1988) emphasized that the reason for encouraging a client to explore her past is to shed light on current ways of feeling and dealing with relationships. The counselor techniques involved in this process include affirming the clients' responses to the situations they describe, encouraging where there is reluctance to recall feelings or memories. and clarifying where events have been misconstrued (Sable, 1992).

Unlike the securely attached individual, who is more likely to acknowledge distress and turn to others for support, Mary dismisses suggestions that her parents' marriage and subsequent divorce had been stressful for her. She views herself as independent and downplays the importance of her past relationships with others as being significant to her present concerns. Mary's denial of negative affective experiences that would be likely to activate attachment needs serves to maintain her detached interpersonal style. The counselor recognizes Mary's ambivalence in desiring greater closeness with her father while she at times denies the importance of his relationship to her. The counselor refrains from challenging Mary on this discrepancy, as confrontation may serve to push her away. Instead, Mary is encouraged by the counselor to continue to explore issues related to her past parent-child relationships and current difficulties.

Task 3: Exploring the client-counselor relationship. Bowlby's (1988) third task for the counselor focuses on encouraging the client to examine the relationship between the two of them, on the basis that the therapeutic relationship will probably bring about the activation of the client's attachment system. Based on Mary's working models of parent and self, she will have expectations of how the counselor will likely behave or feel toward her (Bowlby, 1979).

Mary expresses a great deal of anger and distrust with the counselor for what she perceives as invasion of her experiences and being. Her avoidant attachment style incorporates an active fear of closeness because of possible rejection, as well as distress experienced because of lack of intimacy with others (Bartholomew, 1990). Such a style has in the past usually invited dominant or rejecting responses from others, thereby confirming Mary's negative working model of self and others. During the counseling process, Mary resists talking about her past experiences with her parents and chooses to focus on the counselor's lack of ability to effect change. As Bowlby (1988) wrote. "Only when the therapist is aware of the constant rebuffs the patient is likely to have been subjected to as a child whenever he sought comfort or help, and of his terror of being subjected to something similar from the therapist, can the latter see the situation between them as his patient is seeing it" (p. 143).

Bowlby (1988) indicated that clients often may shift during counseling from treating their counselor as parents to behaving toward their counselor in the same way one of their parents treated them. In Mary's case, past experiences of contempt from her father reappeared as contempt for the counselor. Bowlby (1988) advocated not only helping the client understand that his or her present feelings stem from past mistreatment from others, but also to do so with "a prolonged, quiet, and friendly patience" (p. 143).

In some cases, particularly with highly avoidant clients, examining feelings that arise in the client-counselor relationship may create counterproductive anxiety for the client. In such cases, Sperling and Lyons (1994) advocated setting aside the relationship as a focus and, instead, explore less threatening client relationship patterns. Examining a range of interpersonal relationships can still provide an avenue for identifying attachment patterns that originate from the past. In later sessions, the counselor may introduce issues related to the client-counselor relationship to test the client's ability to work with these issues. Determining whether to focus on the client-counselor relationship is based on the client's ability to tolerate the emotional intensity that may be evoked in the relationship and on time limitations imposed on counseling.

Task 4: Linking the past with the present. Past patterns that bias the construing of present relationships, like the therapeutic one, should be made explicit (Liotti, 1991). These patterns may be evident to the counselor through the client's feelings or behaviors, or through the beliefs and expectations that the client holds toward relationships. In Mary's case, the client–counselor relationship evokes similar emotions of anxiety, hostility, and sensitivity to rejection that were experienced in her early relationship with her father. The counselor helps her link her present expectations of the counselor (i.e., as someone who will be rejecting or criticizing) to past experiences with her parents, and by so doing provides new information that may disconfirm previous expectations. Bowlby (1988) described this task as a painful process. It may involve the expression of strong

emotion by an adult child as she considers all possible ideas or feelings about her parents that were previously regarded as inconceivable or unthinkable. The awareness of feelings, such as sadness or anger, is a step toward understanding the sources of these emotions (West et al., 1989). Helping the client to access and explore her emotions may be facilitated through the use of experiential interventions, such as the use of metaphor or drawing.

In the case example, the counselor and Mary need to explore Mary's expression of anger, as well as her dismissal of parental relationships and her withholding of emotions that are attached to her early experiences (Pistole, 1989). The counselor seeks to assist Mary to manage her anger by increasing Mary's awareness of her feelings, by validating her emotion, and by moving from emotional recognition to a cognitive understanding of the source of her distress. Furthermore, the counselor serves to demonstrate to Mary appropriate emotional expression within the context of their relationship. The counselor avoids rebuking or challenging Mary's emotion, for in doing so the counselor would be reinforcing the client's working model of others as rejecting (Pistole, 1989). By engaging in an alternative way of relating, based on acceptance, the counselor provides Mary with disconfirming information that challenges her beliefs about relationships. The client will experience herself within the therapeutic relationship as secure and not rejected. This change in her working model of self will enable her to feel safe exploring earlier emotions and behaviors related to attachment experiences. For Mary, this may include not only her parental relationship but also her relationships with other men that form a point of contention between her and her father.

Task 5: Revising internal working models. The final task of the counselor is to aid clients in understanding that their internal models of self and others created from past parental experiences may not be appropriate to their current situation (Bowlby, 1988). By exploring the nature and origin of her working models, Mary can gain insight and understanding into how she perceives the world, herself, and her actions (Bowlby, 1988). She is then in a position to consider the adequacy of these working models, and the behaviors and actions to which they lead, in light of her current experiences with the counselor and significant others. By pointing out differences in Mary's various attachment figures (i.e., among her father, partner, counselor), she may reflect on the adequacy of earlier models of self and others and whether they are accurate in light of her current experiences with others, particularly the counselor. Mary's avoidant manner may have been appropriate in the past, by preventing the expression of attachment needs that led to hostility or withdrawal on the part of her parents. However, her current avoidant behavior prevents the possibility of developing satisfying close relationships. As her parents' reactions to her are separated from those of the counselor's, Mary is provided with disconfirming information about herself as rejected and about others as distrustful. This new attachment information (i.e., that she is competent and

worthwhile and that others like her counselor are trustworthy) serves to update or revise the negative working models of herself and others. Over time, Mary is able to recognize that her parents' divorce was a result of their inability to get along well before her birth, and not because of her being unlovable.

Bowlby (1988) encouraged counselors not to pass judgment on clients' parents as clients' past attachment experiences unfold, but to provide opportunities for clients to consider why their parents may have behaved the way they did and what childhood experiences their parents may have had. In due time, as Mary explored her parents' relationship, she was able to link her father's lack of closeness to her, and his tendency to criticize and blame others, to his own upbringing. Mary's grandfather died when her father was 4 years of age. Unable to support a family, Mary's grandmother left her father in a boarding school when he was 5 years old. Mary recognized that it was equally difficult for her father to form attachments to others, and that even though he was still critical of her, she was able to attribute this to his own attachment history. Mary's goal of regaining a relationship with her aging father was revised as her internal working models incorporated more positive information about self and others. Toward the end of counseling, she had begun to arrange a time when she and her child could visit her father. Although she recognized that her father might not change in the way in which he relates to her. Mary became more accepting of herself and less reliant on her father's view of her. Upon termination of counseling, she had ended her relationship with her current boyfriend and optimistically looked forward to establishing a more trusting and intimate relationship in the future. The client, through the therapeutic relationship, was able to accommodate discrepant information about self and others (e.g., self as lovable and competent; others as trustful and loving) and, by doing so, to update her internal working models to reflect a more accurate view of herself and others (particularly her father) in relationships.

IMPLICATIONS AND CONCLUSIONS

Attachment theory is most clearly applicable to client struggles involving emotionally important relationships (Bartholomew & Thompson, 1995; Pistole & Watkins, 1995). The case example of Mary provides an opportunity to view the application of attachment to an older parent–adult child issue, namely that of an unresolved relationship. Attachment theory may not be useful as a framework for counseling all clients, particularly because little is known about the parental experience of attachment to the child (Bretherton, Biringen, & Ridgeway, 1991), and counselors are cautioned to consider this aspect of the older parent–adult child relationship. However, attachment theory can provide a counseling framework for issues that are important to grown children in relation to their older parents, such as caregiving, loss of parent, parent–child conflict, later life paren-

tal divorce and remarriage, and elderly parental substance abuse.

Given the emphasis in attachment theory on the use of the client-counselor relationship to effect change and on internal working models, a number of different counseling approaches can be used for each task that are complementary to an attachment-centered focus. For example, the development of a secure base requires the basic counseling skills of empathy, unconditional positive regard, and genuineness—skills that have been exemplified in the works of Carl Rogers (1962) and others. The counselor's focus on the historical origins of a client's attachment pattern is central to a developmental constructivist perspective that emphasizes the exploration of early attachments through developmental questions, life review, or journal work (Lyddon & Alford, 1993; Mahoney, 1988). Bowlby's (1988) third task involving the examination of the client-counselor relationship requires a counseling approach that includes the use of advanced counseling skills, such as immediacy and self-disclosure. Finally, the revision of internal working models is not incompatible with some of the goals of cognitive therapy in helping clients to change their cognitions about self and others (McMillen, 1992). Although Bowlby also emphasized the awareness and integration of affect, specific cognitive techniques such as focusing on self-talk may be used within an attachment-based counseling approach.

Applying an attachment perspective to the older parentadult child dyad not only provides a framework with which to counsel effectively but also represents a step forward toward filling in the theoretical gap that exists in later life parent-child research. Foremost in the consideration of applying an attachment theory perspective to research on older parent-adult child relationships is the need for greater consistency in the definitions and use of measures to assess attachment. Current available measures differ in their approach to attachment issues that limits the development of an integrated body of research. For example, the Adult Attachment Scale (Cicirelli, 1995) assesses the strength of an adult child's current attachment to the mother, whereas the Adult Attachment Interview (Main, Kaplan, & Cassidy, 1985) measures a generalized attachment style based on retrospective reports of avoidant, anxious/ambivalent, and secure attachments in childhood. Both of these measures have been used in research on older parent-adult child relationships (Cicirelli, 1993, 1995; Pearson et al., 1993).

Applying attachment theory to the understanding of counseling process is a second potential area of research in addressing adult child issues. Research that explores the way that the counselor's or client's attachment patterns may influence the client—counselor relationship has only recently begun (Pistole & Watkins, 1995). For example, client memories of their early attachments with parents have been found to be significantly associated with current client ratings of the working alliance in counseling (Mallinckrodt, 1991). As yet, we know little about how internal working models are modified over time or what kinds of

interventions or approaches work best with different attachment styles. In addition, little work has been done that looks at the revision of working models in older fatheradult son relationships (Chornesky, 1992). The validity of an attachment perspective also needs to be examined for its applicability to adult children from different cultures.

A conceptual framework of attachment can also be applied to family research as a third area of investigation. Cicirelli (1993) used attachment theory as a framework for explaining daughters' motives in caring for elderly mothers. Future research could address how different styles of attachment may be related to the ways in which adult children do or do not provide care and their satisfaction with caregiving. In addition, researchers have begun to make associations between adult attachment patterns and specific coping strategies (Lopez, 1993; Mikulincer, Florian, & Weller, 1993), associations that provide a potential avenue for investigating the ways in which adult children respond to the stress of parental caregiving needs. Finally, Bowlby's (1980) work on loss can be applied to adult children's interpersonal experiences of grief, including terminal illness, loss, or divorce of a parent. Given the significance of attachments in the lives of adult children, researchers and counselors alike will surely benefit from having additional perspectives to assist clients with the resolution and repair of their parent-child relationships.

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