A LINE ON LIFE

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Bonding with Caregivers *

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At birth, the child's physical attachment to the mother ends. That is when emotional attachment begins. Psychological research in the 1950s indicates that the **primary caregiver** – usually the biological mother – is very important. The primary caregiver can become a "*safe base*" for secure babies, so they can explore their environment.

comfort. **Insecurely attached** babies seek the same comfort, but they are less assured by mother's presence. The quality of attachment profoundly effects later development.

For twenty years, psychologist Alan Sroufe (Institute of Child Development, University of Minnesota) studied a group of 180 disadvantaged children. He was concerned with mother-infant attachments – especially how they effect the children's success in school, their peer relationships and their responses to life stresses.

Children in Sroufe's group led unstable lives. However, those with secure mother-infant attachment were more likely to:

- be self-reliant,
- have lower rates of mental disorders,
- do well in school (especially in math),
- have good peer relationships.

These differences were found to continue into adolescence. Sroufe believes that a secure attachment increases the child's confidence. In turn, this confidence helps the child in other areas.

Sroufe's group had more stress and less social support than the typical middle-class family. Although secure infant attachment helps, it cannot completely counteract the effects of family instability. According to Sroufe, "*Kids who had secure attachment histories but suffer losses will become less secure*." On the other hand, anxious, poorly attached infants can become more secure, if their mothers' become less depressed or develop stable love relationships.

Also from the Institute of Child Development, psychologist Megan Gunnar explored how the mother-infant attachment related to infants' stress reactions to novel events. Stressful reactions change the infants' levels of a stress hormone, **cortisol**, found in their saliva. Seventy-seven 18-month-old infants were exposed to a live clown, a robot clown, and a puppet show. With each situation, mothers were told to allow the child to interact or retreat on its own for the first three minutes. During the second three minutes, the mothers were instructed to comfort their children.

There was no increase in cortisol with children who approached the stimuli without fear. However, inhibited children seemed afraid and would not approach the stimuli. Their cortisol levels varied with the amount of attachment with their mothers. With secure attachment, cortisol levels did not increase. In contrast, inhibited children with insecure attachments showed increased cortisol.

Mothers responded differently to the inhibited children's distress. Those who had secure attachments had little trouble in calming their children. They had established a positive history of interaction with their children. In contrast, mothers with insecure attachments had to work hard to reduce the fear in their children. Gunnar said, "*They seemed to think it was their job to change the child, to make the child look bold*."

More recently, Gunnar studied 60 toddlers who were getting inoculations from a physician. Again, only the fearful, insecure children had increased cortisol in their saliva. Gunnar concludes that secure attachments absorb the anxiety from strange or scary events. Without this buffer, children suffer more from the stress.

"The secure children seemed to be saying, 'This is scary but I feel safe.'"

What happens when children don't develop a bond? In 1994, an experiment was conducted with cortisol levels in 60 Rumanian orphans. In Rumania, many mothers cannot care for their children. As newborns, the children are often sent to orphanages. In the orphanages, one adult tries to care for 20 orphans. With the Rumanian orphans, cortisol levels increased from morning until noon. After that, they decreased only slightly. In contrast, with typical children in the United States, cortisol levels reach their highest point in the morning and decrease as the day continues.

Similarly, some rhesus monkeys were raised with "*surrogate mothers*" – made from wire frames covered by cloth, a poor mother substitute. Their cycles of cortisol production were similar to that of the Rumanian orphans. Gunnar repeated the monkey experiment, but she kept the monkeys' environment extremely tranquil. Normal daily activities that might upset the monkeys were stopped. Under the tranquil conditions, the monkey infants produced normal cortisol cycles. However, for these monkeys, even normal stimulation seemed to cause stress. Without the normal mother-infant attachment, they were unable to cope even with ordinary events.

In several studies at UCLA, psychologist Carollee Howes explored the children's attachments with primary caregivers beside the mother. The attachments of children with primary caregivers were very similar to those with the mother. However, 70% of mothers formed secure attachments, while similar attachments were only found with 50% of other primary caregivers. This may indicate less closeness and quality of caregiving.

In one study with 48 4-year-olds, Howes found that peer interactions could be better predicted from attachments to child-care providers than to the mothers. With secure attachments to teachers, these preschoolers were more sociable and gregarious, engaging in more play with their peers. With insecure attachments to teachers, children were more hostile, aggressive and withdrawn.

This indicates that children who have high-quality care can still develop deep emotional attachments to their caregivers. Whether positive bonding develops with the mother or another caregiver, it can still make children feel secure enough to face problems of everyday life.

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* Adapted from Beth Azar's "The bond between mother and child," *The APA Monitor*, September, 1995, page 28.