

Introduction: Attachment Theory and Psychotherapy

Kenneth N. Levy

Pennsylvania State University

In this introduction to the *JCLP: In Session* 69(11) issue on attachment theory and psychotherapy, the key points of attachment theory (Bowlby, 1969, 1973, 1981) and its relevance to psychotherapy are briefly described. The aim of this issue is to provide case illustrations of how an attachment theory perspective and principles can expand our understanding of psychotherapy practice. © 2013 Wiley Periodicals, Inc. *J. Clin. Psychol.* 69:1133–1135, 2013.

Keywords: attachment; psychotherapy; treatment

John Bowlby's attachment theory (1969, 1973, 1981) is one of the most influential perspectives on lifespan development with implications for not only understanding personality and psychopathology but also psychotherapy processes and principles. Although Bowlby was a psychiatrist, psychoanalyst, and psychotherapist, much of the research on attachment theory has been carried out by developmental and social psychologists and has focused on normative aspects of attachment. However, from its inception, Bowlby conceptualized attachment theory as relevant not only to both normal and psychopathological development but also for psychotherapy in particular.

Attachment theory evolved from Bowlby's interest in diverse scientific disciplines, including psychoanalysis, ethology, evolution, and cognitive and developmental psychology. He integrated principles from each of these areas to explain affectional bonding between infants and their caregivers and the long-term effects of early attachment experiences on personality development, interpersonal functioning, and psychopathology. Bowlby postulated that the attachment system was operative throughout the life-span—from the cradle—and across a wide variety of relationships, including the therapeutic relationship (Farber, Lippert, & Nevas, 1995).

As noted above, Bowlby believed that attachment theory had particular relevance for psychotherapy. He suggested that the chief role of the therapist is “to provide the patient with a temporary attachment figure” (1975, p. 191). He felt that doing so would “provide the patient with a secure base from which to explore both himself and also his relations with all those with whom he has made or might make, an affectional bond” (1977, p. 421). In this spirit, Bowlby (1988) formulated five key tasks for psychotherapy: (a) establishing a secure base, which involves providing patients with a strong internal felt sense of trust, care, and support, which in turn allows patients to more fully and safely explore the contents of their mind, even those aspects that are difficult or painful to consider; (b) exploring past attachment experiences, which involves helping patients reflect upon and discuss past and present relationships, including their expectations, feelings, and behaviors in these contexts; (c) exploring the therapeutic relationship, which involves helping patients examine the relationship with the therapist and how it may relate to relationships or experiences outside of therapy; (d) linking past experiences to present ones, which involves encouraging awareness of how current relationship experiences may be related to past ones; and (e) revising internal working models, which involves helping patients feel, think, and act in new ways that are unlike how they felt, thought, and behaved in past relationships. A sixth function can also be articulated—to provide a safe haven, a place the patient can “go” or “envision” in times of distress.

In addition to these tasks, the attachment behavior or patterns observed in patients can affect the therapist and influence the therapeutic process. Moreover, the patient's attachment pattern

Please address correspondence to: Kenneth N. Levy, Department of Psychology, 362 Bruce V. Moore Building, Pennsylvania State University, University Park, PA 16802. E-mail: klevy@psu.edu

can influence or moderate the relationship between the therapist's interpersonal style or skills and the usefulness of specific techniques. That is, techniques that might be useful with one type of attachment pattern might be problematic with another pattern. Thus, in addition to direct effects on process, different attachment patterns may also have moderating and additive effects on the therapist or the patient's experience of the therapist or techniques.

Each of the articles in this special issue highlights the relevance of various principles from attachment theory and/or the influence of various attachment patterns on the process and outcome for clinical work with a wide range of psychological difficulties (e.g., narcissistic personality disorder, dissociative disorder, problems with social media) across diverse treatment approaches (e.g., transference-focused psychotherapy, cognitive-analytic therapy). What is particularly valuable in the current set of articles is the use of clinical material to illustrate these dynamics in ways that resonate with clinicians and can be applied to clinical practice.

Giovanni Liotti presents a complicated case of an adult patient who experienced complex trauma as a child, illustrating the ways such traumas can result in significant interpersonal anxiety when attachment-related thoughts or feelings are evoked in close relationships. Liotti, through the nuanced presentation of clinical material, shows us how these dynamics can play out in the relationship between the patient and the therapist and how the therapist's use of attachment principles can help provide the patient with a safe haven and secure base from which to explore seemingly dangerous psychological states. This article is followed by an exquisite case presentation by Diana Diamond and Kevin Meehan of a man with narcissistic personality disorder. The case begins with the patient declaring that the therapist cannot provide any insights not already known and that he is seeking treatment to have a mere sounding board for his own ideas. This defense against letting others "in" or close is also prominent in his life outside the consultation room. Through sensitive attention to these attachment dynamics, the therapist is able to understand their implications for the therapy process and titrate interventions for maximum impact.

Charles Gelso, Beatriz Palma, and Avantica Bhatia provide a different lens on the effect of attachment on psychotherapy process by focusing not only on transference-countertransference dynamics, but also on the patient's experience of the real relationship with the therapist. Once again, we are treated to a sophisticated case conceptualization based on an attachment perspective as well as an illustration of how the therapeutic process is influenced by attachment dynamics. There are some provocative clinical issues raised by the juxtaposition of the Diamond and Meehan paper with that of Gelso et al. Gelso et al. emphasize the importance of exploring the past, whereas Diamond and Meehan stress the importance of staying in the here and now. Additionally, the two cases illustrate different transference reactions related to attachment patterns. Although both patients exhibit transference resistance, Diamond and Meehan's patient shows little conscious awareness of the transference and avoids talking about the therapeutic relationship. This type of reaction can be viewed in terms of the patterns typical of patients with strong tendencies toward dismissing avoidant attachment. In contrast, Gelso et al.'s patient can discuss the transference; however, he avoids awareness of his feelings, including their possible connections to unresolved conflict. This pattern is more typical of those with preoccupied or fearful attachment.

Cheri Marmarosh and Giorgio Tasca provide an exceptionally clear understanding of a patient embedded in a group process. Their case presentation is particularly valuable inasmuch as most attachment-related conceptualizations and clinical case material focus on individual cases rather than group process—a pattern that overlooks the fact that group processes are extremely relevant to the elicitation of attachment dynamics. It is in this group context that we can see how the therapist provides bids for reflection to facilitate the patient's reflection on her internal world, a world that the patient clearly experiences as quite scary. Finally, George Nitzburg and Barry Farber provide a timely paper examining how attachment patterns in adolescents and young adulthood may influence the use and experience of social media. This is an increasingly important topic given how intertwined our lives have become with social media. This unique case presentation illustrates the breadth of attachment's impact.

It is my hope and expectation that the papers in this exciting issue provide the reader with new and useful ideas on how attachment theory can be used to assess, conceptualize, and treat

a wide range of patients and psychological difficulties. As the papers in this issue well attest to, attachment theory is a powerful and continually evolving perspective on understanding and helping patients.

Selected References and Readings

- Bowlby, J. (1969). *Attachment and loss: Vol. 1. Attachment*. New York: Basic Books.
- Bowlby, J. (1973). *Attachment and loss: Vol. 2. Separation: Anxiety and anger*. New York: Basic Books.
- Bowlby, J. (1980). *Attachment and loss: Vol. 3. Loss*. New York: Basic Books.
- Bowlby, J. (1988). *A secure base: Parent-child attachment and healthy human development*. New York: Basic Books.
- Diamond, D., & Meehan, K. B. (2013). Attachment and object relations in patients with narcissistic personality disorder: Implications for therapeutic process and outcome. *Journal of Clinical Psychology: In Session*, 69, 1148–1159.
- Farber, B. A., Lippert, R. A., & Nevas, D. B. (1995). The Therapist as attachment figure. *Psychotherapy: Theory, Research, Practice, Training*, 32, 204–212.
- Gelso, C. J., Palma, B., & Bhatia, A. (2013). Attachment theory as a guide to understanding and working with transference and the real relationship in psychotherapy. *Journal of Clinical Psychology: In Session*, 69, 1160–1171.
- Liotti, G. (2013). Phobias of attachment-related inner states in the psychotherapy of adult survivors of childhood complex trauma. *Journal of Clinical Psychology: In Session*, 69, 1136–1147.
- Marmarosh, C. L., & Tasca, G. A. (2013). Adult attachment anxiety: Using group therapy to promote change. *Journal of Clinical Psychology: In Session*, 69, 1172–1182.
- Nitzburg, G., & Farber, B. A. (2013). Attachment, adolescence, and social media. *Journal of Clinical Psychology: In Session*, 69, 1183–1190.