

Inquiry: Foundation years and the UK Government's life chances strategy.

This submission is from Robin Balbernie, Consultant Child Psychotherapist and Clinical Director of PIP UK. It is made on behalf of PIP UK and examines the early years precursors to educational engagement and later, long-term, life chances. PIP UK is a charity committed to providing clinical services to vulnerable families over the period covered by the '1001 Critical Days' campaign.

Summary.

- Starting life with secure attachment gives the growing child the best possible internal assets for making the most of the educational system and subsequent career choices.
- Insecure attachment is a lifelong risk factor for problems with learning, relationships, later parenting and career choices, as well as for issues with emotional and mental well-being.
- The most serious form of insecure attachment, known as 'disorganized', constitutes a threat to all domains of development and social engagement.
- Early intervention, building the secure pre-verbal foundations for the child's future, is an essential component of any education strategy that aims to break the cycle of deprivation and create a more equal society.

Submission.

1. The capacity of children of all ages, but especially when very young, to engage with the academic system depends to a large extent on the quality and content of the relationship they have with their parents or other caregivers. This caregiving relationship and its consequences has been researched within the paradigms of attachment theory and neuroscience, with converging evidence to show that the pre-verbal foundations of the

personality may have both positive and negative life long consequences.

2. Attachment theory and research, together with fairly recent advances in neuroscience, provide an insight into the importance of everyday relationships, how these mediate between universal human biology and idiosyncratic individual psychology, and the effect of early experiences on behaviour much later on in life. Bowlby defined attachment as: “any form of behaviour that results in a person attaining or maintaining a proximity to some other clearly identified individual, who is conceived as better able to cope with the world” (John Bowlby (1988) p. 26 *A Secure Base*. London: Routledge). From the small child’s point of view this can be either mother, father or, when needs must, some trusted alternative caregiver. The attachment system is an inherent motivational force coded in the genome. The function of such behaviour is to ensure that the relatively helpless and vulnerable infant first of all remains safe by being (hopefully) protected and nurtured by his or her parents. Next, as development proceeds, the physical closeness powered by the attachment system ensures that the growing child becomes dynamically embedded within those significant family relationships that structure both the internal and interpersonal worlds. It is through these relationships that the resources of language, education, culture and society are placed at a child’s disposal; and the readiness to make use of these depends on quality of attachment since secure children are ready to explore on all levels in all ways. In the context of human evolution attachment behaviour has been ‘reused’, in favourable instances, to ensure group cohesion, the learning of social and cognitive skills, identity formation, confidence, resilience and self esteem; all different from attachment but absorbed within the boundaries of attachment relationships.
3. Although secure attachment is a psychological asset, it does not invariably confer psychological immunity, although it does lie behind the ability to ‘self-repair’ and be open to alternatives when things go wrong. But all forms of insecure attachment are a risk factor that will have an adverse

effect on development and subsequent behaviour when combined with those other stresses, or outright traumas, that may be encountered in the course of life. A common example of this is the transition phase of adolescence. This is the time when the pre-frontal cortex finishes wiring up so that responsible forethought, coupled with an acceptance of personal responsibility and an ability to resist impulses can become more or less taken for granted. Educational and career success depends on these capacities. What happens in this second phase of identity formation will depend to a large extent on the foundations laid down in those first 1001 critical days of existence when the infant is discovering a sense of separate self for the first time.

4. Attachment behaviour revolves around the child's creation of the best strategies for proximity to the specific caregiver in order to attain felt security. The newborn child immediately begins to structure his or her internal world to coincide with the emotional conditions of their life as created by the parents; babies are adapted to adaptability, but the baby can only adapt to the immediate family, there are no alternatives. Which is why, when the caregiving relationship is under duress, babies cannot wait. Insecure attachment is a survival strategy that in the long term works against the child's best interests.
5. A child has a sense of confidence and self-esteem, derived from internal security, if his parents appreciated how he felt and responded appropriately in a way that communicated a sense of being understood and thus 'held' in a safe way. The development of secure attachment depends more upon parental attitudes, empathy and self-awareness than any catalogue of 'correct' parenting techniques. Every parent first learnt these a generation ago, and unless challenged parenting is usually just an unquestioned replay of how they were parented. Internal working models of relationships (the software of everyday living) are built upon the general quality of day-to-day emotional contact with all its usual ups and downs. When the parents come from a conflictual early childhood

themselves then their 'taken for granted' mode of caring for their baby may slide unknowingly into maltreatment; and the aim of PIP UK is to offer preventative services that engage with vulnerable parents before this occurs.

6. The foundations of a later secure attachment are laid down by sensitive and appropriately responsive parenting in the first six months of life, preferably with both parents. To begin with the baby cannot survive without an emotional exoskeleton and the parent, in a manner of speaking, takes on the responsibility of acting as an auxiliary cortex. With neurological maturation the infant gains, or rather imports, new abilities and puts them to use. By about six months of age the frontal lobes begin to form neural networks, in particular the upper portion known as the dorsolateral prefrontal cortex, which is the area of the brain responsible for short-term memory; and also the limbic system, which holds the programme for emotional interpretation and response, is wiring up at full swing. Brains are designed to adapt to relationships; if the initial caregiving relationship is over-stressed (which includes neglect) during the period of maximum neuroplasticity then this will be reflected in the architecture of the developing brain (<http://developingchild.harvard.edu>).

7. Early influences exterior to the infant seem to have the greatest impact as the processes of physical and psychological growth continue to respond to the family setting. The first months and years of life set in place the child's inherent emotional strengths and weaknesses, these are open to be modified in either direction to a certain extent depending on such things as life events and family continuity. It is never too late to offer help, whether or not this will be accepted will depend on personal circumstances. Both positive and negative influences will have the most impact on an uncluttered mind. The most cost effective period to intervene is during pregnancy and up to age two (<http://heckmanequation.org/content/resource/heckman-curve>).

8. In the very worst case of insecure attachment the child's personality becomes organised around survival rather than love. This 'disorganised' attachment is the most severe type of insecure attachment. There is no coherent internal working model beyond a hair trigger stress response, just messy sediments of past grief, fear and confusion. Disorganized attachment most frequently occurs when the very small child is unable to have his or her attachment anxieties soothed by a caregiver, so the attachment system is on constant high alert and at the same time the child never gains the slightest confidence that comfort will be available on a regular basis. In high-risk situations the caregiver is actually the source of fear, so comfort and crisis management are a contradiction wrapped up in the same person. The commonest situations where this is found are when there is any form of maltreatment within the family, or when the child hardly ever gets a lively and reassuring response such as when the parent has given up in despair (for many possible reasons) or is seriously out of control with the child's needs due to mental illness. These children have experienced 'scaregivers' and the paradox was mentally unendurable. All efforts to cope with internal or external tensions become overwhelmed by disruptive emotions that appear out of nowhere as they derive from an unpredictable emotional background. New caregivers, such as teachers or nursery staff, find themselves perpetually reacting to crises as the child reacts to them on the basis of memories that have become expectations.

10. Children and adults with disorganized attachment have to manage the ups and downs of the rest of their life with a dysfunctional set of responses for dealing with stressful situations (including being a parent). Disorganized attachment is ubiquitous across all socio-economic groupings. Those in poverty get taken into care while those with financial backing get driven to boarding school; each may go on to seek to control others, but by different means. The percentage of infants classified as disorganized is 14% in middle class non-clinical groups and 24% in low socio-economic samples. In studies of maltreated infants the proportion

with disorganized attachment appears to be between 80 and 90%. Infants may show disorganized attachment with one caregiver and not the other. It is now accepted that: “severely compromised attachment histories are ... associated with brain organizations that are inefficient in regulating affective states and coping with stress, and therefore engender maladaptive infant mental health” (Schoore, A. N. (2001) p. 16. *Effects of a secure attachment relationship on right brain development, affect regulation, and infant mental health*. Infant Mental Health Journal. 22, (1-2), 7-66). Early intervention, as supported by PIP UK, should target those family dynamics, which may not be immediately obvious, that may become a precursor to disorganized attachment since this is often a forerunner of later psychopathology.

11. Disorganised attachment is a major risk factor that can disrupt many different areas of development; it is predictive of the development of behavioural problems at preschool and school age in both high-risk and normal samples. Studies indicate that both externalizing and internalizing symptoms characterize the behaviour problems of disorganized school-aged children between 5 and 9 years of age. Although at preschool and early school age it is primarily an aggressive and disruptive behaviour pattern that is associated with disorganized attachment, it has been observed that anxieties and fears related to performance, abilities, and self-worth become more pronounced in middle childhood. Disorganised attachment predominates in children referred to CAMHS, and is almost an invariable feature of children in the care system and those at the time of adoption. Children who have been assessed as having disorganised attachment at 5-7 years mess up their education and disrupt that of others; they have poorer skills at maths age 8 and show impaired formal operational skills and self-regulation at 17 years of age. All insecure children have compromised self-esteem; it is hard to feel loveable if you did not feel unconditionally loved by your parents. Such children lack confidence and so may prefer to fail, as they expect to, by doing nothing rather than after making an effort. Also, play and curiosity are impossible

when the attachment system is on high alert so learning anything but survival skills goes out of the window; they become emotionally and scholastically illiterate versions of Bear Grylls – scary - and a fat lot of use in terms of contributing in to society.

12. Even when placed with specialised and dedicated substitute parents the child from a background of disorganized attachment frequently continues to evade being looked after while often behaving as if carers are still a source of neglect or danger, which feels very unpleasant to those on the receiving end. This defensive behaviour will be generalised out to surrogate carers such as teachers. The best solution to this old but inescapable (without therapy) emotional dilemma is to remain in control by any means possible; and having learned both by example and experience they can be bossy, angry, nasty, violent (aggression is a natural reaction to insecurity), seductive and confrontational – among other things. They fail in school and cause vast amounts of collateral damage throughout their school and subsequent life.

13. Research that has examined the academic career of children as correlated with their security, or not, of attachment has reached a number of conclusions, based for the most part on longitudinal studies, and backing up educational research that has concluded that a lack of parental support is a major cause for children arriving at school “predisposed to nonparticipation and nonidentification” and very prone to future drop out (Finn, J. D. (1989) p. 130. *Withdrawing From School*. Review of Educational Research, 59, 117-142). In terms of the ability to fully function under the everyday pressures of the school environment the child’s attachment quality will have an influence on:
 - a) their cognitive availability, or openness to teaching without internal distractions, secure children have the capacity for symmetrical communication, learned and taken for granted in the home;
 - b) their wish to be curious and playful, plus the capacity to self-regulate, show frustration-tolerance and be tenacious – which

includes paying attention when interested (task focused), secure children are more able to manage stress and so free up time and motivation to be captivated by their subject and they are also more compliant with instructions;

c) their capacity to make supportive friends and develop a positive social network as they travel through life, secure children generally have more harmonious relationships with both peers and mentors; their ability, and willingness, to co-operate with others (including teachers) when appropriate, and secure children tend to treat standardized tests as games and not get too anxious, this lack of anxiety also means they are better able to comply with the demands of the (new) school situation. A better quality relationship with teachers is a major component of academic self-concept.

Conclusion.

14. If the first two years of life are cradled within secure attachment then the growing child feels good about him or herself, can appreciate the feelings of others and see their point of view, is able to take full advantage of education and has inherent psychological resiliency to fall back upon in times of stress. At the other end of the spectrum, the infant with disorganised attachment, who has often suffered abuse or neglect, will become the child who cannot trust relationships, who has no empathy for people or respect for social rules, who disrupts, attacks and tries to dominate what may be on offer in both the family and school, and who might well be seriously vulnerable to later emotional and mental health problems. And furthermore, most importantly, these patterns of behaviour stand a good chance of being passed on to the next generation as the attachment experiences of infancy cut the template for the caregiving behaviours of adulthood. Early intervention is an effective way of beginning to break the cycle of insecure attachment as it takes advantage of both the neurological plasticity of the baby and the fluid dynamics of a family in the process of adapting to a new member. Leave it

too late and both the structure of the brain and family interactions become increasingly established and consequently harder to change.