



PROJECT AIR
A PERSONALITY DISORDERS STRATEGY

Attachment, BPD and the Structural Dissociation of Personality

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Early Life Experiences and the development of Personality Disorders

- » Broadly speaking, there are two interrelated factors that contribute to the development of people's personality, and therefore, to the development of personality disorders:
 - » 1) biological factors, meaning people's genetic make-up and temperament, and
 - » 2) environmental factors, meaning people's life experiences, particularly early childhood experiences.
- » Although it is simpler to discuss these two factors separately, many experts believe they cannot be understood independently from one another.
- » People's genetics and their early life experiences interact in complex ways to influence the development of their personalities and subsequently, their vulnerability to the development of personality disorders.



Temperament and early experiences

- ▶ Babies' temperaments are generally assumed to be genetically determined but this is just a starting point since babies do not grow up independently.
- ▶ Babies are quite dependent upon their caregivers for their very survival and the interactions with parents and other caregivers are very relevant.
- ▶ The emotional tone of social interactions with caregivers is shaped by the "fit" between babies' temperaments and parents' personalities.
- ▶ These interactions influence the development of babies' personalities.



Temperament and early experiences

- ▶ Children's temperaments influence how their caregivers respond to them.
- ▶ Highly sensitive, reactant babies will elicit a different response from their environment (caregivers) than less reactant, more even-tempered babies.
- ▶ For example, a calm and placid baby is more likely to get picked up and cuddled more affectionately than an anxious and irritable baby.
- ▶ These different environmental responses will, in turn, affect the emotional development of each child.



Temperament and early experiences

- ▶ Well-matched sets of infants and caregivers are characterized by an abundance of positively-toned interactions between caregiver and child.
- ▶ These pleasant emotional exchanges are thought to produce fewer negative personality outcomes.
- ▶ In contrast, poorly-matched sets, characterized by an abundance of negatively-toned interactions, with unpleasant emotional exchanges, predict a more negative effect on personality development.



Concept of Attachment

- ▶ Refers to the bond between the child and the attachment figure (generally the primary caregiver).
- ▶ Its most immediate goal is seeking and maintaining proximity in moments of threat in order to obtain security, comfort, and protection.
- ▶ The way in which these bonds are established will determine the patterns of interpersonal connection in the adult.



Evolution of the Concept of Attachment

- ▶ The concept of attachment describes the dynamics of the relationships between human beings.
- ▶ The term was initially used to describe the interactions between the child and his or her caregiver.
- ▶ Bowlby (1969) pioneered these studies, followed by Mary Ainsworth (1978), who described the secure, avoidant and anxious subtypes of attachment behaviors.
- ▶ Disorganized attachment was described later on (Main & Solomon, 1986).
- ▶ In the 80's the theory expanded to adult attachment.



Attachment and emotional regulation

- ▶ Our concepts of the world and ourselves are generated in this first relationship, as well as the feelings of **basic safety**, anguish, and anxiety.
- ▶ This attachment bond will continue to exist in adulthood through the internalization of a certain style of **emotional regulation**.
- ▶ Through repetitive interactions between child and caregiver, **patterns of relationship** with the self and others are established.



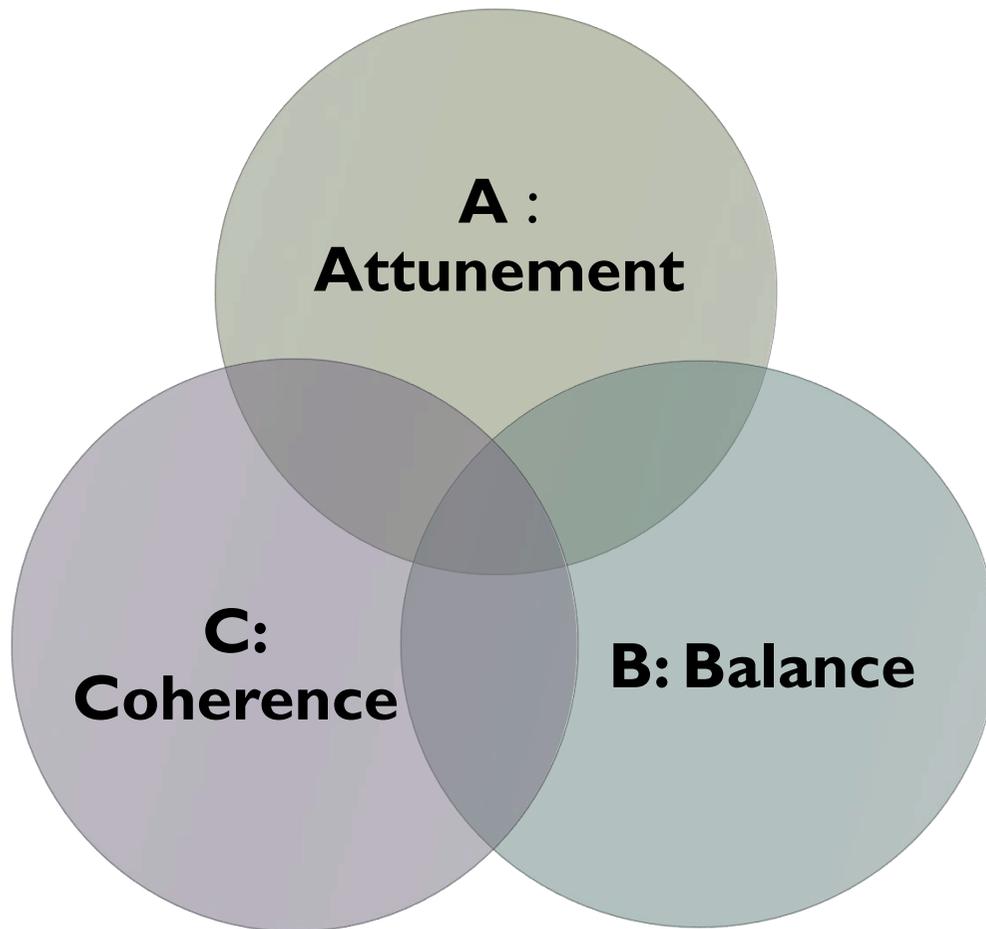
The Caregiver's Response

- If caregivers can adequately interpret the demands of the baby, they will be able to offer adaptive, safe, and positive responses for the emotional development of their children, who will feel capable of moving forward and exploring.
- Parents whose response is mediated by their own fears and negative emotional experiences will seriously affect their children's ability to be and feel able of dealing with life.



THE ABC OF ATTACHMENT

(Siegel & Hartzell, 2004)



- » **A (Attunement):** The internal state of the parent is attuned to the internal state of the child. This usually goes along with nonverbal contingent observable signs.
- » **B (Balance):** The child balances and regulates his body, emotions, and mental states through attunement with the caregiver.
- » **C (Coherence).** The sense of integration the child acquires through the relationship with the parent will make him feel internally integrated and connected to others.



Attachment Styles. Strange Situation.

Ainsworth et al 1978

- ▶ **Secure:** Most infants cry, miss their mother during her absence in a strange situation, and are quickly comforted on reunion.
- ▶ **Insecure-Avoidant (Dismissing):** A minority of infants show little or no distress during separation from mother in the SS and actively avoid contact on her return. These mothers do not show attachment behaviors with their children on a daily basis.
- ▶ **Insecure-Resistant/ambivalent (Preoccupied):** A minority of infants are highly distressed during separation and, when reunited with the mother, do not soothe quickly. These mothers usually are unpredictably available and intrusive.



Main y Hesse, 1990

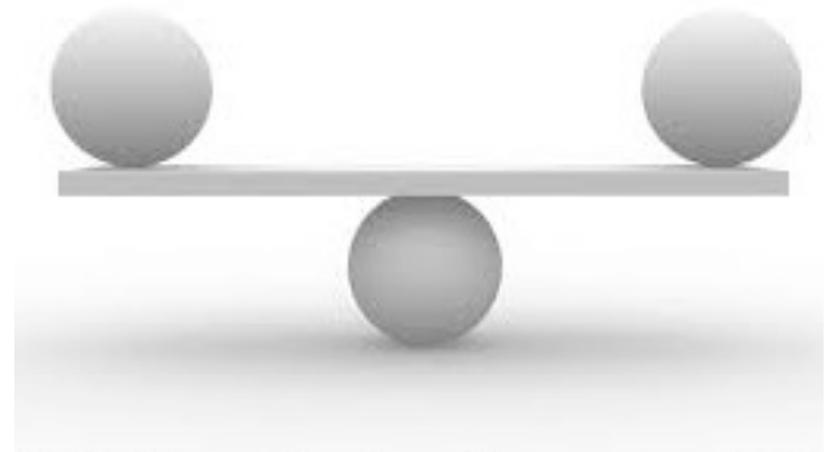
They include a new style:

- ▶ **Insecure-Disorganized (Disoriented):** Contradictory responses are activated simultaneously. At reunion with the mother, they may be very distressed or show dissociative responses such as shutdown or freeze. These mothers usually provoke fear and activate defensive responses in the child.



Secure / Autonomous Adult Attachment

- ▶ Speaks in a coherent and interactive way with the interviewer about his experiences, both favorable and unfavorable.
- ▶ Answers questions with sufficient but not excessive elaboration and later returns to the narrative, which may even include traumatic events.



Dismissing/Avoidant Attachment

- ▶ Minimizes discussion about experiences related to attachment or their importance.
- ▶ Responses are inconsistent and often excessively short.
- ▶ Relationships with parents are usually described as highly favorable, without evidence to back it up, or this evidence tends to be in contradiction with the overall assessment.



Preoccupied / Resistant / Ambivalent Attachment

- ▶ Memories recalled by questions seem to absorb the individual's attention and guide their narrative. This may lead to a lengthy and angry account of childhood interactions with parents, which may be inappropriately transferred to a discussion about current relationships.
- ▶ The person may also ramble about past issues, use vague language, and describe the parent in a positive and negative way in the same sentence.



MAYBE



Unresolved/Disorganized/Disoriented Attachment

- ▶ Individual presents frequent lapses in reasoning or discourse.
- ▶ May present childish beliefs or fall into prolonged silences or non-sense rambling.

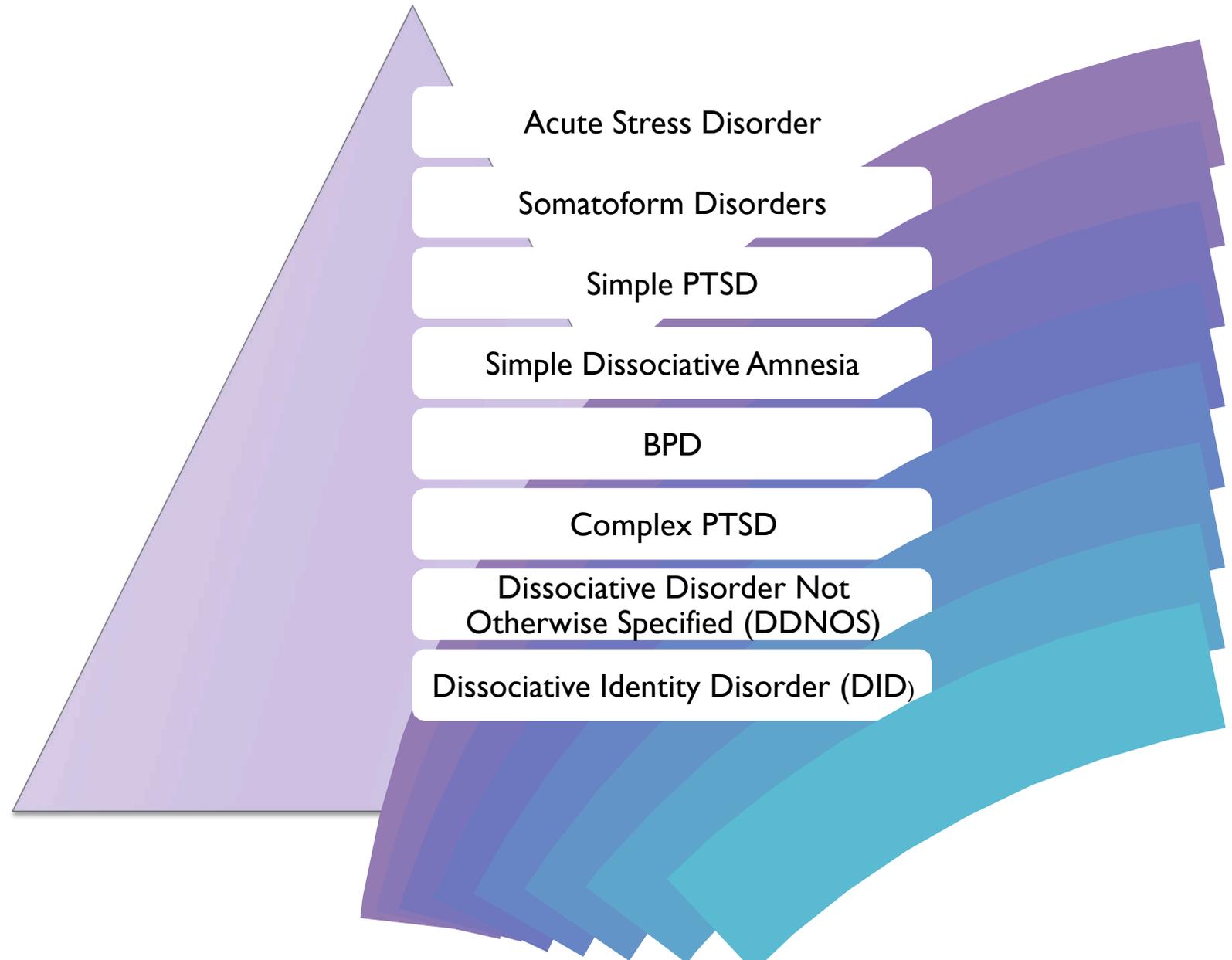


Structural Dissociation of the Personality

- TSDP provides a rich conceptualization of post-traumatic clinical pictures.
- The word *dissociation* is used to describe a mechanism involved in a fundamental division within the personality, which the authors believe is at the *basis of all post-traumatic disorders*.
- Post-traumatic clinical issues are distributed within a psychopathological spectrum ranging from acute trauma and PTSD on one end, to dissociative identity disorder on the other end, the most severe post-traumatic clinical profiles.
- In the middle of the spectrum we find borderline personality disorder (and other trauma related personality disorders).



Postrumatic Spectrum



A definition of Personality

- ▶ Inspired by Allport (1981) and Janet (1907), Van der Hart, Nijenhuis, and Steele (2006) define personality as:
 - ▶ The dynamic organization of those biopsychosocial systems within the individual that determine his or her characteristic mental and behavioral actions.
- ▶ The concept of healthy personality includes the idea of **integration** and in that integration neurobiological, psychological, and social elements are related in a coherent, flexible, and adaptive way.
- ▶ Pathology is defined by the lack of integration between these subsystems, which can operate erratically, be unmodulated, or in internal conflict. The various reactions and emotional states of borderline clients relate to this situation.



Structural Dissociation of the Personality

- Evolutionary prepared psychobiological action systems (Lang, 1995; Panksepp, 1998; Van der Hart et al., 2006) play a major role in TSDP.
- One major set of action systems is oriented toward **defense** (Fanselow & Lester, 1988), escaping from and avoiding physical and associated psychological threat, and includes subsystems such as *flight, freeze, fight, and total submission* (Porges, 2003).
- Other action systems are related to functions of **daily life** (Panksepp, 1998) and involve approaching attractive stimuli, *energy regulation, attachment and care-taking, exploration, social engagement, play, and sexuality/reproduction* (Lang, 1995).



Defense and daily life. An example

- Daily life activities are incompatible with defense.
 - An animal is eating, and suddenly hears a noise. His feeding behavior stops, the alert system is activated, and the animal is now focused on identifying a potential threat. After the noise is identified and labeled as harmless, the alert disappears, and the animal keeps eating its food.
- When a traumatizing event occurs, the action system of defense is strongly and recurrently activated, and the personality reorganizes itself in alternating and competing subsystems (Myers, 1940).



Structural Dissociation of the Personality

- ▶ TSDP thus postulates that in trauma - not only in criterion A trauma events, but also in what could be called attachment trauma - the personality may become divided among two or more such dissociative subsystems or parts (Van der Hart et al., 2006).
- ▶ One prototypical personality subsystem is metaphorically called the **Emotional Part of the Personality** (EP; Myers, 1940; Van der Hart et al., 2006). EPs are mediated by mammalian action systems of defense and attachment cry.
- ▶ The other prototype personality subsystem is called the **Apparently Normal Part of the Personality** (ANP; Myers, 1940; Van der Hart et al., 2006). ANPs are mediated by action systems for functioning in daily life.



Structural Dissociation of the Personality

- Defensive subsystems become rigid and fixated in traumatic experiences: that is the **Emotional Part of the Personality (EP)**.
- To deal with daily life, part of the client's mind must avoid all that is related to this EP. This part, focused on daily activities, is different from an integrated personality, but tries to go on with life. Because of this façade of normality, this part is called **Apparently Normal Part of the Personality (ANP)**.
- As ANP, the survivor experiences EP and at least some of EP's actions and contents as ego-dystonic.

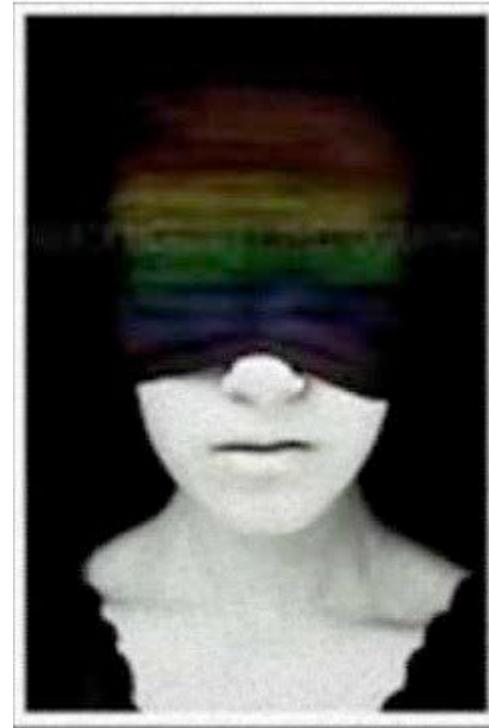


Defense and daily life

Emotional Part: fixated in traumatic memories and defensive action systems



Apparently Normal Part: focused in daily life and trauma avoidance



Defensive action systems are the foundation of EPs

- » Submission
- » Fight
- » Flight
- » Hypervigilance
- » Attachment cry
- » Anesthesia
- » Analgesia



Structural Dissociation of the Personality

- ▶ According to TSDP, the structural dissociation of the personality will be more complex the greater the intensity, frequency, and duration of the traumatization and the earlier it started in life.
- ▶ BPD is usually related to severe and early traumatization and presents high levels of personality fragmentation, which is categorized in TSDP as secondary or tertiary structural dissociation (Mosquera et al., 2011).



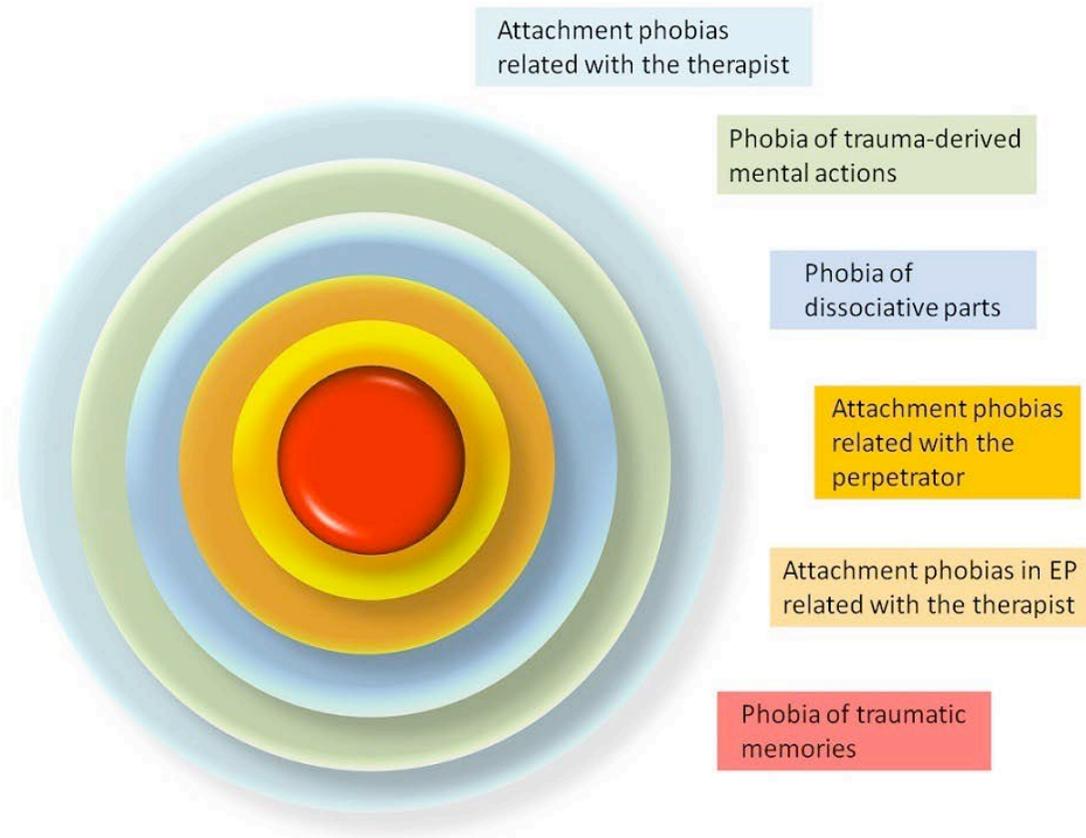
Structural Dissociation in BPD

- ▶ Lack of integration among the different mental subsystems.
- ▶ Borderlines oscillate, between different parts of the personality, in an extreme and drastic way; there is no integration of these different parts..
- ▶ Dissociation would explain many of the “apparently incomprehensible” changes we can observe in borderlines.
- ▶ In many cases borderlines don't have elaborated EPs with first person perspective, they tend to see different aspects of them selves “Bad Mary, Good Mary; Sad Mary, Happy Mary”... (borderlines with comorbid DID do have elaborated EPs)



A relevant aspect: Dissociative Phobias

- » Structural dissociation of the personality is *generated by trauma*, but **it is maintained** by a series of phobias that characterize trauma survivors and by relational factors (Van der Hart, Nijenhuis & Steele 2006).



The core **phobia of traumatic memories** (Janet, 1904).



Insecure and disorganized attachment, TSDP and BPD

- ▶ Bateman and Fonagy (2004) propose that due to parental neglect and abuse (physical and psychological), people with BPD have an inadequate capacity to represent mental states: to recognize that their own reactions and those of others are motivated by thoughts, feelings, ideas, and hopes.
- ▶ The caregiver's sensitivity to the child's mental state is strongly related to secure attachment and the development of the child's capacity to mentalize: to represent the behavior of self and others in relation to underlying mental states (Fonagy & Target, 1996; Fonagy, Steele, & Steele, 1991; Meins & Fernyhough, 1999; Meins & Russell, 1997; Meins, Fernyhough, Fradley, & Tuckey, 2001).



Insecure and disorganized attachment, TSDP and BPD

- ▶ Disorganized/disoriented attachment style (Liotti, 1992, 1999b, 2014), characteristic of dissociative disorders and a subgroup of borderline patients, can be understood from TSDP as an **extreme alternation or competition between relational approach and defense against relational threat**.
- ▶ Preoccupied and dismissing subtypes of insecure attachment can also be associated with BPD. These insecure attachment subtypes may also generate an **alternation among non-integrated aspects of the personality**, but in these cases, parts of the personality are generally less developed and structured than in disorganized attachment.



Insecure and disorganized attachment, TSDP and BPD

- ▶ The challenge faced by some of these children is how to integrate a parent who sometimes becomes frightened when they cry (or becomes upset when they get angry) with a parent who at other times is available and loving.
- ▶ In other children with dismissing insecure attachment, the challenge can be the inability to draw on any parental response in the face of dysregulated affective states.



Insecure and disorganized attachment, TSDP and BPD

- ▶ Incompatible and alternating mental states are considered in TSDP (Van der Hart et al., 2006) as dissociative parts of the personality (Mosquera et al., 2011).
- ▶ Patients with structural dissociation of the personality do not have an integrated sense of self, but alternate between different mental states (parts of the personality) containing different emotions, different coping strategies, and different concepts of self and relationships.



Insecure and disorganized attachment, TSDP and BPD

- When primary caregivers foster a preoccupied attachment style, we find adult patients who are unable to manage their anxiety:
 - When they feel anxiety, or anger, or sadness, they quickly and automatically become overwhelmed (Liotti, 1999a, 2014).
- Preoccupied caregivers will have difficulties regulating emotional states in the child, and may even intensify them.



Insecure and disorganized attachment, TSDP and BPD

- Disorganized early attachment generates vulnerability to extreme dissociation of the personality when combined with persistent childhood neglect and trauma.
- The caregiver is at the same time the source of protection and the source of danger.
- Attachment needs are conjoined with fear and defensive responses.
- This is an insurmountable biological paradox that can be addressed only by maintaining divisions within personality subsystems.



Insecure and disorganized attachment, TSDP and BPD

- ▶ Over time, in disorganized attachment with persistent childhood neglect and trauma, parts of the personality become more structured, containing aspects of reality and relationships that cannot be integrated.
- ▶ Quite autonomous mental structures can develop.



Attachment and Structural Dissociation of the Personality

- ▶ The images of the “good” parent are connected to the attachment system, which is innately conditioned to attach to the parent.
- ▶ The images of the frightening parent are linked to a defensive action system, mediated by fear and anger, which is activated to protect from danger.
- ▶ When individuals with BPD start a relationship, the attachment system becomes initially activated.
- ▶ They easily idealize a new attachment figure, as they did with the parent. They attach with the intense and overwhelming need for affection that they felt as children and was never fully (or not at all) met.



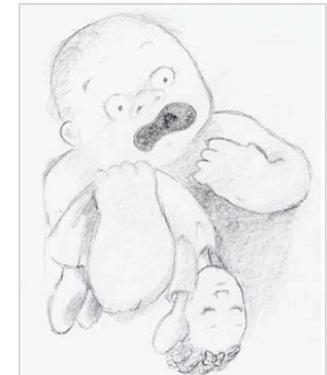
Attachment and Structural Dissociation of the Personality

- ▶ The need for attachment is very intense, and we often see this intensity as disproportionate, labeling it as cries for attention.
- ▶ In reality, it is disproportionate regarding the current situation, but it is absolutely proportionate to the unmet needs from the original situation.
- ▶ Since abrupt changes in the other were always the norm, the individual is hyper-alert to possible negative expressions in the other, constantly checking for the slightest hint of rejection.



Attachment and Structural Dissociation of the Personality

- ▶ Since these incompatible and dissociated subsystems were never integrated, they remain imminent in diverse action systems, while still operating at a more primitive level of development.
- ▶ In this way, we see patients who are apparently “childish” or show “regressive” behavior, representing parts of the personality that can be understood as “stuck in time”.



Emotional Regulation and Attachment

- ▶ Emotional regulation is not an automatic process; it is acquired in the initial stages of childhood through the caregiver-child dyadic relationship (Schore, 2003a, 2003b).



Emotional Regulation and Attachment

- ▶ A healthy attachment relationship consists of an adult who is able to attune to the child and is consistent in his or her reactions, and helps the child modulate emotional reactions.



Emotional Regulation and Attachment

- ▶ A certain degree of distress is adaptive, since it helps the child learn to tolerate frustration and delay gratification. The caregiver must later help the child regain balance.
- ▶ Thus the child, and the future adult, learns to keep emotions within what has been called “window of tolerance,” which implies an adequate level of activation in order to adapt to situations and resolve them appropriately (Ogden, 2006)



Emotional Regulation and Attachment

- ▶ Early attachment may influence internal emotion regulation (self-soothing and self-calming capacities) and the possibility of regulating themselves through dyadic regulation.
- ▶ People with BPD often oscillate between becoming dependent and seeking regulation from others, considering themselves unable to manage their emotional states, and having significant difficulties in social engagement.



Emotional Regulation and Attachment

- ▶ Children learn to recognize their internal states when they have a mirror, an attuned caregiver, who reflects, explains, and responds to them (Siegel, 2001).
- ▶ If what this mirror shows is discordant with what the child is feeling, or if there is no reflection, the inner world will not evolve toward emotional self-regulation.



Emotional Dysregulation and Interpretation of the World

- Research has shown that individuals with a secure attachment are better at interpreting negative facial emotions and perceiving positive emotions than those who present an anxious attachment (Páez, Campos, Fernández, Zubieta & Casullo, 2007).
- These authors show that parenting styles and perceived family environment may be considered as background and key promoters of positive cognitive schemas of interpreting the world and the self.
- People with Borderline Personality Disorder have diverse difficulties when it comes to interpreting the world and others.



Emotional Dysregulation and Interpretation of the World

- ▶ Parents who interpret the child's signals based on "their own state" will generate confusion in the child, who will have difficulties differentiating between what he really feels and what they "say he is feeling".
- ▶ This will translate into problems managing emotions as an adult, difficulties with boundaries, and problems in relationships with others.



Emotional Dysregulation and Interpretation of the World

- ▶ People with attachment problems usually reach to conclusions about what others think and feel based on their own emotional state (just as their parents did when they were kids).
- ▶ If, as children, they have not learned to differentiate their own emotions from those of others, they will tend to continue doing the same as adults.



Emotional Dysregulation and Interpretation of the World

- ▶ People with a secure attachment have higher response abilities when faced with the unexpected and are less reactive than people with an insecure attachment.
- ▶ People with a secure attachment usually confront problems, focus on possible solutions, and see things in a positive way.
- ▶ On the contrary, people with an insecure or disorganized attachment usually have difficulties confronting problems effectively and tend to resort to impulsive action. Some even seem to “search for problems”.



How do we learn to take care of ourselves?

- When the person who takes care of me looks at me with absolute and unconditional acceptance
- He or she is aware of how I am feeling and what is happening to me
- We share good moments
- And I feel fully accepted when I feel bad or I am angry



If they take care of me like this as a child,
as an adult I will...

- Accept myself
- Be aware of what is happening to me and to what it is related
- Enjoy things
- Equally accept all of my emotions



How we learn to take care of ourselves

If when I am a child	Then, when I become an adult I will be able to
My caregiver looks at me with absolute unconditional acceptance	Accept myself
They know how I feel and what is happening to me	Notice what is happening to me and what it is related to
We share positive moments (play)	Enjoy things
And I feel accepted even when I feel bad or I am angry	Accept ALL my emotions (and understand them)

In a traumatic environment...

- ▶ Clients who grew up in negligent and abusive environment have not internalized healthy self-care patterns (Chu, 1998; Ryle, 2002).
- ▶ They did not learn to take care of themselves because, as children, nobody cared for them in that way.
- ▶ In many cases, the adults who should have taken care of them either abused them or did not offer them adequate care.
- ▶ Thus, they did not learn behaviors or attitudes of worthiness and self-care (towards the Self and/or others).



I care for myself just as they cared for me

- ▶ If the internal experiences of the child— particularly emotions – are not recognized by a caregiver (or are punished), the child will learn to imitate and internalize the negative attitudes of the adult.
- ▶ In addition, if the parent punishes or ignores the feelings, thoughts, or behaviors of the child, in an egocentric and non-loving way, the child will ignore his or her needs, in order to maintain the only possible bond with the caregiver.
- ▶ This may split the child’s sense of self in “an acceptable part of me” and “a non-acceptable part of me.” And depending on the Personality disorder, this will show up in diverse ways.





An example: 4 girls play and run. All 4 trip and fall, scratching their knees. They go home and each one gets a different response. What do they learn?

Based on Gonzalez & Mosquera 2012

Mosquera & Gonzalez, 2014

Mosquera, 2015



Attachment and Emotional Regulation

- ▶ Susana is five years old. When she sees her bloody knees, she runs home crying. Her mother looks at her lovingly and says, “Poor girl, it hurts, doesn’t it? Come here. I’ll clean your wounds. Yes, of course it hurts! We’ll get a Band-Aid. Come and sit on my lap for a bit.” In a short while, the girl will get bored and want to go back out and play. If her mother asks if her knee still hurts, she will probably say “no” while running out the door to play.



Susana learns...

- My emotions and, thus, my needs are important
- What I am feeling is important for me
- When I feel bad, I believe that my feelings are genuine and important



Attachment and Emotional Regulation

- ▶ Maria goes home and her mother is in the kitchen. As the child walks in, she keeps on working with a facial expression between exhausted and absent. Maria says, “I fell down, but it’s nothing.” Mother continues with her chores and says, “Go and wash up, it’s dinner time.”



Maria learns...

In relationship to the Self:

- I don't recognize my emotions
- I have trouble understanding my feelings
- When I feel bad, I don't give myself time to understand what I'm really feeling

In relationships with others:

- I don't recognize other people's emotions
- I have trouble understanding other people's feelings
- When others feel bad, I focus on myself.



Attachment and Emotional Regulation

- ▶ Laura runs home crying as her mother runs out looking for her. She heard the girls screaming and thought that something very serious must have happened. When she sees her, she grabs her by the arms, yelling at her, “Didn’t I tell you a thousand times to be careful? I’m going to have a heart attack because of you. Come on, go home.” Laura is very affected and keeps on crying. “Don’t cry girl, it’s nothing... Come on, don’t cry anymore, it makes you look ugly...”



Laura learns...

In relationship to the Self:

- » My emotions overwhelm me (and overwhelm others)
- » I feel guilty for feeling this way
- » It takes me a long time to feel better
- » I don't know what to do with my emotions
- » I desperately seek others, but even if they respond, I am unable to calm down (at times, I even get angry at them when they try to help me)

In the relationship with others:

- » Other people's emotions overwhelm me.
- » I don't know how to relate to others in front of difficult situations.
- » When people feel bad I think it's their fault.
- » When others don't calm down quickly I get anxious or angry.



Attachment and Emotional Regulation

- Teresa goes for a walk before going home, she got very scared with the fall and cannot stop crying. When she gets home her mother says, “Stop crying or I’ll give you something to cry for! You’re always tripping, you’re clumsy, you have to be more careful!”
- Teresa keeps on crying, her father comes up, slaps her, and the girl falls from the chair due to the impact. The father says, “You want more?” Teresa freezes and stops crying.



Teresa learns...

In relationship to the Self:

- Showing emotions is dangerous
- If I ask for help, I may get hurt
- I deserve what is happening to me, it's my fault that I'm like this.

In relationship to others:

- I don't understand emotions or their use.
- I think people who get upset are weak.
- I despise weakness, vulnerability and fear.
- I don't need anyone.
- I don't feel anything.



Attachment and Emotional Regulation

Childhood

Adult

Parents who are not attuned

I don't know what I feel (undefined discomfort).

Defense: I don't feel anything.

I don't care

Parents focused on their own needs or ill

My emotions and my needs are not important.

Defense: I only focus on myself.

Other people's emotions and needs are not important.

Very critical parents

I beat myself up for feeling bad;

I am critical towards myself

Defense: I am critical towards others

I blame others for everything that happens

Parents overwhelmed by the child's discomfort

I don't know what to do with my discomfort. I get anxious and desperate whenever I feel bad.

Defense: I can't stand when others get upset.

I think they are weak and look down on them.

Chaotic or excessively punitive environment

Rigid behaviors with punctual losses of control perceived with disturbance.

Defense: I don't follow any norms.

I punish others.

Emotional regulation

- » An adequate emotional regulation also includes being able to feel different emotions at once, understanding them and letting them flow and find balance among them, while trusting the process and the organism's capacity to do this.

