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ATTACHMENT THEORY AND DOMESTIC VIOLENCE: SONOMA COUNTY HOME VISITING



OVERVIEW OF TALK

- Overview of Attachment Theory.
- Intervening with Families - Circle of Security Program.
- Domestic Violence and Attachment Theory
- Reducing Stress and Burnout for Workers.
- Where to go from here / Q&A.

**“HAPPY FAMILIES
ARE ALL ALIKE;
EVERY UNHAPPY
FAMILY IS
UNHAPPY IN ITS
OWN WAY.”**

*Tolstoy's Anna Karenina,
1917*



BOWLBY'S CENTRAL PROPOSITION

- Beginning in early infancy, an innate component of the human mind -- called the “attachment behavioral system” in effect asks the question: Is there an attachment figure sufficiently near, attentive and responsive?
- Bowlby, J. (1988). *A secure base: Clinical applications of attachment theory*. London: Routledge

PROXIMITY SEEKING AND EXPLORATION

- ▶ Seeking proximity to an attachment theory, in infancy and throughout childhood, helps children survive periods of emotional distress and help them reestablish hope, optimism and emotional equanimity.
- ▶ The confidence that the attachment figure will help, protect, support, when needed, allows for exploration and learning.
- ▶ Adult and children proximity-seeking can be physical, but it can also be psychological (thinking about) or even indirect (eg, electronic communications, pictures, etc).
- ▶ How the attachment figure responds to proximity seeking is key to the formation of secure and insecure attachment
- ▶ Large body of observational and physiological studies that have documented the calming effect of proximity to an attachment figure.

HOW IMPORTANT IS SECURE ATTACHMENT?

- ▶ “The quality of the attachment experience is perhaps the single most important influence on human development. Nothing is more important than the attachment relationship,” says University of Minnesota psychologist, Alan Sroufe, who together with colleagues, performed a series of landmark studies to discover the long-term impact of a secure attachment.
- ▶ A 43-year period, the Minnesota Longitudinal Study of Risk and Adaption (MLSRA) revealed that the quality of the early attachment reverberated well into later childhood, adolescence, and adulthood, even when temperament and social class were accounted for.

HOW IMPORTANT IS SECURE ATTACHMENT?

- ▶ One of the most important findings was that a secure attachment early in life led to greater independence later, whereas an insecure attachment led to a child being more dependent later in life.
- ▶ This conclusion runs counter to the conventional wisdom held by some people who are especially eager to make the baby as independent and self-sufficient as possible right from the start. *“But there is no pushing independence”, Sroufe found. “It blooms naturally out of a secure attachment.”*

WHAT IS ATTACHMENT THEORY?

- ▶ Developed by British psychiatrist, John Bowlby, and further developed by American psychologist, Mary Ainsworth, attachment theory is a theory of child social-emotional development.
- ▶ Emotion regulation is a critical task in childhood and a central aspect of healthy interpersonal relationships which contributes to working models of self and others (am I the kind of person that is likely to receive love and protection and are others reliable during times of distress)
- ▶ Emotional distress is inevitable in **ALL** close relationships, and how a person regulates their emotions will have a huge impact on the quality of their relationships.
- ▶ Attachment theory helps us understand how secure attachment develops. It also helps us understand how **insecure** attachment develops and how it can lead to emotional regulation and interpersonal problems, as well as problems in overall mental health.

“Is there an attachment figure sufficiently near, attentive and responsive to the emotional cues of the infant/child?”

John Bowlby, A Secure Base, 1988

PATTERNS OF ATTACHMENT

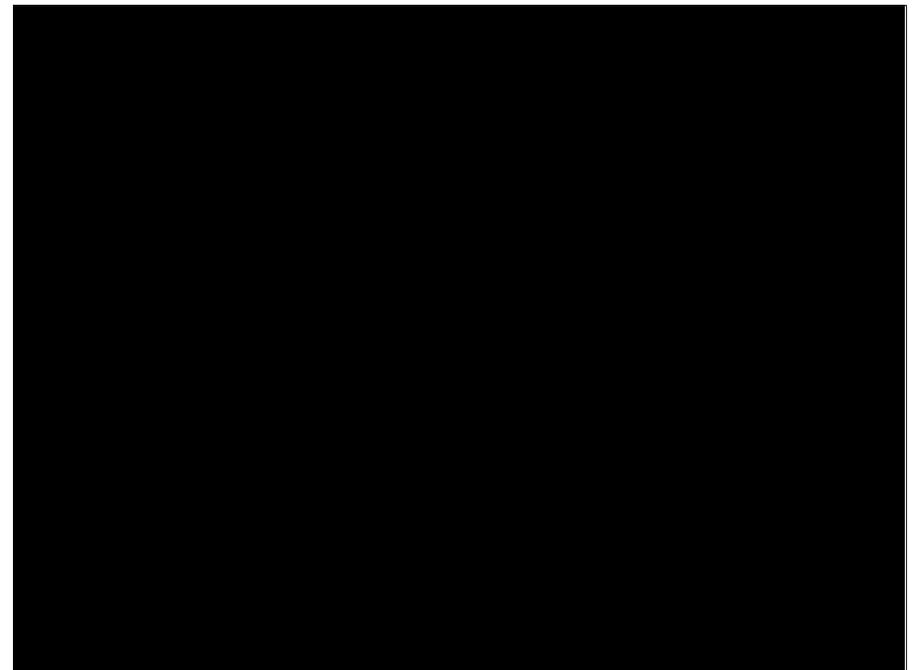
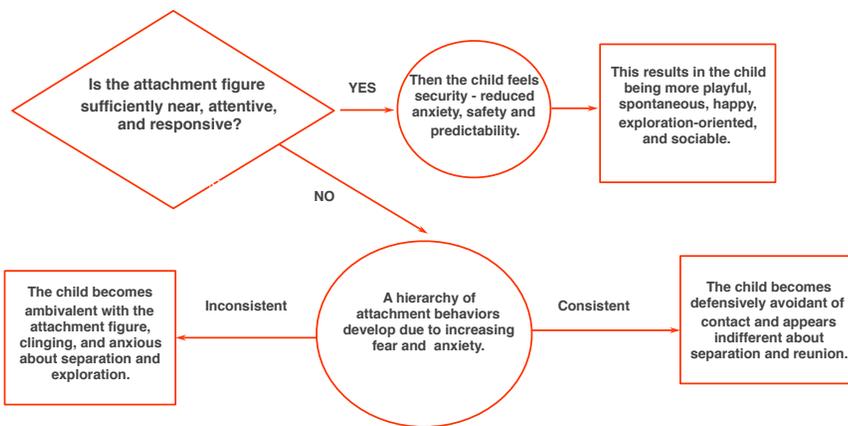
If the answer is **yes**, then the infant/child feels soothed by the attachment figure and returns to play, is less inhibited, visibly happier and more interested in exploration. A pattern of sensitive care taking results in **Secure Attachment**.

If the answer is **consistently no**, then the child experiences fear and anxiety (visual checking; signaling to re-establish contact, calling, pleading; moving to reestablish contact). If the signals repeatedly fails to get the caregiver to respond appropriately then the child’s mind eventually deactivates or suppresses its attachment system, at least to some extent, and defensively attain self reliance. This can lead to **Avoidant Attachment**.

If the answer is **inconsistently no**, the proximity seeking behaviors become exaggerated (angry and clingy) as if intensity will get the attachment figure to respond (which may or may not work). Like the dynamic between a gambler and the slot machine, the attachment figure pays off in sufficient frequency that the infant becomes preoccupied or anxious about the attachment figure’s availability. This can lead to **Anxious/Resistant Attachment**.

If the child is distressed and the person who is supposed to be a haven of safety for the is either frightening (maltreatment) or frightened, then child is at risk of developing **Disorganized Attachment**. Main and Hesse (2000) wrote that these infants were experiencing “*fear without solution*.” Disorganized attachment has the worse mental health outcomes as compared to the other insecure categories.

THE DEVELOPMENT OF ATTACHMENT PATTERNS



EMOTION REGULATION AND WORKING MODELS OF SELF AND OTHERS

- ▶ Emotional regulation consists of internal and external processes involved in initiating, maintaining, and modulating the occurrence, intensity, and expression of emotions.
- ▶ Emotions often occur quickly in response to a problem or an opportunity. The autonomic nervous system is quick to react (sympathetic) but also can reduce reactivity (parasympathetic). How well the system responds depends on genetics, but also experience.
- ▶ Attachment experiences also result the development of generalized cognitive beliefs or expectations about the worthiness of self (Am I the kind of person who is worthy of receiving care?) and reliability and safety of others (Can I trust that my attachment figure(s) will provide care when needed?). Bowlby called these expectations “*internal working models*”
- ▶ Neuroscience views these models as cognitive schemas that are automatically activated through interactions with attachment figures. Like any learned beliefs, the more they are activated the easier they can be activated.

WORKING MODELS OF SELF & OTHERS AND ATTACHMENT STYLE

- ▶ Attachment styles can be differentiated by working models:
 - **Secure:** Positive model of self and others:
 - **Avoidant :** Negative model of others, positive model of self
 - **Preoccupied/Anxious:** Negative model of self, positive model others:
 - **Fearful/Disorganized:** Negative model of self and of others

**“WHATEVER YOU
FREQUENTLY THINK
AND PONDER UPON,
THAT WILL BECOME
THE INCLINATION OF
YOUR MIND”**

*Buddha/Siddhartha Gautama
(6th-4th Century, BC)*



CHARACTERISTICS OF ADULT ATTACHMENT STYLES*

- ▶ **Secure:** Highly invested in relationships - Tend to have long, stable relationships - Relationships characterized by trust and friendship - Seek support when under stress - Generally responsive to support - Empathic and supportive to others - Flexible in response to conflict - High self-esteem
- ▶ **Preoccupied:** Obsessed with romantic partners - Suffer from extreme jealousy - High breakup and get-back-together rate - Worry about rejection - Can be intrusive and controlling - Assert their own need without regard for partner’s needs - May have a history of being victimized by bullies

*Collins, N., Clark, C. L., & Shaver, P. R. (1996)

CHARACTERISTICS OF ADULT ATTACHMENT STYLES*

- ▶ **Dismissing:** Relatively un-invested in romantic partners - Higher breakup rate than pre-occupied - Tend to grieve less after breakups (though they do feel lonely) - Tend to withdraw when feeling emotional stress - Tend to cope by ignoring or denying problems - Can be very critical of partner's needs - May have a history of bullying.
- ▶ **Disorganized/Fearful:** Introverted- Unassertive- Tend to feel exploited - Lack self confidence and are self conscious - Feel more negative than positive about self - Anxious, depressed, hostile, violent - Self defeating and report physical illness - Rapid and destabilizing fluctuations between hostile attacks and devaluing withdrawal.

**Collins, N., Clark, C. L., & Shaver, P. R. (1996)*

FROM CHILD ATTACHMENT TO ADULT ATTACHMENT RELATIONSHIPS

- ▶ Attachment patterns in childhood persist into adulthood (~80% continuity).
- ▶ The child's brain has been primed to react in a particular way to distress in close relationships and these patterns persist in adult relationships, and in parenting behaviors.
- ▶ How do we get control of behaviors that are ingrained in our brain, that occur quickly, and that are very difficult to change?
- ▶ Reactivity to Responsiveness

HABITS OF THE MIND

- ▶ **Emotions:** Anger, jealousy, fear, shame.
- ▶ **Thoughts:** Judgments, expectations, critical thoughts of self and/or others,
- ▶ **Behaviors:**
 - ▶ Physical, sexual and psychological violence.
 - ▶ Tone of voice, argumentative, controlling behaviors.
 - ▶ Addictions such as drinking/drugs, sexual-acting-out, etc.

CIRCLE OF SECURITY INTERVENTION

Enhancing Attachment in Early Parent-Child Relationships

Bert Powell, Glen Cooper, Kent Hoffman & Bob Marvin



“THERE IS SOMETHING
SIMPLE AND LIFE
AFFIRMING IN THE
ATTACHMENT MESSAGE THAT
THE ONLY THING YOUR CHILD
NEEDS IN ORDER TO THRIVE
EMOTIONALLY IS YOUR
EMOTIONAL AVAILABILITY
AND RESPONSIVENESS.”

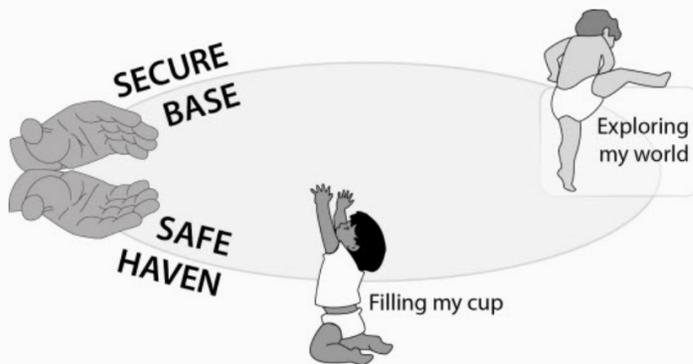
Robert Karen, 1990
(Attached)



CIRCLE OF SECURITY INTERVENTION

- Developed by Bert Powell, Glen Cooper, Kent Hoffman, and Bob Marvin
- *The Circle of Security Intervention: Enhancing Attachment in Early Parent–Child Relationships*; Guilford Press (2014)
- *Raising a Secure Child: How Circle of Security Parenting Can Help You Nurture Your Child’s Attachment, Emotional Resilience, and Freedom to Explore*; Guilford Press (2017)

Bert Powell, Glen Cooper, Kent Hoffman, and Bob Marvin



CIRCLE OF SECURITY: CORE CONCEPTS

- All children have instinct to explore the world and turn toward attachment figures when experiencing distress and in need of care, protection and comfort.
- How the caregiver responds during both these processes will affect the mental health of the child.
- The child will adapt to conditions of the caregiving environment. Adaptation is for survival, but behaviors may become maladaptive over time.
- “What makes the science (of attachment) personally compelling is that it is a love story. It is not just any love story; rather, it is the story of the hope, fulfillment, and heartbreak of our first love.”*

* Powell, Cooper, Hoffman & Marvin (2014). *The Circle of Security Intervention: Enhancing Attachment in Early Parent–Child Relationships*. New York: Guilford Press.

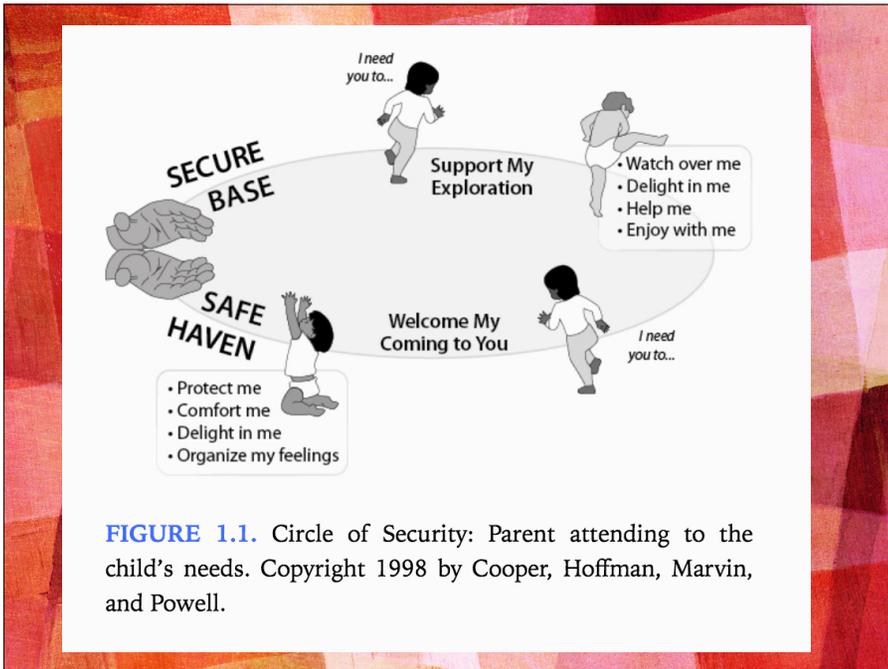
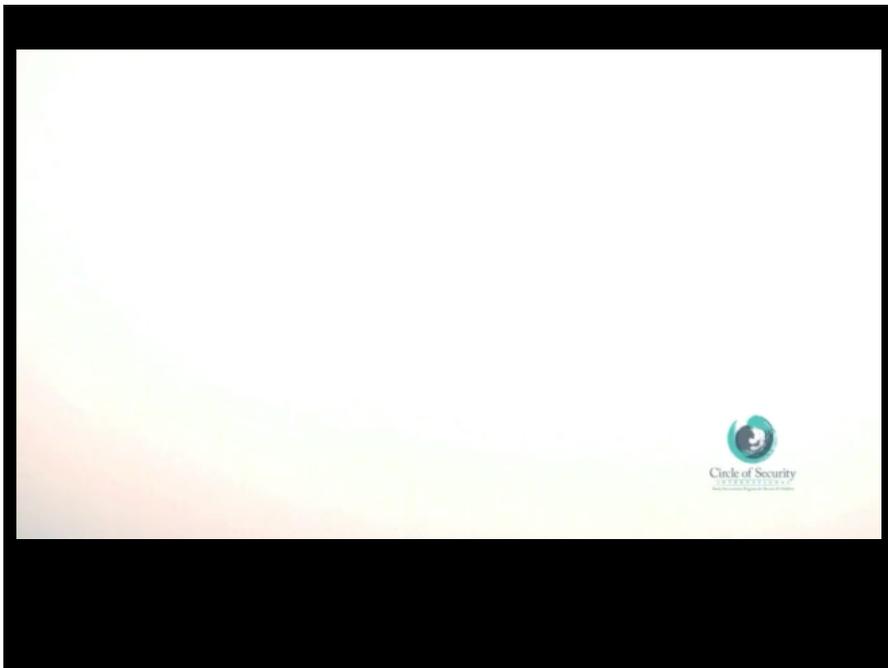
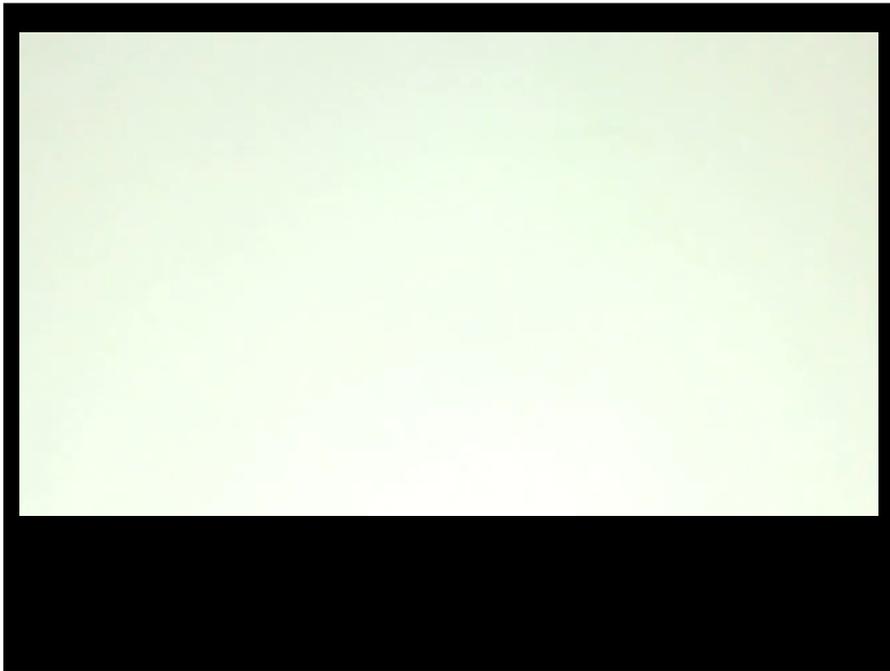


FIGURE 1.1. Circle of Security: Parent attending to the child's needs. Copyright 1998 by Cooper, Hoffman, Marvin, and Powell.

RESPONDING VERSUS REACTING

- Understanding proximity maintenance
 - The building blocks of affect regulation
 - Supporting exploration
 - Haven of safety/secure base when needed
 - Kind, loving, supportive, joyful and in-charge
- Learning to be with your child's emotions (emotional attunement)
 - Recognizing emotions
 - Embrace life and all it brings about
 - Recognizing our own barriers to sensitivity
- The importance of connection
 - Human connections create neural connections
 - Being bigger, stronger, wiser and kind with being in charge, warmth and affection
 - Attachment from cradle to grave (Bowlby, 1988)





**“MY EXPERIENCE IS WHAT I
AGREE TO ATTEND TO. ONLY
THOSE ITEMS WHICH I NOTICE
SHAPE MY MIND - WITHOUT
SELECTIVE INTEREST,
EXPERIENCE IS AN UTTER CHAOS.
INTEREST ALONE GIVES ACCENT
AND EMPHASIS, LIGHT AND
SHADE, BACKGROUND AND
FOREGROUND - INTELLIGIBLE
PERSPECTIVE, IN A WORD”**

.....
WILLIAM JAMES, 1890



ATTACHMENT THEORY & DOMESTIC VIOLENCE RESEARCH FINDINGS

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INTERPERSONAL VIOLENCE: PREVALENCE

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- Interpersonal violence (IPV) (in varying intensities) is present in 24% of all relationships.
- Twenty-nine percent in women and 23% in men.
- Seven percent of women and 6% of men reporting IPV during the past 5 years.
- 1.5 million women and 834,700 men in the United States each year.
- IPV is associated with negative outcomes such as psychological distress, financial costs, physical injuries (50% of female survivors report injuries and 20% seek medical assistance), and death (male intimates commit the majority of homicides).





IPV: CONSEQUENCES

- ▶ Couples with severe or minor levels of violence report more marital distress than nonviolent couples.
- ▶ Husbands' aggression predicts wives' marital dissatisfaction and steps toward divorce.
- ▶ Witnessing marital violence in childhood is the strongest predictor of perpetrating marital violence as an adult.
- ▶ Child physical abuse is the second strongest variable.
- ▶ Childhood exposure to marital violence predicts negative adult marital outcomes.

DOMESTIC VIOLENCE ATTACHMENT THEORY

- ▶ As early as 1988, researchers (Dutton, D.G. (1988). *Profiling wife assaulters: Some evidence for a trimodal analysis. Violence and Victims, 3(1), 5-30*) were beginning to integrate attachment theory into theories of interpersonal violence.
- ▶ It seemed like a natural fit for DV for a number of reasons.
 - ▶ 1) Attachment theory was in essence a theory of affect regulation and domestic violence was viewed as a problem in the regulation of affect - anger and fear in particular.
 - ▶ 2) The focus of attachment theory and domestic violence was interpersonal relationships.
 - ▶ 3) Insecure attachment was described with behaviors of uncontrolled anger, jealousy and control, similar to domestic violence.
 - ▶ Disorganized attachment can develop as a result of trauma.
 - ▶ 4) Attachment styles allows a more nuanced approach to intervention.

DUTTON'S ATTACHMENT-BASED TYPOLOGY SYSTEM

- ▶ **Psychopathic:** down regulating, lacking empathy, instrumental aggression and control (Dismissing Attachment)
- ▶ **Over-Controlled:** down-regulating, can be empathic, instrumental/impulsive aggression and control (Pre-occupied Attachment)
- ▶ **Borderline:** up-regulating, difficulty with empathy, impulsive aggression and control (Disorganized Attachment)

WHAT DOES THE RESEARCH SUGGEST ABOUT ATTACHMENT THEORY?

- ▶ Attachment insecurities have been associated with physical and psychological domestic violence.
- ▶ There is evidence that individuals high on both anxiety and avoidance (disorganized) show the highest rates of abuse, suggesting that these dimensions have unique negative effects on relationships.
- ▶ Dutton described the *abusive personality* as consisting of a constellation of psychological traits including disorganized attachment, a history of parental shaming and rejection, and witnessing parental violence as a child.
- ▶ Others have found that the use of violence by one individual in a couple is predictive of future violence by that same individual or by their partner.

WHAT DOES THE RESEARCH SUGGEST ABOUT ATTACHMENT THEORY?

- ▶ Mutual domestic violence has also been associated with attachment insecurity.
- ▶ Bookwala and colleagues have found that mutually violent couples scored higher on the preoccupied (anxious) and fearful-avoidant (disorganized) attachment styles (styles associated with high anxiety, and with high anxiety and high avoidance, respectively), and reported experiencing more interpersonal problems than did couples involved in non-aggressive dating relationships.
- ▶ Other studies have suggested that the fear of abandonment, characteristic of individuals high in attachment anxiety, is associated with increased risk for violence due to the escalating potential of “demand-withdraw” communication patterns.

WHAT DOES THE RESEARCH SUGGEST ABOUT ATTACHMENT THEORY?

- ▶ An anxious individual in a relationship with an avoidant person may *demand* more intimacy and attention, and if the avoidant person withdraws in response to those demands, the anxious individual’s anger could escalate to violence, where the highly anxious individual’s tendency to distrust their avoidant partner has the potential to fuel the violence cycle.
- ▶ Attachment anxiety has also been associated with coercion and verbal abusive during interpersonal conflict in community and treatment samples, and with expression of pathological jealousy, which can be viewed as a direct or indirect attempts of reducing fear of abandonment.
- ▶ Attachment avoidance has also been associated with relationship violence. Avoidant individuals in a relationship with a demanding preoccupied partner may become violent due to the emotional frustration of being unable to avoid their partner’s demands for intimacy, particularly when the avoidant partner is high in hostility and dominance.

WHAT DOES THE RESEARCH SUGGEST ABOUT ATTACHMENT THEORY?

- ▶ Although both anxiety and avoidance seem to be associated with relationship violence, Mikulincer and Shaver (2016) suggest that the anxiety component contributes more heavily to this negative outcome.
- ▶ McDermott and colleagues (2016) found that attachment anxiety was positively associated with all four types of psychological aggression (restrictive engulfment, hostile withdrawal, denigration, and dominance-intimidation) with females, but only restrictive engulfment with males.
- ▶ Attachment avoidance was positively associated with hostile withdrawal in males and females, and denigration in the male sample was related to restrictive engulfment.
- ▶ They also found that dominance orientations (i.e., nonegalitarian relationship beliefs signifying the desire to have power over and dominate one’s partner) significantly positively mediated the associations between attachment and all four forms of psychological aggression in both samples.
- ▶ Gormley and Lopez (2010) found that attachment avoidance, but not attachment anxiety, was correlated to emotional abuse, primarily denigration, dominance/intimidation and hostile withdrawal.

INTERVENTION GUIDELINES

Attachment Informed Treatment



CONTINUUM OF ATTACHMENT



WORKING MODELS OF ATTACHMENT

- ▶ Three-Category Measure by Hazan and Shaver (1987):
- ▶ **Secure:** I find it relatively easy to get close to others and am comfortable depending on them and having them depend on me. I don't worry about being abandoned or about someone getting too close to me.
- ▶ **Avoidant:** I am somewhat uncomfortable being close to others; I find it difficult to trust them completely, difficult to allow myself to depend on them. I am nervous when anyone gets too close, and often, others want me to be more intimate than I feel comfortable being.
- ▶ **Anxious:** I find that others are reluctant to get as close as I would like. I often worry that my partner doesn't really love me or won't want to stay with me. I want to get very close to my partner, and this sometimes scares people away.

WORK TOWARD HEALTHY WORKING MODELS

- ▶ What attachment security looks like:
 - ▶ Client finds it relatively easy to get close to others.
 - ▶ Is comfortable depending on attachment figures.
 - ▶ Is comfortable having attachment figures depend on them.
 - ▶ Doesn't worry about being abandoned by attachment figures.
 - ▶ Doesn't worry about attachment figures getting too close.

WORKING WITH INSECURE ATTACHMENT

- ▶ **Anxious Avoidant:**
 - ▶ Increase comfort with intimacy
 - ▶ Increase trust
 - ▶ Increase dependency
 - ▶ Increase tolerance to emotional intimacy and "turning toward" by attachment figure
 - ▶ Turning toward, turning away and turning against (Gottman)
 - ▶ Talk about anxiety underlying avoidance
 - ▶ Recognize need for attachment, but its coupled with fear of rejection

WORKING WITH INSECURE ATTACHMENT

- **Anxious Resistant:**
 - Anxiety management
 - Partner is needing reasonable space
 - Noticing negative thoughts about partner when partner is needing reasonable space or is not responsive to their emotional needs
 - Self-soothing versus proximity maintenance soothing
 - Noticing and questioning of doubts about partner's love or commitment.
 - Recognizing clinging as a way of self-soothing.
 - Recognizing the effects anxiety has on attachment figures.

VICTIMS OF DOMESTIC VIOLENCE

- **Safety is first goal of intervention** (child(ren) and adult partner/victim)
- Sometimes protection of the children is a greater motivation for change than protection of self.
- Not all victims are ready for change.
- Those who are most ready to change, are more likely to end the relationship.
- Alcohol and drug use is a common coping strategy or a long-standing problem, but in either case impair judgement and problem-solving skills.
- Insecure attachment is not uncommon in victims. Some victims it may result from the current trauma, but many are insecure due to a history of adult and/or childhood victimization or untoward parenting.
- Insecure attachment is likely to affect parenting abilities so the home visitor is challenged with helping parents address both both parent insecurity due to current victimization and long-standing insecure attachment patterns.

ELEMENTS OF CHANGE

- Education about attachment theory
- Coping strategies may be adaptive (calling police, leaving, protecting children, anger, fear, etc.) and maladaptive (withdrawal, protective of perpetrator, trying to make sense out of nonsense, self-doubt, etc)
- Why don't victims leave? Better to ask what keeps them in the relationship?
- The victim may not feel the same urgency to leave as the healthcare provider.
- Breaking up is hard to do: address financial, housing, employment, healthcare, legal and childcare logistics of separation and divorce.
- Emotional / attachment ties are strong and resistant to breaking
- Jealousy and threats to victim and/or children (custody)
- Disorganized attachment causes a collapse of coping strategies.

USING ATTACHMENT THEORY IN PERPETRATOR TREATMENT

- **Preoccupied** people feel unworthy of support and are afraid of abandonment by attachment figures, the therapist needs to focus on building self worth, reducing anxiety about loss and abandonment and strengthening their problem-solving. Developing self-soothing skills (Time-Outs, Positive Self-Talk, deep breathing, etc) so there is less of a need for clinging or control of their partner's behavior.
- **Avoidant** individuals play down their need for close attachment relationships and down regulate emotion in order not to depend on others. The therapist needs to focus on recognizing and talking about more vulnerable feelings and turning towards others during times of distress. Developing empathy for self and others is key for treating dismissing attachment.
- With **Disorganized (fearful)** attachment it is important to address issues related to family of origin and possible physical or sexual abuse or witnessing of family violence. Saunders (1996) found that men who either experienced child abuse or witnessed family violence seemed to respond better to psychodynamically oriented process groups focusing on their childhood experiences than purely educational/Duluth-like groups.

BURNOUT

*Creating & Maintaining
Personal Well-being in a
Stressful Profession*



STRESS AND BURNOUT

- ▶ All living organisms maintain a complex dynamic equilibrium, or homeostasis, which is constantly challenged by internal or external adverse effects, termed stressors.
- ▶ Stress is defined as a state in which homeostasis is actually threatened or perceived to be so; homeostasis is re-established by a complex repertoire of behavioral and physiological adaptive responses of the organism.
- ▶ Stress can be caused a negative stressor (loss, burnout, trauma, etc)
- ▶ Positive events (marriage, having a baby) can also be stressful
- ▶ Both the magnitude and the chronicity of the stressor is important
- ▶ When the magnitude or temporal threshold is crossed, the body activates various coping mechanisms
- ▶ Adaptive coping helps to return to homeostasis
- ▶ Burnout can be defined as the exhaustion of physical and/or emotional strength or motivation that results from extreme and/or prolonged stress

STRESS AND BURNOUT

- ▶ Stress and burnout occurs for different reasons in different individuals.
- ▶ Workload does not equal level of stress or burnout.
- ▶ Multiple factors contribute to whether or not someone will find a job stressful or eventually experience burnout.
- ▶ *“In the current climate, burnout thrives in the workplace. Burnout is always more likely when there is a major mismatch between the nature of the job and the nature of the person who does the job.”*

The Truth About Burnout: How Organizations cause Personal Stress and What to Do About It. Maslach & Leiter pg 9; 1997

MOST COMMON SOURCES OF WORK BURNOUT

- ▶ Work overload
- ▶ Lack of control
- ▶ Insufficient reward
- ▶ Unfairness
- ▶ Breakdown of community
- ▶ Values conflict
- ▶ Abuse, harassment, and other trauma

FIRST SYMPTOMS OF BURNOUT

- ▶ Chronic exhaustion
- ▶ Cynicism toward and detachment from job
- ▶ Increasing sense of ineffectiveness
- ▶ Tendency towards isolation
- ▶ Avoidance of work, job duties, co-workers
- ▶ Interpersonal conflicts with co-workers or clients
- ▶ Wanting to quit or take excessive sick days
- ▶ Physical health problems
- ▶ Depression and anxiety

RISK FACTORS FOR BURNOUT

- ▶ Single
- ▶ Gender (F: Exhaustion; M:Depersonalization)
- ▶ Sexual minority (workload, perceptions of workplace heterosexism, perceptions of workplace support, & identity concealment)
- ▶ Number of children at home (F>M)
- ▶ Family problems (M&F)
- ▶ Mid-late career (M&F)
- ▶ Previous mental health issues (M&F depression)
- ▶ Fatigue & sleep deprivation (M&F)

RISK FACTORS FOR BURNOUT

- ▶ General dissatisfaction (M&F)
- ▶ Alcohol and drugs (M&F)
- ▶ Minority/international (M&F)
- ▶ Teaching & research demands (M&F)
- ▶ Potential litigation (M&F)

PERSONALITY FACTORS THAT MAY CONTRIBUTE TO BURNOUT

- ▶ Perfectionism
- ▶ Pessimism (glass half empty)
- ▶ Loner, not comfortable being part of a team
- ▶ Excitable, anxious or reactive
- ▶ Type A personality
- ▶ Person-Job fit conflict
- ▶ Not believing in the job mission
- ▶ High need for control

WORKPLACE RESPONSE TO BURNOUT

- ▶ *“The twin goals of preventing and building engagement are possible and necessary in today’s working world. These goals cannot be easily achieved by an individual. Rather, people have to work together to make them happen. And if we all commit ourselves to the long-term process of organizational progress, we will be rewarded with workplaces that are more productive and resilient as well as humane.”*

-Maslach & Leiter, pg 127

TAKE CHARGE OF YOUR WELLBEING

- ▶ Self-care is client-care
- ▶ Self-care is co-worker-care
- ▶ Self-care optimizes the organization mission
- ▶ Organizational/Supervisor interventions
 - ▶ Empathy; respect, feedback and acknowledging; staff retreats; skill/job matching; intervening with staff (Do you need a break?), education/skill building; games (team-building); breaks; self-care opportunities (meditation, exercise, etc); pace/shift, critical incident debriefing, staff support forums.

TAKE CARE OF YOUR WELLBEING

- ▶ What helps you get back to yourself, gives you a sense of wellbeing, inner peace and happiness?
- ▶ Happiness is not something you can get directly - its an outcome of certain activities
- ▶ Inner strengths associated with well-being:
 - ▶ Virtues (e.g., patience, energy, generosity, restraint)
 - ▶ Executive functions (e.g., meta-cognition)
 - ▶ Attitudes (e.g., optimism, openness, confidence)
 - ▶ Capabilities (e.g., mindfulness, emotional intelligence, resilience)
 - ▶ Positive emotions (e.g., gratitude, self-compassion)
 - ▶ Approach orientation (e.g., curiosity, exploration)

BARBARA FREDRICKSON, PH.D.

- ▶ The work of Fredrickson and her colleagues has had great impact on the science of happiness. Their study of positive emotions, specifically, “the big 10 emotions” – love, joy, gratitude, serenity, interest, hope, pride, amusement, inspiration and awe – has given life to many of the happiness habits. The habit of building and maintaining strong relationships is directly linked by the need to do so by self-disclosing to people you care about and cultivating positive emotions in mutual experiences with them.

CHINESE PROVERB

- ▶ If you want happiness for an hour, take a nap. If you want happiness for a day, go fishing. If you want happiness for a month, get married (Obviously, they had not read the study that showed it is actually two years that marriage gives you happiness). If you want happiness for a year, inherit a fortune. And if you want happiness for a lifetime, help somebody else.
- ▶ The first two things are just momentary pleasures, going fishing, or taking a nap. Obviously, they not going to make you happy forever.
- ▶ Getting married and inheriting a fortune are major circumstantial changes in life, but even those things people tend to adapt to over time, or get used to, a new level of happiness, or a new level of wealth, and then you need to do other things to keep that level of happiness going. Adaptation is part of human nature; it's actually an important part of human nature that it is adapting to new situation.
- ▶ Helping someone else is an activity that you can vary, and do over and over again.
- ▶ *For centuries, the greatest thinkers have suggested the same thing that empirical research has found - one of the most robust activities found to lead to happiness is helping others.*

**“IF YOU WANT
OTHERS TO BE
HAPPY, PRACTICE
COMPASSION. IF
YOU WANT TO BE
HAPPY, PRACTICE
COMPASSION.”**

*Dalai Lama XIV,
The Art of Happiness*



WHAT IS HAPPINESS?

- ▶ Three constituents:
- ▶ Pleasure or positive emotion (hedonic, past present or future, most people operate within a fairly narrow range)
- ▶ Engagement, absorption or flow in goal directed pursuits
- ▶ Meaning - belonging to or serving something larger than self, provides purpose in life
- ▶ 50% of happiness variance in genes; 10-20% in life circumstances; 30-40% practices

THREE POISONS - GREED (BURNING DESIRE), HATRED (ANGER, HOSTILITY) AND DELUSION (MISUNDERSTANDING, MISATTRIBUTION)

- ▶ In Buddhism greed, hatred, and delusion are known as the three poisons, the three unwholesome roots, and the three fires that are thought to lead to personal suffering.
- ▶ These metaphors manifest as certain thoughts and emotions that can be the root of unhappiness, and with thoughtful study can be understood and transformed.
- ▶ These three patterns can be deeply embedded in the conditioning of our personalities due to practice.
- ▶ *“Whatever you frequently think and ponder upon, that will become the inclination of your mind.” - Buddha, 800BC*
- ▶ *“We are what we repeatedly do.” - Aristotle, 300BC*
- ▶ *“Every good that is worth possessing must be paid for in strokes of daily effort.” - William James, 1890*
- ▶ *“We looked at how long it took people to reach a limit of self-reported automaticity for performing an initially new behaviour and the average time was 66 (consecutive) days.” - Phillippa Lally, 2009*

THE SOLUTION OR ANTIDOTE TO POISON

- ▶ The solution to greed is generosity
 - ▶ One of the most robust factors leading to happiness
- ▶ The solution to hatred is compassion (as well as loving-kindness)
 - ▶ Lowest point in 33 yrs in prison, losing compassion for torturers (Palden Gyatso, Fire Under Snow)
- ▶ The solution to delusion or confusion is mindfulness
 - ▶ *“Paying attention in a particular way: on purpose, in the present moment, and non-judgmentally.”* (Kabat-Zinn, 2005)

THE BENEFITS OF MINDFULNESS MEDITATION*

- ▶ Reduced rumination
- ▶ Reduced stress
- ▶ Boost to working memory
- ▶ Increased focus
- ▶ Reduced emotional reactivity
- ▶ Increased cognitive flexibility
- ▶ Relationship satisfaction
- ▶ Enhanced self-insight, morality, intuition and fear modulation, all functions associated with the brain's middle prefrontal lobe area
- ▶ Numerous health benefits, including increased immune functioning
- ▶ Improvement to well-being and reduction in psychological distress
- ▶ Increase information processing speed as well as decrease task effort and having thoughts that are unrelated to the task at hand

* <http://www.apa.org/monitor/2012/07-08/ce-corner.aspx>

THE BENEFITS OF MINDFULNESS MEDITATION FOR HELPERS*

- ▶ Empathy
- ▶ Compassion
- ▶ Counseling skills
- ▶ Decreased stress and anxiety
- ▶ Better quality of life
- ▶ Improved self-efficacy
- ▶ Improved attentional processes
- ▶ Increased patience, intentionality, gratitude and body awareness

* <http://www.apa.org/monitor/2012/07-08/ce-corner.aspx>

GETTING STARTED WITH MINDFULNESS

- ▶ Apps: Headspace, 10% Happier, Insight Timer, Calm, etc.
- ▶ Local meditation groups
- ▶ Start with breath and body scan meditation - only five minutes a day increase state mindfulness
- ▶ Compassion: <https://self-compassion.org>
- ▶ Online programs.
 - ▶ <https://www.nytimes.com/guides/well/how-to-meditate>
 - ▶ <https://www.realizemedia.org>

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