

Role of Attachment Security and Affect Regulation in Borderline Personality Features

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Abstract

The current review focuses on the significance of childhood experiences related to the caregiver-child relationship on the mental well-being of the child. Attachment security developed as a result of caregiver-child interaction and subsequent affect regulation strategies with mentalization serving as the mediating factor help in understanding the development of Borderline Personality features. The mentalization theory and theory of structural dissociation of personality (TSDP) are elaborated in reference to attachment security and affect regulation in borderline personality features.

Keywords: Attachment; Affect Regulation; Mentalization; Dissociation

Attachment

Attachment refers to the relationship of security and protection between a child and a caregiver. The child uses his/her caregiver as a security base to whom he returns when needed while exploring his/her environment [1]. If the approach of the caregiver is attuned with the needs of the child, remains consistent across situations and behaviors and is balanced, then a secure attachment fosters between the two. On the other hand, if the caregiver's behavior is inconsistent and needs of the child are unfulfilled then insecure attachment may develop [2]. In his breakthrough experiment called Strange Situation, Ainsworth and colleagues [2] identified four attachment styles; secure, avoidant, resistant and disoriented. An attachment style refers to the relational behavior, affect and cognition that originate from a person's internalized past experiences related to attachment. This sets forth the affect regulatory coping strategies the person ultimately relies on [3,4]. The attachment style, be it insecure or secure, leads to the development of affective-cognitive schemas in a child regarding the self and others. The self-concept is whether the child sees himself as valuable and worthwhile in the eyes of the caregiver. The schema regarding others involves consideration of the availability of the caregiver in times of need. These attitudes are internalized and are referred to as internal working models of self and others [5-7]. Hence, securely attached children have positive and realistic appraisal of their own self, have useful affect regulation strategies and have a heightened sense of self-efficacy [8-12]. They are socially apt, emotionally stable, intellectually superior and have higher subjective well-being [13-18]. Their well-being persists into adulthood mediated by factors such as caregiving atmosphere, certain temperamental traits, affect regulatory systems and influence of internal working model [19]. Thus, having a secure attachment style can be seen exerting major influences throughout an individual's life.

Attachment styles: After Ainsworth's [2] classification of childhood attachment patterns, Main, Kaplan and Cassidy [20] showed adult attachment categories including secure, preoccupied, dismissing, and unresolved attachment. People with secure attachment were coherent, consistent and reflective in their recall of childhood experiences. People with preoccupied attachment exhibited confusion in their recall in a childlike speech. Individuals with avoidant attachment showed a devaluing attitude towards attachment relationships.

Last but not the least, the unresolved attachment style was characterized by lapses in the reasoning about the causes of events that took place. Later, a series of researches considered evaluating attachment on a dimensional scale instead of creating clear-cut categories based on the postulation that attachment differs in degree and not in kind. Thus, attachment security came to be understood as having anxious and avoidant attachment at one end with attachment security at the other end of the spectrum [21]. People with anxious attachment have a propensity to magnify their emotions, cling to others for support, have negative appraisal of self, consider themselves inept at regulating their own emotions and struggle at all times to be in close proximity with their loved ones [12,22]. On the other hand, people with avoidant attachment fail to form satisfactory relationship with close others and engage in faulty attributions i.e. they attribute their shortcomings to others. Their emotions are subdued and restricted posing problems in social situations [23-28]. This is why insecure attachment is related with dysfunctional beliefs, unstable emotions and subsequent disturbed interpersonal relationships. Table 1 extracted from a review article [29] elaborates different attachment styles classified on a categorical scale.

Adult attachment interview	Strange situation
George, Kaplan and Main [30]	Ainsworth, Blehar, Waters and Walls [2]
Secure/autonomous: The person speaks coherently and interactively with the interviewer about the life experiences, whether favorable or unfavorable. Questions are answered with sufficient, but not excessive, elaboration and provide a coherent narrative that may even include traumatic events.	Secure: The infant seeks physical contact, proximity and interaction. If upset by the separation, the child is readily soothed by parents and returns to exploration and play.
Dismissing: The person minimizes the discussion or importance of attachment-related experiences. Responses are typically internally inconsistent, and often excessively short. Relationships with parents are usually described as highly favorable, but without supporting evidence or when it is given, tends to contradict global evaluation.	Insecure-avoidant: These infants show little apparent separation anxiety while actually in a state of high physiological distress, avoid and ignore parents on reunion, remain occupied with toys, and may ignore parents' efforts to communicate.
Preoccupied: The memories aroused by a question seem to draw the subject's attention and guide the subject's speech. This can result in lengthy, angry recounting of childhood interactions with parents, which may inappropriately move into discussions of a present relationship. The speaker may also digress to remote topics, use vague language, and describe a parent negatively and positively in the same sentence.	Insecure-resistant: These infants alternate between appearing very independent and ignoring mother and becoming anxious and trying to find her. Upon reunion, they cling and cry, but also look away and struggle, and parents are not able to soothe their distress.
Unresolved or disorganized: Frequently demonstrates substantial lapses in reasoning or discourse. The respondent may express childlike beliefs or lapse into prolonged silence or eulogistic speech.	Disorganized: Infants cry for parents at the door and then run away when door opens, approaching parent with head down. Behavioral strategies seem to collapse. They may seem to freeze, display a vacant stare.

Table 1: Different types of attachment in adults and children with different instruments [29].

Stability of attachment patterns: The adult attachment classification indicates to the stability of attachment patterns from childhood till adulthood. Likewise, Bartholomew and Shaver [31] and Shapiro and Levendosky [32] showed the stability of attachment orientations over time in their findings. This means that children put together the expectations regarding future relationship based on the kind of attachment they had with their parents [33]. The findings of other studies also favored the longevity of the attachment pattern from childhood till adulthood [34,35] which ultimately influences the way an adult functions, be it his/her affect, behavior or cognition. This is called prototype perspective which claims perseverance of attachment patterns across life span and their influence on later interpersonal

relationships [34]. Sroufe, *et al.* [36] said that, '*earlier patterns may again become manifest in certain contexts, in the face of further environmental change, or in the face of certain critical developmental issues. While perhaps latent, and perhaps never even to become manifest again in some cases, the earlier pattern is not gone*' (p. 1364).

Attachment and Affect regulation

Attachment is seen as an affect regulation model [37]. When it comes to affect processes, two are mostly discussed in context of attachment phenomenon. These are affect reactivity and affect regulation. Affective reactivity is the extent to which an individual experiences threat which leads to the stimulation of need for security. Affect regulation means the kind of relationship patterns an individual enacts in order to maintain security [38]. Those with secure attachment have properly functioning affect regulation system. On the other hand, avoidant attachment is accompanied with underactive coping strategies and anxious attachment has hyperactive coping strategies [39]. Mikulincer and Shaver [39] proposed that the attachment styles influence self-regulation and personal growth, romantic and sexual behavior, interpersonal regulation, emotion regulation and coping and family functioning and parental care. As expected, securely attached individuals are better at recognizing and classifying emotions [40], they have better affect regulation strategies [41] and have greater understanding of emotions as compared to insecure people [42]. Anxious individuals report experience of extreme emotions [9], more fluctuation in their emotions [43] and increased emotional reactivity [44]. The avoidant attachment includes inhibited expression of emotions resulting in failed intimacy and social problems [45]. Mikulincer and Shaver [46] have gone to the extent of saying that emotional dysregulation is synonymous with insecure attachment in childhood.

Attachment associations lay the foundation for the children to learn about emotional expression and coping [47,48]. The researches [49,50] say that individuals learn about affect regulation and coping strategies by observing their parents or caregivers, once again stressing upon the need to have a functional relationship with the care-giver. It also points to the interconnectedness of attachment phenomenon and affect regulation.

Attachment and Affect regulation in Borderline Personality Features

Attachment and Borderline Personality Features: The probable outcome of dysfunction in affect regulation and deficits in attachment, as based on the literature, may cause instability of emotions, disturbed interpersonal relationship, unstable self-image and self-destructive impulses. This might lead to the development of borderline personality disorder which is a pervasive and chronic disorder [51]. Attachment theory [52] helps us understand the origin of interpersonal relationship problems that are characteristic of personality disorders. At the same time it allows the insight into the development of self-concept and self-regulation and the reasons disruption may occur in them [53]. Bowlby [54] proposed that childhood attachment provides a foundation for neurotic symptoms and personality disorders. Thus, knowing that the absence of a consistent, attuned caregiver is basically the absence of the secure base and the source that reflects child's sentiments [55], Adshead [56] considered insecure attachment the reason behind child's inability to regulate and verbalize affect. It may also lead to a heightened propensity to split his/her feelings. This is not set in the stone that insensitive caregiving is the only cause of BPD. However, many researches did point out the deficits in development and increased conflicts in the first two years in an infant's life having an integral role in the onset of the said disorder [57-60]. There has been sufficient evidence connecting fearful/unresolved attachment style with Borderline Personality Disorder. This is followed by preoccupied attachment style next. Secure attachment is predictably found having a strong inverse relationship with Borderline Personality Disorder [61,62]. A study held by Fonagy, *et al.* [63] showed preoccupied and unresolved-disorganized attachment styles among people with BPD. Patrick, *et al.* [64], West, *et al.* [65] and Barone, *et al.* [66] came up with similar findings. Another study showed insecure attachment style a strong predictor of BPD [67]. Thus, putting aside the variations found in insecure attachment, it is established that it is indeed insecure attachment that has a strong part to play in borderline personality features.

Affect dysregulation and Borderline Personality Features: The biosocial theory proposed by Linehan [68] suggests that individuals with borderline personality disorder are sensitive in terms of their emotions from birth. Because of this, they are more likely to experi-

ence negative emotions in varying events which hinders with their learning of adequate coping strategies. As a result, their subsequent behavior to manage painful, dysregulated emotions is also dysfunctional. The negative consequences have, in turn, reinforcing capacity. Thus, emotional dysregulation ends up forming a vicious cycle taking a toll on mental health [69,70]. Therefore, people with borderline personality disorder lack emotional consciousness [71]. They have a propensity of increased reactivity to negative stimuli [72] and a decreased reactivity to positive stimuli [73]. Therefore, affect dysregulation may create sufferable impact on functioning and well-being of an individual and if not attended to, might intensify.

Carpenter and Trull [74] did a thorough review shedding light on the factors that contribute to malfunctioning in affect. This would help us in locating the point at which things might be going wrong so that adequate and timely steps may be taken to control the harm. As stated by Carpenter and Trull [74], there are four components of affect dysregulation in Borderline Personality Disorder. Firstly we have emotion sensitivity which refers to an increased emotional response to stimuli in environment [75]. Secondly, there is negative affect which points to the heightened sensitivity to negative moods [76]. Next we have inadequate emotion regulation coping strategies. As a result of sensitivity to negative affect particularly, problems controlling emotions come up [77]. The last component is maladaptive regulation strategies. Without adequate coping strategies, patients with borderline personality disorder engage in dysfunctional coping methods that involve avoidance [78], rumination [79], catastrophization [80], thought suppression [81] and internalization and externalization of blame (Conklin, *et al.* 2006). The maladaptive regulation strategies as mentioned earlier are very helpful in identifying the unhealthy defense mechanisms used by an individual who has no resources to cope with his emotions otherwise. Rumination, above all, is considered the fundamental cause boosting other associated negative emotions in a vicious cycle [79]. If an individual excessively indulges in such malpractices, he/she must be directed away from that and shown a healthier and positive way of dealing with unacceptable, painful and distressing emotions.

Insecure attachment and Affect Dysregulation in Borderline Personality Features: It is by far understood that attachment and affect have an immense role to play in producing features close to borderline personality disorder. But how exactly do both influence the functioning of an individual to an extent that it is disrupted? The answer lies in our mental functioning.

Apart from factors like balance, coherence and attunement establishing attachment between caregiver and the child [82], there is another factor called reflectiveness also known as mentalization and intentional stance. It is the ability to comprehend our own actions and others in reference to the mental states. It refers to being able to understand why someone is feeling or acting the way he is, while simultaneously being aware of our own mental state [83]. Mentalization ensures the development of secure attachment in children of parents whose own childhood was deprived [84]. However, abuse or maltreatment has been shown by studies to disrupt and limit the mentalization capacity of the child [85,86]. It results in an inability to take perspective of others, thus, forming conclusion based on only what is visible instead of going beyond that [87]. Without mentalization, there is no buffer for automatic and possibly malicious thoughts. Thus, lack of mentalization nurtures biased beliefs which ultimately disturb affect. The child misattributes the cause of the abuse and the ill treatment being inflicted upon him in an attempt to avoid thinking about the caregiver's wish to harm him/her [63]. As a result, a contradiction begins to develop where a child erects defenses to protect himself while at the same time longs for proximity with the caregiver [83]. Such contradiction can be better explained by Theory of Structural Dissociation of Personality [88]. According to this theory, the personality of the abused dissociates or splits as a way to cope with the trauma. There is an Emotional Part of the Personality which in order to defend itself from the pain cries for attachment and fears for the loss of it. The Apparently Normal Part of Personality makes use of defensive strategies involving avoidance. It strives to stay above the trauma and pretends that everything is normal. Therefore, subdued emotions, numbing and amnesiac episodes may be exhibited [89].

Thus, mentalization theory and theory of structural dissociation of personality help us understand how the unfavorable attitudes and the behavior of the caregiver during the early years of the child's life account for abnormalities in the beliefs, affect and ultimately actions of the child. The impact of sensitive caregiving goes a long way. It can either make or break a personality. This is particularly important in the context of parenting that has changed forms dramatically in modern times. The increasing rates of delinquencies and

psychopathologies may be avoided if attention is given to how these individuals should be raised. Lipton (2005) in *Biology of Belief* highlighted the importance of environmental stimuli on our mind and body to the extent that he surpassed the significance of genes. The influence of love, care and attention can be tremendous on the child’s mental and physical well-being. Thorough and intensive studies are required to probe into the matter further and evaluate the claim on rigorous scientific grounds. Nevertheless, it adds to the emphasis placed upon caring and attentive parenting.

Based on the literature review, a summary version is presented below.

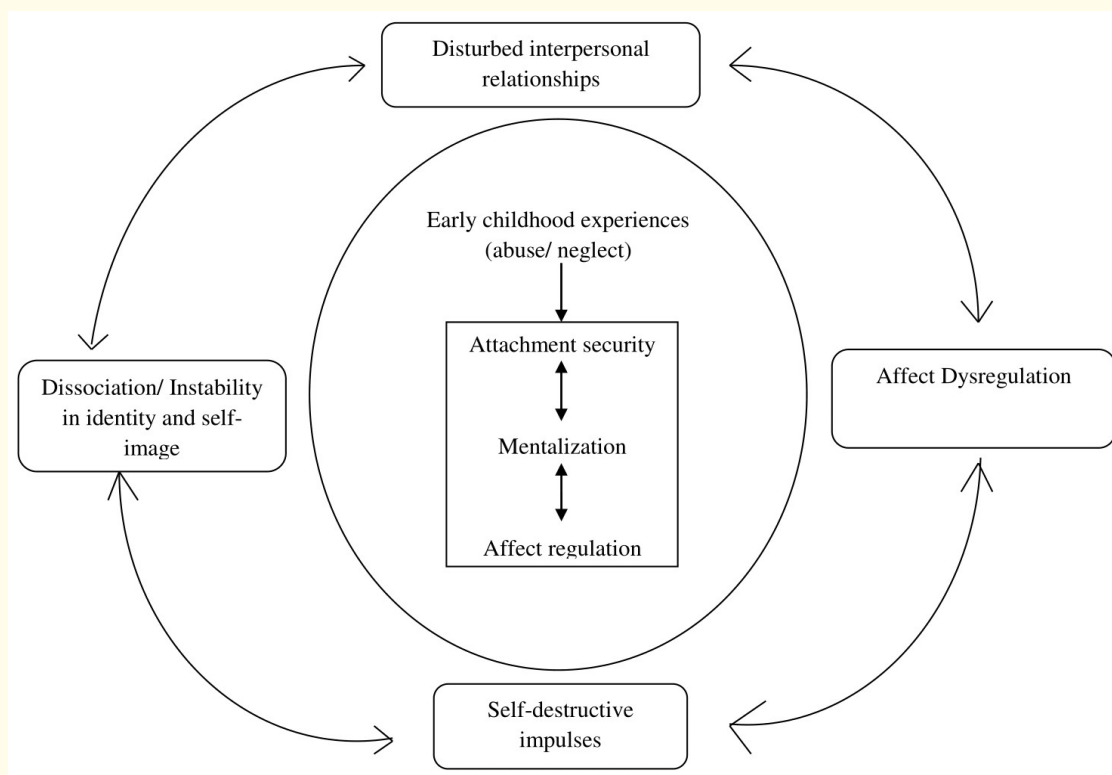


Figure 1: A model integrating the impact of childhood attachment and subsequent affect regulation strategies on development of borderline personality features.

The features mentioned in the figure 1 are interconnected and can be explained in the context of childhood experiences pertaining to the care-giver-child relationship. In case of abuse/neglect, the reflective capacity of the child is endangered. At the same time, the attachment security is lacking because of harsh parenting and childrearing. The combined effect takes a toll on affect regulation which is severely disrupted. Attachment and affect regulation go side by side having equal levels of impact on the adequate functioning of an individual. Without development of unbiased schemas and mentalization abilities, the affect regulation mechanism bears the brunt and is dysregulated. Once again due to inadequate caregiving, dysfunctional coping strategies learnt may further aggravate the problem and entrap the individual in a cycle.

Conclusion

Therefore, it would be wise to take note of the factors that might be contributing to the development of a pervasive and rigid pattern of maladaptive behavior, thought and emotion. We must look for ways to prevent the possible malfunctioning in individuals who have a diathesis for the disorder. Positive and realistic affect regulation methods must be promoted and quality of caregiving should be improved and revised to adapt to the needs of the child. Since, borderline personality disorder is the most commonly diagnosed personality disorder and around 1 - 3% of the world population suffers from it [90], we must undertake immediate and effective preventive measures to retain the damage from spreading further.

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